



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

Date: 8/3/2022 **VisitType:** Licensing Study **Arrival:** 10:30 AM **Departure:** 1:00 PM

CCLC-9054

ABC Learning Academy

5195-A Old National Hwy College Park, GA 30349 Fulton County
 (404) 767-4480 abclearnacademy@aol.com

Regional Consultant

Princess Walton

Phone: (770) 357-7030

Fax: (770) 357-7029

princess.walton@decals.ga.gov

Mailing Address

Same

Quality Rated: ★

Compliance Zone Designation			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.
08/03/2022	Licensing Study	Good Standing	
01/31/2022	Monitoring Visit	Good Standing	
09/29/2021	Licensing Study	Good Standing	

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	Room A-FR	Five Year Olds and Six Year Olds and Over	1	36	NC	26	NC	NA	NA	Free Play, Outside, Transitioning
Main	Room B-FL		0	0	C	27	C	NA	NA	
Main	Room C-2R	Three Year Olds	1	15	NC	11	NC	NA	NA	Centers
Main	Room D-Back		0	0	C	22	C	30	C	
Main	Room E-Middle	Two Year Olds	1	10	C	29	C	NA	NA	Nap, Diapering
Main	Room F-2L	Infants	3	18	C	27	C	NA	NA	Free Play, Nap
Total Capacity @35 sq. ft.: 142					Total Capacity @25 sq. ft.: 150					
Total # Children this Date: 79			Total Capacity @35 sq. ft.: 142			Total Capacity @25 sq. ft.: 150				

Building	Playground	Playground Occupancy	Playground Compliance
Main	Infants - Toddlers	8	C
Main	School - Age	36	C

Comments

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

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.dec.state.ga.us/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@dec.state.ga.us for more information. Free technical 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 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)

Pamila Davis, Program Official

Date

Princess Walton, Consultant

Date



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Findings Report

Date: 8/3/2022 **VisitType:** Licensing Study **Arrival:** 10:30 AM **Departure:** 1:00 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(2) requires the Center to keep current lesson plans on site that reflect appropriate instruction practices and activities to support children's development The Center shall have sufficient and varied play and learning equipment and materials to support the above program of activities in all developmental areas. It was determined based on consultant observation that the classrooms in use did not have a current lesson plan posted.

POI (Plan of Improvement)

The Center will keep current lesson plans on site that include appropriate instruction practices and activities and will have sufficient and varied play and learning equipment and materials to support the activities.

Correction Deadline: 8/3/2022

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

Met

Comment

Equipment and furniture observed to be properly secured, as applicable.

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

Met

Comment

Center does not provide swimming activities.

Facility

591-1-1-.06 Bathrooms

Technical Assistance

Technical Assistance

591-1-1-.06(7) - Please ensure classrooms are cleaned.

Correction Deadline: 8/3/2022

591-1-1-.19 License Capacity(CR)**Not Met****Finding**

591-1-1-.19(1) requires a Center to provide 35 square feet of usable space per child, which will determine the Center's License capacity. It was determined based on consultant observation that Room A was observed to have 36 children and was licensed for 26 and room C had 15 children and was licensed for 11.

POI (Plan of Improvement)

The Center will limit the number of children in this space to the licensed capacity.

Correction Deadline: 8/3/2022

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

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

591-1-1-.26 Playgrounds(CR)**Not Met****Finding**

591-1-1-.26(2) requires the center to provide at least one hundred square feet of outside play space for each child using the space at one time. It was determined based on consultant observation that the playground was observed to have 44 children on it and is license for 36.

POI (Plan of Improvement)

The Center will limit the number of children using the space at one time.

Correction Deadline: 9/16/2022**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 consultant observation that most of the playground equipment was rustic. Consultant observed the red/blue sea saw with no sit.

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: 8/3/2022

Food Service

591-1-1-.15 Food Service & Nutrition**Not Met****Finding**

591-1-1-.15(2) requires that a signed written feeding plan for children less than one (1) year of age shall be obtained from Parent(s) and that instructions from the Parent(s) shall be updated regularly as new foods are added or other dietary changes are made. The feeding plan shall be posted in the child's assigned room and must include the child's feeding schedule, the amount of formula or breast milk to be given, instructions for the introduction of solid foods, the amount of food to be given and notation of any type(s) of commercially premixed formula which may not be used in an emergency because of food allergies. It was determined based on consultant review of files that the did not have infant feeding plans for infants in care as required.

POI (Plan of Improvement)

The Center Director will develop and implement a plan to obtain and post the completed feeding plan as part of the enrollment process and to have parents update the plans on a regular basis that will include center staff involved with enrollment and those working in the infant classrooms.

Correction Deadline: 9/8/2022

Finding

591-1-1-.15(5) requires that the Center provide a menu listing all meals and snacks to be served during the current week except for School-age Centers where the food may be provided by the Parent(s) by agreement between the School-age Center and the Parent(s). Substitutions shall be recorded on the posted menu and menus shall be retained at the Center for six (6) months. It was determined based on consultant that the center did not have a current menu posted.

POI (Plan of Improvement)

The Center will list all of the current week's meals and snacks and all substitutions on the menu and keep past menus on file for six months and will implement a system to monitor this.

Correction Deadline: 8/3/2022

Health and Hygiene

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

Not Met

Finding

591-1-1-.10(4) requires that if diapers are changed on a diaper changing surface, the surface shall be smooth, nonporous, and equipped with a guard or rails to prevent falls. Between each diaper change, the diaper changing surface shall be cleaned with a disinfectant and dried with a single-use disposable towel. It was determined based on consultant observation that diapering changing tables were not cleaned and had tears on them.

POI (Plan of Improvement)

The Center will ensure there is a smooth, nonporous changing surface that has a guard or rails for safety in each classroom that houses children wearing diapers. Center Staff will be trained and have adequate supplies to properly clean the diaper changing surface between each diaper change.

Correction Deadline: 8/3/2022

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

Technical Assistance

Technical Assistance

591-1-1-.17(8) - Consultant reminded to staff to wash hands after diapering.

Correction Deadline: 8/3/2022

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

Met

Comment

The Provider currently does not dispense/administer medication.

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 consultant observation that the center did not have the required fire drills and tornado drills posted..

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: 8/8/2022

591-1-1-.29 Required Reporting**Not Met****Finding**

591-1-1-.29(5) requires the administrator of a Center to submit the annual report within 30 days when the Department requests an annual report. It was determined based on review of documents that the consultant was unable to review annual records due to the information not being submitted as requested.

POI (Plan of Improvement)

The Center will complete and submit the report as required.

Correction Deadline: 9/2/2022**Safety**

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

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

591-1-1-.36 Transportation(CR)**Not Met****Finding**

591-1-1-.36(1)(a) requires that transportation rules apply to all transportation provided by the licensee or on behalf of the licensee, regardless of whether the person is employed by the licensee or if a fee is charged or not. It was determined based on review of documents that the Consultant was unable to review transportation records due to the information not being submitted as requested.

POI (Plan of Improvement)

The center will apply these rules to all transportation provided by or on behalf of the licensee/center.

Correction Deadline: 8/8/2022**Sleeping & Resting Equipment**

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

Please ensure that cribs/cots are labeled for individual use.

Staff Records**Records Reviewed: 13****Records with Missing/Incomplete Components: 8**Staff # 1 Not Met"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing,.24(1)-Evidence of Orientation Missing

Staff # 2 Not Met"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing,.24(1)-Evidence of Orientation Missing

Staff # 3 Not Met

Date of Hire: 10/04/2018

"Missing/Incomplete Components"

Records Reviewed: 13

Records with Missing/Incomplete Components: 8

.14(2)-CPR missing,.14(2)-First Aid Missing,.36(3)(a-b)-2 hrs. Transportation Training missing,.24(1)-Evidence of Orientation Missing

Staff # 4 Not Met

Date of Hire: 01/01/2000

"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing

Staff # 5 Not Met

"Missing/Incomplete Components"

.24(1)-Evidence of Orientation Missing,.14(2)-CPR missing,.14(2)-First Aid Missing

Staff # 6 Not Met

"Missing/Incomplete Components"

.24(1)-Evidence of Orientation Missing

Staff # 7 Met

Staff # 8 Not Met

Date of Hire: 05/23/2018

"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing,.24(1)-Evidence of Orientation Missing

Staff # 9 Met

Staff # 10 Met

Staff # 11 Not Met

Date of Hire: 01/01/2000

"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing

Staff # 12 Met

Staff # 13 Met

Staff Credentials Reviewed: 1

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

Comment

Criminal record checks were observed to be complete.

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 consultant reviewed of staff files that director and less than 50% of staff did not have the required 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: 9/2/2022

591-1-1-.33 Staff Training

Not Met

Finding

591-1-1-.33(1) requires all Employees and Provisional Employees to receive Initial Center orientation prior to assignment to children or task. It was determined based on review of staff files that no staff orientation was uploaded as required.

POI (Plan of Improvement)

The Center will develop and provide orientation for all new Staff prior to their staff's assignment to children or task.

Correction Deadline: 8/3/2022

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

Met

Comment

Discussed that all lead staff must enroll in an approved education program within 6 months of hire and complete degree within 18 months.

Staffing and Supervision

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

Not Met

Finding

591-1-1-.32(1) requires the Center to maintain the required Staff:child ratios as follows: under 1 year or under 18 months if not walking = 1:6; 1 year and walking = 1:8; 2 years = 1:10; 3 years = 1:15; 4 years = 1:18; 5 years = 1:20;and 6 years and older = 1:25. A Center must establish groupings of children for care with maximum group sizes as follows: under 1 year = 12; under 18 months/not walking = 12; 1 year and walking = 16; 2 years = 20; 3 years = 30; 4 years = 36; 5 years = 40; and 6 years and older = 50. It was determined based on consultant observation that room A had a ratio of 1:36 5 years and older.

POI (Plan of Improvement)

The Center will hire additional Staff or reschedule current Staff to meet required Staff:child ratios and will organize children into groups that meet requirements.

Correction Deadline: 8/3/2022

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

Met

Comment

Adequate supervision observed on this date.