

Bright from the Start Georgia Department of Early Care and Learning 2 Martin Luther King Jr. Drive SE, 670 East Tower Atlanta, GA 30334

Phone: (404) 657-5562 WWW.DECAL.GA.GOV

Cover Sheet

Arrival: 11:00 AM **Date:** 3/8/2022 VisitType: Licensing Study Departure: 12:00 PM

CCLC-1822

St. Andrews Extended Day Program

4882 Lavista Road Tucker, GA 30084 DeKalb County (770) 934-1461 standschool@sapctucker.org

Mailing Address 4882 Lavista Rd Tucker, GA 30084

Quality Rated: No

Regional Consultant

Roslyn Williams

Phone: (770) 357-7020 Fax: (770) 357-7019

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Compliance Zone Designation				
03/08/2022	Licensing Study	Good Standing		
08/24/2021	Monitoring Visit	Good Standing		
03/31/2021	Licensing Study	Good Standing		

Compliance Zone Designation - A summary measure of a program's 12 month monitoring history, as it pertains to child care health and safety rules. The three compliance zones are good standing, support, and deficient.

Good Standing - Program is demonstrating an acceptable level of performance in meeting

the rules. Support

Program performance is demonstrating a need for improvement in meeting

Deficient Program is not demonstrating an acceptable level of performance in meeting

the rules.

Ratios/License Capacity

Building	Room	Age Group	Staff	Children	NC/C	Max 35 SF.	35 SF. Comp.	Max 25 SF.	25 SF. Comp.	Notes
Main	102	One Year Olds	2	8	С	19	С	NA	NA	Free Play
Main	104	Three Year Olds	2	9	С	17	С	NA	NA	Centers
Main	105		0	0	С	9	С	NA	NA	Not In Use
Main	106		0	0	С	0	С	NA	NA	Not In Use,Story
Main	107	Three Year Olds	2	11	С	13	С	NA	NA	Not In Use,Transitionin g
Main	109	Four Year Olds	2	10	С	18	С	NA	NA	Transitioning
Main	110		0	0	С	17	С	NA	NA	Not In Use
Main	111	Five Year Olds	1	7	С	18	С	NA	NA	Homework
Main	112		0	0	С	17	С	NA	NA	Not In Use
Main	113/115		0	0	С	0	С	NA	NA	Transitioning,Not In Use
Main	114	One Year Olds	2	2	С	15	С	NA	NA	Transitioning,Not In Use
Main	116		0	0	С	17	С	NA	NA	Not In Use
Main	117		0	0	С	15	С	NA	NA	Not In Use
		Total Capacity @35 sq. ft.: 1	75		Total C ft.: 0	apacity @	25 sq.			
Total # C	hildren this Date: 47	Total Capacity @35 sq. ft.: 1	75		Total C	apacity @	25 sq.			·

ft.: 0

Building Playground		Playground Occupancy	Playground Compliance	
Main	PG A	140	С	
Main	PG B	43	С	

Comments

An Administrative Review was conducted on March 25, 2022. Staff files, children's files, training, and background checks were all reviewed.

Plan of Improvement: Developed This Date 03/08/2022

Any rule violation which subjects a child to injury or life-threatening situation or any rule violations previously cited but not corrected, may result in the imposition of an adverse enforcement action. Serious or continued noncompliance may also jeopardize participation in one or more DECAL program(s).



Please refer to the website, http://www.decal.ga.gov/CCS/RulesAndRegulations.aspx, for information regarding October 1, 2018 rule changes about Criminal Records Checks that may affect your facility. In summary,

- New records checks will be required to be completed if a staff member experiences a six month break in service from the child care industry
- New clearance is required at least once every five years
- Any staff member solely responsible for supervising children will be required to have completed a comprehensive background clearance
- All staff members are required to have completed at least a national fingerprint based clearance check
- Any staff member with only the national fingerprint based clearance, must be under constant and direct supervision of a staff member with a satisfactory comprehensive records check clearance
- Facilities are required to use DECAL KOALA for Criminal Records Checks, including to verify portability of an employee





Important Quality Rated/CAPS Update:

As January 1, 2022, child care providers must be Quality Rated to receive Childcare and Parent Services (CAPS). Newly licensed, or new to CAPS providers may be eligible for the new CAPS/QR Provisional Status, allowing for scholarships while working toward a star rating.

Contact the Quality Rated help desk at 855-800-7747 or qualityrated@decal.ga.gov for more information. Free techincal assistance is available!

O.C.G.A. Section 42.1.12(i)(2) requires Bright from the Start: Georgia Department of Early Care and Learning to notify licensed child care programs on accessing and retrieving from the Georgia Bureau of Investigation's (GBI) website a list of the names and addresses of all registered sexual offenders. Please see GBI's website located at http://gbi.georgia.gov to access the Georgia Sex Offender Registry.

Refutation Process:

You have the right to refute any of the citations noted in this report with which you disagree. To refute a citation(s), do the following:

- 1) Log into DECAL KOALA www.decalkoala.com with the userid for your program
- 2) On the home page scroll down to the Inspection Reports and select 'Refute Citation' for the visit report in dispute
- 3) Select the specific rule number(s) that you are refuting, add the reason for disagreement regarding the rule citation, and upload supporting documentation
- 4) Submit the refutation in DECAL KOALA to Child Care Services (CCS) within 10 business days of the completion date.

Your refutation will be forwarded to the appropriate CCS manager, who will follow up with you about your concerns. If you have any guestions about this process, contact our office at 404-657-5562.'

ndrews Presbyterian, Program Official	Date	Roslyn Williams, Consultant	Date



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Findings Report

Date: 3/8/2022 VisitType: Licensing Study Arrival: 11:00 AM Departure: 12:00 PM

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The following information is associated with a Licensing Study:

Activities and Equipment

591-1-1-.03 Activities Not Met

Finding

591-1-1-.03(1) requires the Center to provide a daily planned program of varied and developmentally appropriate activities to promote social, emotional, physical, cognitive, language and literacy growth. Center Staff shall use a variety of teaching methods to accommodate the needs of the children's different learning styles. It was determined based on observation that the Center did not have a current lesson plan available for review in all rooms observed except room 106.

POI (Plan of Improvement)

The Center will plan a program that includes a variety of developmentally appropriate activities that are provided daily, train Staff to use various teaching methods, and monitor both.

Correction Deadline: 3/8/2022

591-1-1-.12 Equipment & Toys(CR)

Not Met

Finding

591-1-1-.12(2) requires that all equipment and furniture be free from hazardous conditions such as, but not limited to, sharp rough edges or toxic paint; and be kept clean. It was determined based on observation that in room 104, the two beige chairs in the reading area were soiled.

POI (Plan of Improvement)

The Center will ensure that equipment and furniture are used by the age-appropriate group of children.

Correction Deadline: 3/31/2022

591-1-1-.35 Swimming Pools & Water-related Activities(CR)

N/A

Comment

Center does not provide swimming activities.

Children's Records

Child # 1 Not Met

"Missing/Incomplete Components"

.08(1)(a)-Work Address Missing,.08(3)-Address of Release Person Missing

Child # 2 Not Met

"Missing/Incomplete Components"

.08(3)-Address of Release Person Missing

Child # 3 Not Met

"Missing/Incomplete Components"

.08(3)-Address of Release Person Missing,.08(1)(a)-Work Address Missing

591-1-1-.08 Children's Records

Not Met

Finding

591-1-1-.08(1) requires the Center Staff to maintain a file for each child while such child is in care and for one year after that child is no longer enrolled. In order for the file to be complete, the file shall contain the following: child's name, birth date, sex, address, living arrangement, name of school if applicable; names of both Parents, home and work addresses, and home and work telephone numbers; name(s) and addresses of the person(s) to whom the child may be released including address, telephone numbers, relationship to child and to Parent(s), and other identifying information; name(s) and telephone number(s) of person(s) to contact in emergencies when the Parent cannot be reached; name and telephone number of the child's primary source of health care; and a statement regarding known allergies, physical problems, mental health disorders, mental retardation or developmental disabilities which limit the child's participation in the program. It was determined based on review of records that Center Staff did not have evidence of addresses of the person(s) to whom the child may be released and work addresses documented on three of three records reviewed.

POI (Plan of Improvement)

Center staff will develop a plan that includes how to obtain all required information for currently enrolled children and how to ensure this is done for future enrollees as well. The plan will also include how and where to maintain files for the required amount of time. The plan will be implemented and followed.

Correction Deadline: 3/8/2022

Facility

591-1-1-.06 Bathrooms Not Met

Finding

591-1-Ī-.06(4) requires a Center first licensed after March 1, 1991, and Centers that remodel or add to existing plumbing facilities, to have the bathroom area fully enclosed and ventilated to the outside of the building with either an open screened window or functioning exhaust fan and duct system and requires Centers without fully enclosed bathrooms to ensure there is adequate ventilation to control odors and adequate sanitation measures to prevent the spread of contagious diseases. It was determined based on observation that the exhaust fans were not working in rooms 102, 106, and the boys and girls bathrooms located in the hallway.

POI (Plan of Improvement)

The Center will fully enclose and ventilate bathroom areas, as required, and will provide adequate ventilation and sanitation in bathrooms that are not fully enclosed.

Correction Deadline: 4/7/2022

591-1-1-.19 License Capacity(CR)

Met

Comment

Licensed capacity observed to be routinely met by center.

591-1-1-.25 Physical Plant - Safe Environment(CR)

Not Met

Comment

Please secure cleaning tools (i.e., broom, plunger) out of reach of children.

Finding

591-1-1-.25(13) requires that potentially hazardous equipment, materials and supplies be stored in a locked area inaccessible to children. It was determined based on observation that in room 113, large white adult tables were leaning up against a wall, unsecured and accessible to children.

POI (Plan of Improvement)

The Center will identify all hazardous items and keep them in a locked area inaccessible to children. The Center will inform all Staff about hazardous items and the safe storage of those items.

Correction Deadline: 3/8/2022

591-1-1-.26 Playgrounds(CR)

Not Evaluated

Comment

Playground not observed on this date due to inclement weather.

Health and Hygiene

591-1-1-.10 Diapering Areas & Practices(CR)

Met

Comment

Hand washing requirements for diapering were discussed with the director on this date.

591-1-1-.17 Hygiene(CR)

Met

Comment

Proper hand washing observed throughout the center.

591-1-1-.20 Medications(CR)

N/A

Comment

The Provider currently does not dispense/administer medication.

Policies and Procedures

591-1-1-.27 Posted Notices

Technical Assistance

Technical Assistance

591-1-1-.27 - Posted notices requirements were discussed with the Director.

Correction Deadline: 3/8/2022

Safety

591-1-1-.05 Animals

N/A

Comment

Center does not keep animals on premises.

591-1-1-.11 Discipline(CR)

Met

Comment

Staff were observed to maintain a positive learning environment on this date.

591-1-1-.13 Field Trips(CR)

Not Evaluated

Comment

Center does not participate in field trips at this time.

591-1-1-.36 Transportation(CR)

Technical Assistance

Technical Assistance

591-1-1-.36(7)(a) - Documentation requirements were discussed with the Director.

Correction Deadline: 3/9/2022

Correction Deadline: 8/25/2021

Corrected on 3/8/2022

.36(7)(b) - The previous citation was corrected. It was determined based on review of records that an emergency medical information record was on file for children transported.

Correction Deadline: 8/24/2021

Corrected on 3/8/2022

.36(7)(d)2. - The previous citation was corrected. It was determined based on review of records that center staff documented with a signature that a second designated Staff person conducted a check of the vehicle.

Sleeping & Resting Equipment

591-1-1-.30 Safe Sleeping and Resting Requirements(CR)

Met

Comment

The correct number of mats, sheets and blankets were observed on this date.

Staff Records

	Staff Records
Records Reviewed: 18	Records with Missing/Incomplete Components: 5
Staff # 1	Met
Staff # 2	Not Met
"Missing/Incomplete Components"	
.24(1)-Education Experience Missing	
Staff # 3	Met
Staff # 4	Not Met
"Missing/Incomplete Components"	
.09-Criminal Records Check Missing	
Staff # 5	Not Met
"Missing/Incomplete Components"	
.24(1)-Education Experience Missing	
Staff # 6	Met
Date of Hire: 12/14/2021	
Staff # 7	Not Met

"Missing/Incomplete Components"

Records Reviewed. 10	records with imasing/moomplete components.
.24(1)-Education Experience Missing	
Staff # 8	Met
Staff # 9	Met
Staff # 10	Met
Date of Hire: 09/10/2019	
Staff # 11	Met
Staff # 12	Met
Staff # 13	Not Met
"Missing/Incomplete Components"	
.24(1)-Education Experience Missing	
Staff # 14	Met
Staff # 15	Met
Staff # 16	Met
Staff # 17	Met
Staff # 18	Met

Staff Credentials Reviewed: 0

591-1-1-.09 Criminal Records and Comprehensive Background Checks(CR)

Not Met

Finding

591-1-1-.09(1)(a) requires that a Center ensure that every actual and potential Director, Employee and Provisional Employee of a Child Care Learning Center submit both a Records Check Application to the Department and Fingerprints to an authorized fingerprinting site. It was determined based on review of records that staff person #3 who was working in the one year-old room did not have a new satisfactory Comprehensive Records Check Determination on file. A one day letter was left.

POI (Plan of Improvement)

IMMEDIATE CORRECTION - The Center will to ensure that every actual and potential Director, Employee and Provisional Employee of a Child Care Learning Center submit both a Records Check Application to the Department and Fingerprints to an authorized fingerprinting site as required. The program's owner or an officer/member of the corporation must view the A to Z Background Check video units pertaining to this records check rule and return the signed affidavit within one week from this visit date. The Center will to ensure the CRC rules are maintained.

Correction Deadline: 3/8/2022

Finding

591-1-1-.09(1)(c) requires the Center to ensure that every Employee has a valid and current satisfactory Comprehensive Records Check Determination on file prior to being present at the Center while any child is present for care or before an individual age 17 or older resides in the Center. The Comprehensive Records Check Determination must have a Records Check Clearance Date that is no older than the preceding 12 months of the hire date; provided, however, if the Employee has had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer, a new satisfactory Comprehensive Records Check Determination is required. It was determined based on review of records that staff person #3 was observed working in the one year-old room without a a new satisfactory Comprehensive Records Check Determination on file. A one day letter was left.

POI (Plan of Improvement)

IMMÈDIATE CORRECTION - The Center will to ensure that every Employee has a valid and current satisfactory Comprehensive Records Check Determination on file prior to being present at the Center while any child is present for care or before an individual age 17 or older resides in the Center. The Comprehensive Records Check Determination must have a Records Check Clearance Date that is no older than the preceding 12 months of the hire date; provided, however, if the Employee has had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer, a new satisfactory Comprehensive Records Check Determination is required. The program's owner or an officer/member of the corporation must view the A to Z Background Check video units pertaining to this records check rule and return the signed affidavit within one week from this visit date. The center will ensure the CRC rules are maintained.

Correction Deadline: 3/8/2022

591-1-1-.14 First Aid & CPR

Not Met

Finding

591-1-1-.14(1) requires the Center Director and, at any given time, at least fifty percent (50%) of the caregiver Staff to successfully complete a biennial training program in cardiopulmonary resuscitation (CPR) and a triennial training program in first aid. The first aid training must be done by certified or licensed health care professionals or trainers and must deal with the provision of emergency care to infants and children. The Center shall maintain current evidence of the successful completion of such training which shall be available to the Department for inspection. It was determined based on review of records that the center did not have evidence of current CPR and first aid training for the Director.

POI (Plan of Improvement)

The Center Director and at least 50% of the caregiver Staff will complete the needed training. The Director will send written verification to the consultant upon completion and will develop a plan to ensure that at least 50% of the caregiver Staff have completed this training at any given time and that evidence of successful completion of the training is on file available for inspection.

Correction Deadline: 4/7/2022

591-1-1-.24 Personnel Records

Not Met

Finding

591-1-1-.24(1) requires the center to maintain a personnel file on the Director, all Employees, Provisional Employees, Personnel, Staff, Students-in-Training, Volunteers, Clerical, Housekeeping, Maintenance, and other Support Staff for the duration of the term of employment plus one calendar year, and it shall contain the following: identifying information to include: name, date of birth, social security number, current address and current telephone number; employment history; as applicable to the position held: evidence of education and qualifying work experience; evidence of all training required by these rules which shall include: title of training, date of training, trainer's signature, location of training and number of clock hours obtained; a statement completed by the staff member that the information provided is true and accurate; any other records required by these rules; and as applicable to the position held, evidence of required orientation including date and signature of person providing the orientation; It was determined based on review of records that the center did not have evidence of education for staff persons #4, #5, #13, and the Director.

POI (Plan of Improvement)

The Center will secure required information for all Personnel. The Center will ensure that complete information is in the personnel file for all Directors, Employees, Provisional Employees, Personnel, Staff, Students-in-Training, Volunteers, Clerical, Housekeeping, Maintenance and other Support Staff.

Correction Deadline: 3/31/2022

591-1-1-.31 Staff(CR) Met

Comment

Staff observed to be compliant with applicable laws and regulations.

Staffing and Supervision

591-1-1-.32 Staff:Child Ratios and Group Size(CR)

Comment

Center observed to maintain appropriate staff:child ratios.

591-1-1-.32 Supervision(CR)

Met

Met

Comment

Staff observed to provide direct supervision and be attentive to children's needs.