



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: 6/19/2019 **VisitType:** Licensing Study **Arrival:** 12:00 PM **Departure:** 4:30 PM

CCLC-988

Kids 'R Kids #20

20 Satellite Blvd. Suwanee, GA 30024 Gwinnett County
 (770) 945-8400 kidsrk2@bellsouth.net

Regional Consultant

Mandi Sloan

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mandi.sloan@dec.al.gov

Mailing Address

Same

Quality Rated: No

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. 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.
06/19/2019	Licensing Study	Good Standing	
12/14/2018	Complaint Closure	Good Standing	
11/02/2018	Complaint Investigation Follow Up	Good Standing	

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-1L	Infants	2	7	C	16	C	NA	NA	Floor Play,Nap,Feeding
Main	B-2L	Infants and One Year Olds	2	8	C	15	C	NA	NA	Nap,Floor Play,Feeding
Main	C-3L	One Year Olds	1	8	C	16	C	NA	NA	Nap
Main	D-Dining		0	0	C	24	C	33	C	
Main	E-Middle	Three Year Olds and Four Year Olds	2	20	C	27	C	38	C	Nap,Transitioning
Main	F-Pre-K Left Side (gym)	Six Year Olds and Over	2	21	C	32	C	NA	NA	Transitioning,Art
Main	G-Pre-K right side (gym)	Six Year Olds and Over	2	21	C	20	NC	NA	NA	Art,Transitioning
Main	H-1R	One Year Olds and Two Year Olds	1	7	C	22	C	NA	NA	Nap
Main	I-2R	Two Year Olds	1	10	C	22	C	NA	NA	Transitioning,Nap
Main	J-3R	Two Year Olds and Three Year Olds	2	16	C	22	C	NA	NA	Transitioning,Nap
Main	K-4R	Three Year Olds	1	9	C	22	C	NA	NA	Nap
Main	L-5R	Six Year Olds and Over	2	19	C	22	C	NA	NA	Field Trip,Transitioning

Total Capacity @35 sq. ft.: 260

Total Capacity @25 sq. ft.: 280

Building	Playground	Playground Occupancy	Playground Compliance
Main	Playground A-left front	64	C
Main	Playground B- Left Back	104	C
Main	Playground C-Right Back	26	C
Main	Playground D-Right Front	44	C

Comments

The purpose of today's visit is to conduct a Licensing Study.

Plan of Improvement: Developed This Date 06/19/2019

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.

- 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

Sanam Mirghahari, Program Official

Date

Mandi Sloan, Consultant

Date



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Findings Report

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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) **Met**

Comment

Center does not provide swimming activities.

Facility

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**

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 the following hazards were accessible:
Room E-Middle: Containers of sunscreen were found in one child's cubby and one child's backpack, accessible to children.

F- Pre-K Gym; Left Side: One bottle of vinegar, one bottle of rubbing alcohol and one container of hand sanitizer were found in an unlocked cabinet, 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: 6/19/2019

Recited on 6/19/2019

Finding

591-1-1-.25(17) requires that the Center premises be free of plants and shrubs which are poisonous or hazardous. It was determined based on observation that holly bushes with prickly leaves were growing through the playground fence on the front, left infant/ toddler playground.

POI (Plan of Improvement)

The harmful item will be removed.

Correction Deadline: 6/19/2019

591-1-1-.26 Playgrounds(CR)**Met****Comment**

Discussed maintenance of resilient surface. Please fluff and redistribute.

Food Service**591-1-1-.15 Food Service & Nutrition****Met****Comment**

Please ensure that infant feeding forms are updated regularly.

Health and Hygiene**591-1-1-.10 Diapering Areas & Practices(CR)****Met****Comment**

Staff state proper knowledge of diapering procedures.

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

Staff stated proper knowledge of hand washing procedures.

591-1-1-.20 Medications(CR)**Technical Assistance****Technical Assistance**

591-1-1-.20(2) - Consultant discussed with provider to ensure medical authorization dates do not exceed two weeks.

Correction Deadline: 6/19/2019

Policies and Procedures**591-1-1-.29 Required Reporting****Met****Comment**

Discussed reporting requirements.

Safety**591-1-1-.05 Animals****Met****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)**Met****Comment**

Please denote the full address of field trip destination.

591-1-1-.36 Transportation(CR)**Technical Assistance****Comment**

Paperwork, checklist, permission forms, annual inspection form and proper check of the vehicle after transportation were discussed with the director.

Technical Assistance

591-1-1-.36(4)(b) - Consultant discussed with provider to ensure the seats on the two large buses (PAG 9113 and PBI 982) are kept in good repair.

Correction Deadline: 6/20/2019**Technical Assistance**

591-1-1-.36(4)(f)1. - Consultant discussed with provider to ensure all seat belt straps have working buckles in bus with tag number DJT488 even when not in use. Provider stated this bus is only parked on the corner for marketing reasons.

Correction Deadline: 6/20/2019

Sleeping & Resting Equipment

591-1-1-.30 Safe Sleeping and Resting Requirements(CR)**Not Met****Finding**

591-1-1-.30(1)(a)3 requires that each crib shall have only an individual, tight-fitting sheet which is changed daily or more often as needed and prior to a change of occupant. It was determined based on observation that seven out of seven sheets in Room A-1L were not tight fitting with infants asleep in three of these cribs. It was also determined that eight of eight sheets in Room B-2L were not tight fitting with infants asleep in one of these cribs.

POI (Plan of Improvement)

The center will ensure that each crib has an individual, tight-fitting sheet which is changed daily or more often as needed and prior to a change of occupant.

Correction Deadline: 6/19/2019**Finding**

591-1-1-.30(2) requires the Center to provide a safe sleep environment in accordance with American Academy of Pediatrics (AAP), Consumer Product Safety Commission (CPSC) and American Society for Testing and Materials (ASTM) recommendations as listed in these rules for all infants. Center Staff shall place an infant to sleep on the infant's back in a crib unless the Center has been provided a physician's written statement authorizing another sleep position for that particular infant that includes how the infant shall be placed to sleep and a time frame that the instructions are to be followed. When an infant can easily turn over from back to front and back again, Staff shall continue to put the infant to sleep initially on the infant's back but allow the infant to roll over into his or her preferred position and not re-position the infant. Sleepers, sleep sacks and wearable blankets that fit according to the commercial manufacturer's guidelines and will not slide up around the infant's face may be used when necessary for the comfort of the sleeping infant. Swaddling shall not be used unless the Center has been provided a physician's written statement authorizing its use for a particular infant that includes instructions and a time frame for swaddling the infant. Center Staff shall not place objects or allow objects to be placed in or on the crib with an infant such as but not limited to toys, pillows, quilts, comforters, bumper pads, sheepskins, stuffed toys, or other soft items and shall not attach objects or allow objects to be attached to a crib with a sleeping infant, such as, but not limited to, crib gyms, toys, mirrors and mobiles. It was determined based on observation that cloth bibs were attached to seven cribs in Infant Room A-1L; three cribs were in use.

POI (Plan of Improvement)

The Center will take all steps necessary to provide a safe sleep environment for infants as listed in these rules; will train Staff to follow these rules; and will monitor for compliance.

Correction Deadline: 6/19/2019

Staff Records

Records Reviewed: 26

Records with Missing/Incomplete Components: 3

Staff # 1	Met
Date of Hire: 10/18/2017	
Staff # 2	Met
Date of Hire: 08/05/2002	
Staff # 3	Met
Date of Hire: 11/01/1992	
Staff # 4	Met
Date of Hire: 01/07/2015	
Staff # 5	Met
Date of Hire: 08/03/2015	
Staff # 6	Met
Date of Hire: 03/08/2018	
Staff # 7	Met
Date of Hire: 06/12/2018	
Staff # 8	Met
Date of Hire: 08/03/2016	
Staff # 9	Not Met
Date of Hire: 09/29/2018	
<u>"Missing/Incomplete Components"</u>	
.09-Criminal Records Check Missing	
Staff # 10	Not Met
Date of Hire: 01/23/2018	
<u>"Missing/Incomplete Components"</u>	
.14(2)-CPR missing,.14(2)-First Aid Missing	
Staff # 11	Not Met
Date of Hire: 03/11/2019	
<u>"Missing/Incomplete Components"</u>	
.33(3)-Health & Safety Certificate	

Staff # 12 Date of Hire: 08/22/2016	Met
Staff # 13 Date of Hire: 01/21/2019	Met
Staff # 14 Date of Hire: 03/01/2019	Met
Staff # 15 Date of Hire: 08/01/2018	Met
Staff # 16 Date of Hire: 07/01/2016	Met
Staff # 17 Date of Hire: 05/22/2008	Met
Staff # 18 Date of Hire: 03/22/2019	Met
Staff # 19 Date of Hire: 06/23/2010	Met
Staff # 20 Date of Hire: 08/19/2015	Met
Staff # 21 Date of Hire: 07/24/2017	Met
Staff # 22 Date of Hire: 06/11/2018	Met
Staff # 23 Date of Hire: 04/09/2019	Met
Staff # 24 Date of Hire: 12/30/2019	Met
Staff # 25 Date of Hire: 01/04/2018	Met
Staff # 26 Date of Hire: 05/05/2017	Met

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

Not Met

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 that one employee did not possess a current satisfactory Comprehensive Records Check Determination as letter expired on 5/21/2019. A one-day letter was left on this date.

POI (Plan of Improvement)

IMMEDIATE CORRECTION - The Center will 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: 6/19/2019

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 review of records that of 26 staff members did not possess valid evidence of 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: 7/19/2019

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 records that one employee did not have evidence of completing the required Health and Safety Training Orientation.

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: 7/3/2019

Recited on 6/19/2019

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)

Met

Comment

Discussed combining children of mixed ages to include two and three year olds.

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

Met

Comment

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