OF GROOP Bright fro	ht 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				
1776 1776		Cover S	heet		
Date: 12/5/2022 VisitType: Licensing	J Study	Arrival:	12:30 PM	Departure:	7:00 PM
CCLC-47580			Regio	onal Consultar	nt
Legacy Academy Snellville			Diann	e Clarke	
1560 Summit Chase Drive Snellville, GA (770) 982-5530 jahnel@legacyacademy.c		inty	Fax: (	e: (770) 357-49 770) 357-4922 e.clarke@deca	
Mailing Address Same					
Quality Rated: ★ ★					
Compliance Zone Designation	Compliance Zone Desi	anation - A	summary measu	re of a program's 1	2 month monitoring

Silance Zone Desig		history, as it pertains to child care health and safety rules. The three compliance zones are good				
Licensing Study						
Complaint Investigation Follow Up		Support -	<ul> <li>Program is demonstrating an acceptable level of performance in meeting the rules.</li> <li>Program performance is demonstrating a need for improvement in meeting</li> </ul>			
Complaint Closure	Good Standing	Deficient	<ul> <li>rules.</li> <li>Program is not demonstrating an acceptable level of performance in meeting the rules.</li> </ul>			
	Licensing Study Complaint Investigation Follow Up	Licensing Study Good Standing Complaint Investigation Follow Up	Licensing Study Good Standing Standing, support standing, support good Standing Up Good Standing Good Standing Support Good Standing			

## Ratios/License Capacity

Г

Building	Room	Age Group	Staff	Children	NC/C	Max 35 SF.	35 SF. Comp.	Max 25 SF.	25 SF. Comp.	Notes
Main	1L- Infants	Infants		4	С	19	С	NA	NA	Free Play,Feeding,Na p
Main	1R- Three's/ Four's	Four Year Olds and Five Year Olds	1	15	С	38	С	NA	NA	Nap
Main	2L- One Year	One Year Olds	1	4	С	19	С	NA	NA	Nap
Main	3L- Older Ones and Two's	One Year Olds and Two Year Olds	1	5	С	20	С	NA	NA	Nap
Main	3R- Prek A	PreK	2	16	С	22	С	NA	NA	Nap
Main	4L- Two Year	Two Year Olds	1	8	С	26	С	NA	NA	Nap
Main	4Rr- Prek B		0	0	С	45	С	NA	NA	
Main	Back Right- Three's	Two Year Olds and Three Year Olds and Four Year Olds	2	12	С	29	С	NA	NA	Nap
Main	Back- School Age		0	0	С	27	С	NA	NA	
		Total Capacity @35 sq. ft.: 2	45		Total C ft.: 0	apacity @	25 sq.			

Total # Children this Date: 64

Total Capacity @35 sq. ft.: 245

Total Capacity @25 sq. ft.: 0

Building	Playground	Playground Occupancy	Playground Compliance
Main	WaterPark	7	С
Main	Infant/Toddler	18	С
Main	Preschool	96	С
Main	School Age	55	С

### **Comments**

Reminders: Refer to the published communicable disease chart for guidance regarding communicable diseases. In most scenarios, only outbreaks/clusters should be reported to the local health districts.

Please be sure to contact the Gwinnett County Department of Health, if there are outbreaks/clusters of positive COVID-19 cases immediately, and get their guidance. Please be sure to also complete a Required Report in DECAL KOALA for all individual cases of communicable diseases within 24 hours. Be sure to select "Notifiable Communicable Diseases" to report closures for COVID cases.

Please be sure to enter all temporary closures in DECAL KOALA under the Required Report tab whenever your facility is closed temporarily for one day or more.

Incident Reports are to be submitted via DECAL KOALA with all signed staff statements for staff and the director.

All amendments are required to be electronically entered in DECAL KOALA effective August 2, 2021.

Please be sure to hide staff who are no longer employed in your DECAL KOALA account. Please reach out for help with this, if needed.

For centers conducting transportation, please remember that the transportation training certificates must be renewed every two years for everyone participating in transportation including the director.

Provided updated orientation checklist.

One Day Letter.

### Plan of Improvement: Developed This Date 12/05/2022

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, <a href="http://www.decal.ga.gov/CCS/RulesAndRegulations.aspx">http://www.decal.ga.gov/CCS/RulesAndRegulations.aspx</a>, 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)

Jahnel Wilson, Program Official

Date

Dianne Clarke, Consultant

Date

STA	OF GEORE	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							
di	1776		Findings Report						
Date:	12/5/2022	VisitType:	Licensing Study	Arrival:	12:30 PM	Departure:	7:00 PM		
	-47580 cy Academy	Snellville			•	onal Consulta ne Clarke	nt		
1560 Summit Chase Drive Snellville, GA 30078 Gwinnet (770) 982-5530 jahnel@legacyacademy.com				nnett County	County Phone: (770) 357-4923 Fax: (770) 357-4922 dianne.clarke@decal.ga.gov				
<b>Mailing</b> Same	Address								
The fo	llowing infor	mation is as	sociated with a Lice	ensing Study:					
					Activi	ties and Eo	quipment		
591-1-1	112 Equipm	ent & Toys(	CR)				Met		
<b>Comm</b> A varie		ent and toys v	vere observed throug	hout the center.					
591-1-1	135 Swimm	ing Pools &	Water-related Activi	ities(CR)			Met		
Comm Center	ent does not pro	vide swimmir	ig activities.						
			-			Children's	Records		
Reco	ords Reviewe	ed: 5		Records wit	th Missing/In	complete Com	ponents: 1		
Child	# 1				Met				
Child	# 2				Met				
Child	# 3				Met				
Child	# 4				Not Met				
	Missing/Incon								
.0	08(3)-Address	s of Release I	Person Missing						
Child	# 5				Met				
591-1-1	108 Childre	n's Records					Not Met		

# Technical Assistance

591-1-1-.08(1) - Please ensure that the address is completed for the release person for all children enrolled.

## Correction Deadline: 12/5/2022

## Finding

591-1-1-.08(6) requires the Center to maintain records of a child's daily arrival and departure for the twelve (12) preceding months that the Parent or person(s) authorized by the Parent documents, in written or electronic format, each time the Parent or authorized person drops off and picks up the child. The documentation shall include at least the date, the child's name, the arrival and departure times, and the signature or initials of the Parent or authorized person at the time of arrival and departure. These records shall be made available to the Department in printed or written form upon request. It was determined based on a review of records that several children did not have sign in and out completed by their parent or authorized person for the month of November 2022.

## **POI (Plan of Improvement)**

The Center will maintain arrival and departure records as required, will ensure the documentation includes all of the required information, and will provide the records to the Department when requested.

## Correction Deadline: 12/5/2022

Facility 591-1-1-.19 License Capacity(CR) Comment Licensed capacity observed to be routinely met by center. 591-1-1-.25 Physical Plant - Safe Environment(CR) Correction Deadline: 6/10/2022 Corrected on 12/5/2022 .25(13) - The previous citation was observed to be corrected in that there were no hazardous items in children's bags and the cabinet under the sink were locked and no hazards were accessible. Correction Deadline: 6/24/2022 Corrected on 12/5/2022 .25(3) - The previous citation was observed to be corrected in that the light switch was observed to be repaired. Please ensure that all items are repaired at all times. 591-1-1-.26 Playgrounds(CR) Met Comment Playground observed to be clean and in good repair. **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)

# Correction Deadline: 6/10/2022

# Corrected on 12/5/2022

.17(5) - The previous citation was observed to be corrected in that the cups are washed before they are sent home daily. If the cups remains at the center, it is given to the cook to wash in the dishwasher. Please ensure that staff are washing cups at all times.

Not Met

Met

Met

## Finding

591-1-1-17(7) requires that children wash their hands with liquid soap and warm running water upon arrival for care, when moving from one child care group to another, upon re-entering the child care area after outside play, before and after eating meals and snacks, handling or touching food, playing in water; after toileting and diapering, playing in sand, touching animals or pets, and contact with bodily fluids and after contamination by any other means. It was determined based on observation that there was no warm running water for handwashing in the 1R, 2R, 4L, 4Rr and Back Right Classrooms.

## POI (Plan of Improvement)

The Center will train Staff on required handwashing for children and Staff will ensure children's hands are washed when required. The Director will monitor for compliance. Discussed with the director regarding checking all classrooms on a regular basis to ensure that there is warm running water for handwashing.

## Correction Deadline: 12/9/2022

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

## Comment

The Provider currently does not dispense/administer medication.

# 591-1-1-.11 Discipline(CR)

## Comment

Age-appropriate discussion and/or redirection observed.

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

## Comment

Complete documentation of transportation observed.

## Finding

591-1-1-.36(6) requires written Parental authorization for routine transportation provided by or on behalf of the Center. Written authorization must include the routine pick-up location, routine pick-up time, routine delivery location, routine delivery times and the name of any person authorized to receive the child. It was determined based on a review of records that eight of eighteen children did not have their pick up and drop off times recorded on their transportation agreement forms.

## **POI (Plan of Improvement)**

The Center will obtain the required written parental authorization.

## Correction Deadline: 12/6/2022

## **Technical Assistance**

591-1-1-.36(7)(b) - Please ensure that the physician's information is completed on the medical emergency forms for all children being transported.

## Correction Deadline: 12/6/2022

# Sleeping & Resting Equipment

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

## Finding

591-1-1-.30(1)(b)4 requires that a light cover be available for each child's use on a cot or mat and shall be marked for individual use or laundered daily. If marked for individual use, they must be laundered weekly or more frequently if needed. It was determined based on observation that children were observed without a light cover at naptime in the 1R and 4L classrooms.

Safety

Met

Met

Not Met

Not Met

**POI (Plan of Improvement)** The Center will ensure that a light cover is available for each child and will meet the requirements for laundering.

## Correction Deadline: 12/5/2022

	Staff Records
Records Reviewed: 25	Records with Missing/Incomplete Components: 10
Staff # 1 Date of Hire: 09/09/2022 <u>"Missing/Incomplete Components"</u> .14(2)-CPR missing,.14(2)-First Aid Missing	Not Met
Staff # 2 Date of Hire: 08/12/2021	Met
Staff # 3 Date of Hire: 09/06/2022 <u>"Missing/Incomplete Components"</u> .14(2)-CPR missing,.14(2)-First Aid Missing	Not Met
Staff # 4 Date of Hire: 11/07/2022	Met <u>Reminder - Health &amp; Safety training is required within 90</u> calendar days of hired
Staff # 5 Date of Hire: 11/29/2022	Met <u>Reminder - Health &amp; Safety training is required within 90</u> calendar days of hired
Staff # 6 Date of Hire: 11/18/2022	Met <u>Reminder - Health &amp; Safety training is required within 90</u> <u>calendar days of hired</u>
Staff # 7 Date of Hire: 10/24/2022	Met <u>Reminder - Health &amp; Safety training is required within 90</u> calendar days of hired
Staff # 8 Date of Hire: 07/30/2012 <u>"Missing/Incomplete Components"</u> .09-Criminal Records Check Missing	Not Met
Staff # 9 Date of Hire: 03/14/2022 <u>"Missing/Incomplete Components"</u> .14(2)-CPR missing,.14(2)-First Aid Missing	Not Met
Staff # 10	Met

## **Records Reviewed: 25**

Records Reviewed. 25	Records with Missing/Incomplete Components. To
Date of Hire: 03/15/2021	
Staff # 11	Met
Date of Hire: 09/26/2022	Reminder - Health & Safety training is required within 90 calendar days of hired
Staff # 12	Met
Date of Hire: 07/26/2021	
Staff # 13	Not Met
Date of Hire: 11/05/2021	
"Missing/Incomplete Components"	
.33(5)-10 Hrs. Annual Training	
Staff # 14	Not Met
Date of Hire: 08/12/2022	
"Missing/Incomplete Components"	
.33(3)-Health & Safety Certificate	
Staff # 15	Met
Date of Hire: 05/26/2022	
Staff # 16	Not Met
Date of Hire: 08/12/2022	
"Missing/Incomplete Components"	
.14(2)-CPR missing, 14(2)-First Aid Missing,	,.33(3)-Health & Safety Certificate
Staff # 17	Met
Date of Hire: 01/11/2022	
Staff # 18	Not Met
Date of Hire: 11/04/2019	
"Missing/Incomplete Components"	
.31(2)(b)2Staff Qualifications-Education Mi	issing
Staff # 19	Not Met
"Missing/Incomplete Components"	
.09-Criminal Records Check Missing	
Staff # 20	Met
Date of Hire: 07/17/2017	
Staff # 21	Met
Date of Hire: 03/26/2014	

Staff # 22 Date of Hire: 06/01/2022	Met
Staff # 23 <u>"Missing/Incomplete Components"</u> .09-Criminal Records Check Missing	Not Met
Staff # 24 Date of Hire: 05/14/2018	Met
Staff # 25 Date of Hire: 09/22/2014	Met

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

Not Met

## Finding

591-1-1-.09(1)(a) requires that a Center ensure that every actual and potential Director, Employee and Provisional Employee of a Child Care Learning Center submit both a Records Check Application to the Department and Fingerprints to an authorized fingerprinting site. It was determined based on a review of records that staff #8 did not have evidence of having submitted a fingerprint application.

## POI (Plan of Improvement)

**Staff Credentials Reviewed: 9** 

IMMEDIATE CORRECTION - The Center will ensure to complete a fingerprint application for staff prior to them being present at the center to ensure that every actual and potential Director, Employee and Provisional Employee of a Child Care Learning Center submit both a Records Check Application to the Department and Fingerprints to an authorized fingerprinting site as 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 review the CRC modules regarding criminal records to ensure the CRC rules are maintained.

## Correction Deadline: 12/5/2022

## 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 based on a review of records that staff #8 has a fingerprint records check which expired on September 5, 2022.

## POI (Plan of Improvement)

IMMEDIATE CORRECTION - The Center will ensure to receive a completed a records check determination for staff prior to them being present at 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 childcare 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 review the CRC modules regarding criminal records to ensure the CRC rules are maintained.

## Correction Deadline: 12/5/2022

## Finding

591-1-1-.09(1)(j) requires that for portability for Directors, Employees and Provisional Employees, excluding Students-in-Training, only the most recently issued determination letter is eligible for portability and must be ported electronically. A Center may accept a satisfactory Fingerprint Records Check Determination letter or a satisfactory Comprehensive Records Check Determination letter issued by the Department if the Records Check Clearance Date is within the preceding 12 months from the hire date, the individual has not had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer, and the Center does not know or reasonably should not know that the individual's satisfactory status has changed. It was determined based on a review of documents that staff #19 and #23 did not have evidence of being electronically ported.

## POI (Plan of Improvement)

IMMEDIATE CORRECTION - The Center will be sure to complete portability request for all staff prior to them being present at the center to ensure that only the most recently issued determination letter is electronically ported for Directors, Employees and Provisional Employees, excluding Students-in-Training. A Center may accept a satisfactory Fingerprint Records Check Determination letter or a satisfactory Comprehensive Records Check Determination letter is within the preceding 12 months from the hire date, the individual has not had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer, and the Center does not know or reasonably should not know that the individual's satisfactory status has changed. 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 review the CRC modules regarding criminal records to ensure CRC rules are maintained.

## Correction Deadline: 12/5/2022

## 591-1-1-.14 First Aid & CPR

Not Met

Not Met

## 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 #8, #9, and #16 did not have evidence of CPR and First Aid completed.

## **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: 1/4/2023

## 591-1-1-.33 Staff Training

## 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 #14 and #16 did not have current evidence of Health and Safety Orientation Training.

## **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: 1/4/2023

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

## Finding

591-1-1-.31(2)(a) requires the Center to ensure there is a designated teacher/lead caregiver for each group of children. It was determined based on a review of records that three classrooms did not have a designated lead teacher.

## **POI (Plan of Improvement)**

The Center will designate a qualified lead staff for this group.

## Correction Deadline: 3/5/2023

## Finding

591-1-1-.31(2)(b)2. requires teachers and lead caregivers to meet minimum academic requirements and qualifying experience at the time of employment. It was determined based on a review of records that staff #18 did not complete the requirements for lead teacher within the 18 month period. Staff has a professional learning plan which was completed on November 1, 2020.

## POI (Plan of Improvement)

A teacher/lead caregiver will be hired that meets the minimum academic requirements and qualifying work experience.

## Correction Deadline: 3/5/2023

Staffing and Supervision

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

## Comment

Center observed to maintain appropriate staff:child ratios.

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

## Comment

Adequate supervision observed on this date. Discussed revision to the supervision rule which states: Staff shall be attentive and participating with all children during mealtimes and shall be seated within an arm's length away from children thirty-six (36) months of age and younger.

Met

Met