STA	OF GF OF C		Bright fro	om the Start Ge 2 Martin Luthe Phone: (404		ive SE, 6 30334	670 East 1	Tower	arning
`	1776				Cover S	heet			
Date:	8/30/2022	VisitType	: Monitorir	ng Visit	Arrival:	1:10 PN	1 De	eparture:	4:00 PM
CCLC	-1822						Regional	Consulta	nt
St. Ar	ndrews Exter	nded Day P	rogram			I	Roslyn Wi	illiams	
	Lavista Road 934-1461 sas						Fax: (770)	70) 357-70) 357-7019 iams@dec	9
4882 La	y Address avista Rd , GA 30084								
Quality R	ated: No								
<u> </u>	Compliance Zo	one Designat	<u>ion</u>						12 month monitoring mpliance zones are good
08/30/202	22 Monitoring	Visit Go	od Standing	standing, support, a		eaith and S	alety fules.	ine thee cor	Inpliance zones are good
03/08/202	22 Licensing	Study Go	od Standing	Good Standing - F	Program is demo the rules.	nstrating ar	n acceptable	level of perfo	ormance in meeting
08/24/202	21 Monitoring	Visit Go	od Standing	Support -	Program perform rules.		C C		nprovement in meeting
					Program is not d the rules.	emonstratir	ng an accep	table level of	performance in meeting

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		0	0	С	19	С	NA	NA	Not In Use
Main	104	Four Year Olds	2	6	С	17	С	NA	NA	Nap
Main	105		0	0	С	9	С	NA	NA	Not In Use
Main	106		0	0	С	0	С	NA	NA	Not In Use
Main	107		0	0	С	13	С	NA	NA	Not In Use
Main	109	Four Year Olds	2	6	С	18	С	NA	NA	Nap
Main	110		0	0	С	17	С	NA	NA	Not In Use
Main	111		0	0	С	18	С	NA	NA	Not In Use
Main	112		0	0	С	17	С	NA	NA	Not In Use
Main	113/115	Two Year Olds and Three Year Olds	3	11	С	0	NC	NA	NA	Nap
Main	114		0	0	С	15	С	NA	NA	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 # Children this Date: 23

Total Capacity @35 sq. ft.: 175

Total Capacity @25 sq. ft.: 0

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

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, <u>http://www.decal.ga.gov/CCS/RulesAndRegulations.aspx</u>, 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 a1 855-800-7747 or <u>qualityrated@decal.ga.gov</u> 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 <u>www.decalkoala.com</u> 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 questions about this process, contact our office at 404-657-5562.'

Bright from the Start recommends that all licensed child care providers carry liability insurance coverage sufficient to protect its clients. If you do not have this liability insurance, you are required to post a notice with ½ inch letters in a conspicuous location in the program, notify the parent or guardian of each child in care in writing, obtain their signature to acknowledge receipt and maintain this written acknowledgment on file at the program at all times while the child attends the program and for 12 months after the child's last date of attendance. (O.C.G.A. Section 20-1A-4)

Lonnette Bruce, Program Official

Date

Date

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

Findings Report

Date: 8/30/2022 VisitType: Monitoring Visit

4882 Lavista Road Tucker, GA 30084 DeKalb County

St. Andrews Extended Day Program

(770) 934-1461 sasdirector@sapctucker.org

Arrival: 1:10 PM Departure: 4:00 PM

Regional Consultant Roslyn Williams

Phone: (770) 357-7020 Fax: (770) 357-7019 roslyn.williams@decal.ga.gov

Activities and Equipment

Mailing Address 4882 Lavista Rd Tucker, GA 30084

CCLC-1822

The following information is associated with a Monitoring Visit:

591-1-1-.03 Activities

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 104.

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: 9/2/2022

Recited on 8/30/2022

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

Correction Deadline: 3/31/2022

Corrected on 8/30/2022

.12(2) - The previous citation was corrected. The consultant observed that the chairs had removed from room 104.

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

Comment

Center does not provide swimming activities.

Children's Records

Page 1 of 5

N/A

Met



Not Met

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(1)(a)-Work Address Missing,.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
Child # 4	Not Met
"Missing/Incomplete Components"	
.08(3)-Address of Release Person Missing,.08(1)(a)-Work Address	Missing
Child # 5	Not Met
"Missing/Incomplete Components"	
.08(1)(a)-Work Address Missing,.08(3)-Address of Release Person	Missing

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

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 parent work addresses documented on five of five 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: 9/2/2022

Recited on 8/30/2022

Facility

Not Met

591-1-1-.06 Bathrooms

Not Met

Finding

591-1-1-.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 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: 9/9/2022

Recited on 8/30/2022

Technical Assistance

591-1-1-.19 - Discussed movement of children to maintain capacities.

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

Not Met

Technical Assistance

Comment

Please be mindful to keep items that pose a hazard inaccessible to children.

Finding

591-1-1-.25(12) requires heating and cooling equipment to be protected to prevent children from touching it. Fans, space heaters, etc. shall be positioned or installed so as to be inaccessible to the children. It was determined based on observation that a fan was positioned and accessible to children in room 109.

POI (Plan of Improvement)

The Center will re-position or re-install equipment, as needed, and will make all such equipment inaccessible to children.

Correction Deadline: 8/30/2022

Correction Deadline: 3/8/2022

Corrected on 8/30/2022 .25(13) - The previous citation was corrected.

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

Comment

Routine playground maintenance was discussed with the director.

Finding

591-1-1-.26(9) requires the playground to be kept clean, free from litter and free of hazards, such as but not limited to rocks, exposed tree roots and exposed sharp edges of concrete. It was determined based on observation that overgrown brush that was accessible to children was growing on the fence and through the resilient surfacing on the large and small playaround. It was further determined that the cement platform on the small playground was not flushed to the ground and posed a potential tripping hazard.

POI (Plan of Improvement)

The Center will remove any litter and fix or remove hazards from the playground and will routinely monitor the playground and remove litter and hazards.

Correction Deadline: 8/30/2022

Health and Hygiene

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

Comment

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

Not Met

Met

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

Comment

Staff were observed to remind children to wash hands.

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

Comment

The Provider currently does not dispense/administer medication.

591-1-1.11 Discipline(CR)

Comment

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

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

Comment

Complete documentation of transportation observed.

Sleeping & Resting Equipment

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

Comment

Pleasant naptime environment observed.

Records Reviewed: 12	Records with Missing/Incomplete Components: 0
Staff # 1	Met
Staff # 2	Met
Staff # 3	Met
Staff # 4	Met
Staff # 5 Date of Hire: 09/10/2019	Met
Staff # 6	Met
Staff # 7	Met
Staff # 8	Met
Staff # 9	Met
Staff # 10	Met
Staff # 11	Met
Staff # 12	Met

Met

N/A

Met

Safety

Met

Met

Staff Records

591-1-109 Criminal Records and Comprehensive Background Checks(CR)	Met
Correction Deadline: 3/8/2022	
Corrected on 8/30/2022	
.09(1)(a)09(1)(c) - The previous citation was corrected. The consultant observed a valid a satisfactory Comprehensive Records Check Determination on file for staff.	and current
Correction Deadline: 3/8/2022	
Corrected on 8/30/2022	
.09(1)(c) - The previous citation was corrected. The consultant observed a valid and curren Comprehensive Records Check Determination on file for staff.	t satisfactory
591-1-114 First Aid & CPR	Met
Correction Deadline: 9/9/2022	
Corrected on 8/30/2022	
.14(1) - The previous citation was corrected. It was determined based on review of records	
.14(1) - The previous citation was corrected. It was determined based on review of records had evidence of current biennial training program in cardiopulmonary resuscitation (CPR)	
.14(1) - The previous citation was corrected. It was determined based on review of records had evidence of current biennial training program in cardiopulmonary resuscitation (CPR) training program in first aid.) and a triennial
.14(1) - The previous citation was corrected. It was determined based on review of records had evidence of current biennial training program in cardiopulmonary resuscitation (CPR) training program in first aid. 591-1-124 Personnel Records Correction Deadline: 3/31/2022 Corrected on 8/30/2022) and a triennial Met
.14(1) - The previous citation was corrected. It was determined based on review of records had evidence of current biennial training program in cardiopulmonary resuscitation (CPR) training program in first aid. 591-1-124 Personnel Records Correction Deadline: 3/31/2022 Corrected on 8/30/2022 .24(1) - The previous citation was corrected. The consultant observed evidence of education) and a triennial Met
.14(1) - The previous citation was corrected. It was determined based on review of records had evidence of current biennial training program in cardiopulmonary resuscitation (CPR) training program in first aid. 591-1-124 Personnel Records Correction Deadline: 3/31/2022 Corrected on 8/30/2022) and a triennial Met
.14(1) - The previous citation was corrected. It was determined based on review of records had evidence of current biennial training program in cardiopulmonary resuscitation (CPR) training program in first aid. 591-1-124 Personnel Records Correction Deadline: 3/31/2022 Corrected on 8/30/2022 .24(1) - The previous citation was corrected. The consultant observed evidence of education for staff.) and a triennial Met onal experience
.14(1) - The previous citation was corrected. It was determined based on review of records had evidence of current biennial training program in cardiopulmonary resuscitation (CPR) training program in first aid. 591-1-124 Personnel Records Correction Deadline: 3/31/2022 Corrected on 8/30/2022 .24(1) - The previous citation was corrected. The consultant observed evidence of education for staff. 591-1-131 Staff(CR)) and a triennial Met onal experience

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

Technical Assistance

591-1-1-.32(4) - Mixed age groups procedures were discussed with the Director.

Correction Deadline: 8/30/2022

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

Comment

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

Met

Technical Assistance