



**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

**Date:** 3/1/2019    **VisitType:** Licensing Study    **Arrival:** 2:40 PM    **Departure:** 4:30 PM

**CCLC-30654**

**YMCA Pryme Tyme Southwest Middle School**

6030 Ogeechee Road Savannah, GA 31419 Chatham County  
 (912) 663-5111 ginac@ymcaofcoastalga.org

**Regional Consultant**

Kimberly Stoy

Phone: (678) 747-6836  
 Fax: (706) 314-7859  
 kimberly.stoy@decal.ga.gov

**Mailing Address**

6400 Habersham St. Suite A  
 Savannah, GA 31405

**Quality Rated:** No

<b>Compliance Zone Designation</b>			<b>Compliance Zone Designation</b> - 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.  <b>Good Standing</b> - Program is demonstrating an acceptable level of performance in meeting the rules. <b>Support</b> - Program performance is demonstrating a need for improvement in meeting rules. <b>Deficient</b> - Program is not demonstrating an acceptable level of performance in meeting the rules.
03/01/2019	Licensing Study	Good Standing	
08/29/2018	Monitoring Visit	Good Standing	
02/06/2018	Monitoring Visit	Good Standing	

**Ratios/License Capacity**

<u>Building</u>	<u>Room</u>	<u>Age Group</u>	<u>Staff</u>	<u>Children</u>	<u>NC/C</u>	<u>Max 35 SF.</u>	<u>35 SF. Comp.</u>	<u>Max 25 SF.</u>	<u>25 SF. Comp.</u>	<u>Notes</u>
Main	801	Six Year Olds and Over	2	8	C	23	C	NA	NA	Transitioning,Snack
Total Capacity @35 sq. ft.: 23						Total Capacity @25 sq. ft.: 0				
Total # Children this Date: 8			Total Capacity @35 sq. ft.: 23			Total Capacity @25 sq. ft.: 0				

<u>Building</u>	<u>Playground</u>	<u>Playground Occupancy</u>	<u>Playground Compliance</u>
Main	A	26	C

**Comments**

This was the second visit of the fiscal year.

Consultant left a copy of the emergency preparedness plan as well as the new emergency drill form.

Plan of Improvement: Developed This Date 03/01/2019

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.dec.state.ga.us/CCS/Regulations.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

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), e-mail the following information to [CCSRefutations@dec.state.ga.us](mailto:CCSRefutations@dec.state.ga.us).

- 1) Facility name, license number and visit date
- 2) Your name, title/relationship to the facility, e-mail address & up to two phone number(s) where you can be reached
- 3) Specific rule number(s) that you are refuting, along with your concerns or questions regarding the rule citation

Refutations must be submitted to Child Care Services (CCS) within 10 business days of the completion date.

A sample form for submitting a refutation can be found at: <http://dec.state.ga.us/ChildCareServices/RefutationInformation.aspx>

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)



**Important New Deadlines:**

Your program must be Quality Rated by December 31, 2020 in order to continue to receive Childcare and Parent Services (CAPS).

Get started today! Sign up by completing a short online application: <https://qualityrated.dec.state.ga.us/>  
Request free technical assistance to help you earn your star rating by contacting the Quality Rated help desk at 855-800-7747 or [qualityrated@dec.state.ga.us](mailto:qualityrated@dec.state.ga.us)

Brittany Richardson, Program Official

Date

Kimberly Stoy, Consultant

Date



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### Findings Report

**Date:** 3/1/2019      **VisitType:** Licensing Study      **Arrival:** 2:40 PM      **Departure:** 4:30 PM

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The following information is associated with a Licensing Study:

### Activities and Equipment

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

**Met**

**Comment**

A variety of equipment and toys were observed throughout the center.

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

**N/A**

**Comment**

Center does not provide swimming activities.

### Children's Records

**Records Reviewed: 5**

**Records with Missing/Incomplete Components: 3**

Child # 1

Not Met

"Missing/Incomplete Components"

.08(1)-Doctor, Clinic, Phone Numbers

Child # 2

Not Met

"Missing/Incomplete Components"

.08(1)-No Record

Child # 3

Not Met

"Missing/Incomplete Components"

.08(1)-Emergency Contact information Missing

Child # 4

Met

Child # 5

Met

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**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 a review of records that one of four records was missing emergency contact information, one of four records was missing physician information, and one child did not have an enrollment form on site.

**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: 3/1/2019**

<b>Facility</b>
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**591-1-1-.19 License Capacity(CR)****Met****Comment**

Licensed capacity observed to be met on this date.

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

No hazards observed accessible to children on this date.

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**591-1-1-.26 Playgrounds(CR)****Not Evaluated****Comment**

Playground not observed on this date due to inclement weather.

<b>Food Service</b>
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**591-1-1-.15 Food Service & Nutrition****Technical Assistance****Technical Assistance**

591-1-1-.15(1) - Discussed with Director about ensuring that USDA requirements are being met for afternoon snacks.

**Correction Deadline: 3/1/2019****Technical Assistance**

591-1-1-.15(5) - Discussed with Director about ensuring menus are available for consultant's review.

**Correction Deadline: 3/1/2019**

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**591-1-1-.18 Kitchen Operations****Met****Comment**

This is an after school program only and does not have a kitchen.

<b>Health and Hygiene</b>
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**591-1-1-.10 Diapering Areas & Practices(CR)** **Met**

**Comment**

There were no diapered children enrolled in the program on this date.

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

**Comment**

Proper hand washing observed throughout the center.

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**591-1-1-.20 Medications(CR)** **N/A**

**Comment**

The Provider currently does not dispense/administer medication.

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**Policies and Procedures**

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**591-1-1-.21 Operational Policies & Procedures** **Not Met**

**Finding**

591-1-1-.21(1)(p) requires the Center to have a written plan for handling emergencies, including but not limited to severe weather, loss of electrical power or water and death, serious injury or loss of a child, a threatening event, or natural disaster which may occur at the Center; to have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, and continuity of operations. The plan must apply to all children in care and include specific accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions and shall include assurance that no Center Personnel will impede in any way the delivery of emergency care or services to a child by licensed or certified emergency health care professionals. It was determined based on a review of records and Director's statement that the program does not have a written emergency preparedness plan.

**POI (Plan of Improvement)**

The Center will write or revise an emergency plan that includes all of the required items. Consultant left a copy of the emergency preparedness plan.

**Correction Deadline: 3/6/2019**

**Finding**

591-1-1-.21(3) requires that the Center conduct drills for fire, tornado and other emergency situations. The fire drills will be conducted monthly and tornado and other emergency situation drills will be conducted every six months. The Center shall maintain documentation of the dates and times of these drills for two years. It was determined based on a review of records that emergency drills were not conducted for the months of August, September, October, November, or December 2018 or for February 2019.

**POI (Plan of Improvement)**

The Center will hold the drills as required and keep the documentation of the drills on file for two years.

**Correction Deadline: 3/6/2019**

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**Safety**

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**591-1-1-.05 Animals** **N/A**

**Comment**

Center does not keep animals on premises.

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

**Comment**

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

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**591-1-1-.13 Field Trips(CR)** **N/A**

**Comment**

Center does not participate in field trips at this time.

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

N/A

**Comment**

Center does not provide routine transportation.

**Sleeping & Resting Equipment**

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

N/A

**Comment**

Program does not provide a nap time.

**Staff Records**

**Records Reviewed: 2**

**Records with Missing/Incomplete Components: 1**

Staff # 1

Not Met

Date of Hire: 11/13/2018

"Missing/Incomplete Components"

.24(1)-No Record

Staff # 2

Met

Date of Hire: 08/04/2017

**Staff Credentials Reviewed: 2**

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

**Technical Assistance**

**Technical Assistance**

591-1-1-.09(1)(j) - Discussed with Director that criminal record check determination letters should be ported when the employee first starts. The Director began employment in November 2018 and the criminal records check determination was ported on February 27, 2019.

**Correction Deadline: 3/1/2019**

**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 a review of staff records and the Director's statement that the Director is not current in CPR and first aid training.

**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: 3/31/2019**

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**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 a review of staff records that the Director did not have a personnel file on site.

**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: 3/6/2019**

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**591-1-1-.33 Staff Training****Not Met****Finding**

591-1-1-.33(3) requires each staff member with direct care responsibilities to complete health and safety training at the time of employment that will count toward required annual training: Staff employed prior to September 30, 2016 will complete the training by December 29, 2016 and Staff employed after September 30, 2016 will complete the health and safety training within the first 90 days of employment. It was determined based on a review of staff records that an employee hired November 13, 2018 did not complete the Health and Safety Orientation within the first ninety days of employment.

**POI (Plan of Improvement)**

The Center will develop and implement a plan to schedule and track this training for all employees based on their hire dates.

**Correction Deadline: 3/31/2019**

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**591-1-1-.31 Staff(CR)****Not Met****Finding**

591-1-1-.31(1)(c) requires that a copy and/or written verification of the credential or degree awarded to the Director by the technical college, university, school or Department-approved trainer listed in 591-1-1-.31(1)(b)2. (i) through (xiii) be maintained by the Center in the Director's file and such documentation shall be available for inspection by Department staff upon request. It was determined based on a review of staff records that the Director did not have a copy or written verification of a credential on site.

**POI (Plan of Improvement)**

The Center will obtain the written verification from the Director, place it in the Director's file, and provide it to the Department if requested.

**Correction Deadline: 3/1/2019**

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<b>Staffing and Supervision</b>
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**591-1-1-.32 Staff:Child Ratios and Group Size(CR)****Met****Comment**

Center observed to maintain appropriate staff:child ratios.

**Comment**

Adequate supervision observed on this date.