



**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:** 7/12/2022    **VisitType:** Incident Investigation & Follow Up    **Arrival:** 12:55 PM    **Departure:** 6:50 PM

**CCLC-51273**

**Legacy Academy Sugarloaf**

3515 Sugarloaf Parkway Lawrenceville, GA 30044 Gwinnett County  
 (770) 682-3028 monique@legacyacademy.com

**Regional Consultant**

Dianne Clarke

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**Mailing Address**  
Same

**Quality Rated:** ★ ★

<b>Compliance Zone Designation</b>		
07/12/2022	Incident Investigation Closure	Good Standing
07/12/2022	Incident Investigation & Follow Up	Good Standing
04/27/2022	Complaint Investigation & 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 rules.

**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	A	Infants	2	7	C	12	C	NA	NA	Feeding, Free Play, Nap
Main	B	One Year Olds	1	4	C	12	C	NA	NA	Nap
Main	C	One Year Olds	1	7	C	20	C	NA	NA	Nap
Main	D	Two Year Olds	1	10	C	29	C	NA	NA	Nap
Main	E	Six Year Olds and Over	1	16	C	27	C	38	C	Free Play
Main	F	Five Year Olds and Six Year Olds and Over	1	18	C	24	C	NA	NA	Nap
Main	G		0	0	C	30	C	NA	NA	
Main	H	Three Year Olds	1	14	C	36	C	NA	NA	Nap
Main	I	Four Year Olds	1	11	C	43	C	NA	NA	Nap

Total Capacity @35 sq. ft.: 233

Total Capacity @25 sq. ft.: 244

Total # Children this Date: 87

Total Capacity @35 sq. ft.: 233

Total Capacity @25 sq. ft.: 244

Building	Playground	Playground Occupancy	Playground Compliance
Main	A Inf - 2 yrs.	60	C
Main	B 5 yrs. - 12 yrs.	104	C
Main	C 3 yrs. - 4 yrs.	109	C

## Comments

This was an incident investigation follow up visit.

Plan of Improvement: No Plan Developed

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.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

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](http://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 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 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 1 855-800-7747 or [qualityrated@dec.ga.gov](mailto:qualityrated@dec.ga.gov) for more information. Free technical assistance is available!**

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Monique Smith, Program Official

Date

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Dianne Clarke, Consultant

Date



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**(Findings Report)**

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The following information is associated with a Incident Investigation & Follow Up:

**Facility**

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

**Not Met**

**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 the following hazards were observed to be accessible:

- A: The bottom drawer on the second set of drawers from left to right was observed to be unlocked and diaper cream were accessible.
- D: A child's bag was observed to contain wipes with packaging that read keep out of reach of children.
- F: A toilet brush was observed to be accessible in an unlocked cabinet beneath the sink.
- H: In an unlocked cabinet under the sink, anti-itch lotion, sunscreen and boxes of Borax were observed to be accessible.
- I: In and unlocked cabinet, tape dispenser with a sharp edge was observed to be accessible.

**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. Some items were removed during the visit.

**Correction Deadline: 7/12/2022**

**Recited on 7/12/2022**

**Finding**

591-1-1-.25(3) requires the Center and surrounding premises to be kept clean, free of debris and in good repair. Hygienic measures such as, but not limited to, screened windows and proper waste disposal procedures shall be utilized to minimize the presence of rodents, flies, roaches and other vermin at the Center. It was determined based on observation that the following items in the classrooms were observed to be in need of repair:

- G: At the first sink, the top of the hinge on the door was observed to be broken.

**POI (Plan of Improvement)**

The Center will have the Center and surrounding areas cleaned, make repairs where needed, and remove all debris is removed. The Center will implement a plan to keep areas clean and in good repair that includes regular monitoring. The director stated that the maintenance man will come on Friday to repair the door.

Correction Deadline: 7/19/2022

Recited on 7/12/2022

**Health and Hygiene**

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

Met

Correction Deadline: 4/27/2022

Corrected on 7/12/2022

.17(2) - The previous citation was observed to be corrected in that the children are changed every two hours. Please ensure that staff are checking children who urinate more frequently.

**Policies and Procedures**

591-1-1-.21 Operational Policies & Procedures

Not Met

**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 the emergency procedure plan was completed on June 15, 2022. A month after the correction deadline.

**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: 7/19/2022

Recited on 7/12/2022

**Staff Records**

Records Reviewed: 23

Records with Missing/Incomplete Components: 2

Staff # 9

Not Met

Date of Hire: 03/21/2022

"Missing/Incomplete Components"

.33(3)-Health & Safety Certificate,.14(2)-CPR missing,.14(2)-First Aid Missing

Staff # 12

Not Met

Date of Hire: 03/21/2022

"Missing/Incomplete Components"

.33(3)-Health & Safety Certificate

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

Met

Correction Deadline: 4/27/2022

Corrected on 7/12/2022

.09(1)(j) - The previous citation was observed to be corrected in that the employee is no longer employed. Please ensure that all staff has been electronically ported or has a completed records check determination before being present at the facility.

**Finding**

591-1-1-.14(2) requires a Staff member who is trained in CPR and first aid to be on the premises and on any field trip whenever any child is present. In addition, Staff who provide direct care to children must satisfactorily obtain certification in first aid and CPR by December 29, 2016 if employed prior to September 30, 2016 and within 90 days of their hire date if employed after September 30, 2016. It was determined based on a review of records that staff #9 did not have evidence of CPR and First Aid completed within their 90 day period.

**POI (Plan of Improvement)**

The Center will develop a schedule to ensure there is always a staff person with current first aid and CPR training present and will develop and implement a plan to ensure all staff members have satisfactorily completed first aid and CPR training by the specified date.

**Correction Deadline: 8/12/2022**

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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 orientation training within the first 90 days of employment. The state-approved training hours obtained will count toward required first year training hours. The training must address the following health and safety topics: prevention and control of infectious diseases (including immunizations); prevention of sudden infant death syndrome and use of safe sleeping practices; administration of medication, consistent with standards for parental consent; prevention of and response to emergencies due to food and allergic reactions; building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic; prevention of shaken baby syndrome, abusive head trauma and child maltreatment; emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility); handling and storage of hazardous materials and the appropriate disposal of bio contaminants; precautions in transporting children; recognition and reporting of child abuse and neglect; and child development. It was determined based on a review of records that staff #9 and #12 did not have evidence of Health and Safety Orientation Training completed within their 90 day period.

**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 and will ensure that the training includes all required components as required.

**Correction Deadline: 8/12/2022**