



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: 8/2/2023 **VisitType:** Licensing Study **Arrival:** 9:30 AM **Departure:** 3:15 PM

CCLC-55170

Laugh and Learn Sugar Hill

6007 Suwanee Dam Road Sugar Hill, GA 30518 Gwinnett County
 CCLC-55170 mmironov@laughandlearnllc.com

Lead Consultant

Tamra Thomas

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Joint with: Brittany Sawyers

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. 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.
08/02/2023	Licensing Study	Good Standing	
11/23/2022	Complaint Closure	Good Standing	
11/02/2022	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	A1L-2 year old		0	0	C	21	C	NA	NA	
Main	B-2L-2 year old	Two Year Olds	2	10	C	21	C	NA	NA	Outside,Transiti oning
Main	C-1R Infants and 1's	Infants	2	6	C	16	C	NA	NA	Outside
Main	D-2R-1's	One Year Olds	2	10	C	16	C	NA	NA	Outside
Main	E-3R-4's and Up		0	0	C	31	C	NA	NA	
Main	F-4R-3's and 4's		0	0	C	24	C	NA	NA	
Main	G-5R-3's and 4's		0	0	C	14	C	NA	NA	
Main	H-3L-GA Pre-K		0	0	C	26	C	NA	NA	
Total Capacity @35 sq. ft.:			169		Total Capacity @25 sq. ft.: 0					
Total # Children this Date: 26			Total Capacity @35 sq. ft.: 169		Total Capacity @25 sq. ft.: 0					

Building	Playground	Playground Occupancy	Playground Compliance
Main	PG A-1's and Infants	20	C
Main	PG-B 3's and 4's	36	C
Main	PG-C-5's & Up	32	C
Main	PG-D Grass	20	C
Main	PG-E Splash Pad	5	C

Comments

The purpose of the visit today was to conduct a Licensing Visit.

Plan of Improvement: Developed This Date 08/02/2023

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.al.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 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 855-800-7747 or qualityrated@dec.al.ga.gov for more information. Free technical assistance is available!

Marci Mironov, Program Official

Date

Brittany Sawyers, Special Investigations Unit
Specialist

Date

Tamra Thomas, Lead Consultant

Date



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(Findings Report)

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The following information is associated with a Licensing Study:

Activities and Equipment

591-1-1.03 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 observation that Classrooms B, D, and E did not have lesson plans available on this date.

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. The staff stated that lesson plans are completed every Friday for the following week, but they had not been completed on this date.

Correction Deadline: 8/4/2023

591-1-1.12 Equipment & Toys(CR)

Not Met

Comment

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

Finding

591-1-1.12(4) requires that equipment and furniture is secured if it is of a weight or mass that could cause injury from tipping, falling, or being pulled or pushed over. It was determined based on observation that Classroom E had a large dry erase board leaning against the wall in the restroom posing a tipping hazard.

POI (Plan of Improvement)

The Center will ensure that the identified equipment or furniture and any other such existing or future items are secured adequately and will have a system for checking these for stability. The Consultants discussed with the Provider to ensure that any supplies kept on the diapering shelf are always kept secured.

Correction Deadline: 8/3/2023

Comment

Center does not provide swimming activities.

Children's Records

Comment

Records were observed to be complete and well organized.

Facility

Technical Assistance

591-1-1-.06 - The Consultants discussed with the Provider to ensure that all classroom restrooms are free from stored equipment. The consultants observed classroom D and E had stored equipment this date.

Comment

Licensed capacity observed to be routinely met by center.

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 to children:

- Classroom B had a child's book bag containing a phone charger with a long cord, and accessible external creams and plastic in a unlocked drawer in the diapering area.

- Classroom D was observed with a black leather hanging purse in the diapering area underneath the yellow trays that contained a bottle of Prilosec medication; Bayer Aspirin; Simply Saline Nasal Mist; Screwdriver Set; Instant Hand Antiseptic; and A&D Ointment that read "Keep Out of Reach of Children". There was also a black bag with yellow stars hanging in the diapering area containing a computer charger with a long cord that can pose as a choking hazard. The restroom contained a gallon of pink liquid soap, that read "Keep Out of Reach of Children", sitting on the floor inside a bucket that was accessible to children.

- Classroom E had an observable bottle of window cleaner sitting on the hand washing sink, as well as a first aid kit containing Aspirin and ointments.

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: 8/2/2023

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 Consultants observations that, Classroom D had gray peeling paint on the left and right side of the walls.

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.

Correction Deadline: 8/25/2023

591-1-1-.26 Playgrounds(CR)**Technical Assistance****Technical Assistance**

591-1-1-.26(9) - The consultants observed on the PG-E splash pad surface to be cracked in several areas. The provider will ensure that the surface is repaired prior to use and continue monitoring.

Correction Deadline: 8/2/2023

Food Service

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

591-1-1-.15(3) requires baby bottles and formula to be labeled with the individual child's name; supplied by the Parent daily in bottles; and refrigerated at a temperature of forty (40) degrees Fahrenheit or less. Only the current day's formula or breast milk shall be served. If formula must be provided by the Center, only commercially prepared, ready-to-feed formula shall be used. Refrigerated or frozen breast milk shall only be heated or thawed under warm running water or in a container of warm water. It was determined based on observation, that Classroom C-1R had two infants whose bottles were not labeled with their names on this date.

POI (Plan of Improvement)

The Center will train Staff to follow the required procedures, ensure that parents are fully informed, and will review and monitor regularly.

Correction Deadline: 8/3/2023

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

Kitchen appears clean and well organized. The provider meals are catered from Shelf Advantage on this date.

Health and Hygiene

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

Proper diapering procedures observed.

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

Proper hand washing observed throughout the center.

591-1-1-.20 Medications(CR)**Met****Comment**

The Provider currently does not dispense/administer medication. The consultants discussed with the provider to ensure that all administered external medications has parental authorizations on file.

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**

Center does not participate in field trips at this time.

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

591-1-1-.36(3)(a-b) requires any Center that provides any type of transportation to obtain two (2) hours of state-approved or state-accepted transportation training, biannually, for the Director and for each person responsible for or who participates in the transportation of children. The training shall include, but is not limited to, a review of the transportation rules, a review of approved transportation forms and procedures, and instruction on the usage and completion of the forms and procedures. This training may be counted as part of the annual training requirements for Staff. It was determined based on a review of staff records, that the Director did not have the required two hour transportation training on this date.

POI (Plan of Improvement)

The Center will ensure that the Director, Center Staff, and any person responsible for the transportation of children has completed the required transportation training.

Correction Deadline: 8/12/2023**Technical Assistance**

591-1-1-.36(4)(a) - The consultants discussed with the provider to ensure that the annual Vehicle Inspection checklist is maintained in the transportation notebook.

Correction Deadline: 8/7/2023**Finding**

591-1-1-.36(7)(b) requires that an emergency medical information record be maintained in the vehicle for each child being transported. The emergency medical information record for each child shall include a listing of the child's full name, date of birth, allergies, special medical needs and conditions, current prescribed medications that the child is required to take on a daily basis for a chronic condition, the name and telephone number of the child's doctor, the local medical facility that the Center uses in the area where the Center is located and the telephone numbers where the Parents can be reached. It was determined based on observation, three children were transported to Sycamore Elementary without Vehicle Emergency forms on the bus on this date.

POI (Plan of Improvement)

The Center will obtain a complete emergency medical information record for each child that is transported and maintain a copy on the vehicle.

Correction Deadline: 8/3/2023

Sleeping & Resting Equipment

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

591-1-1-.30(1)(b)2 requires that cots and mats are used by the same child daily and marked for individual use. It was determined based on observation that Classroom B, D, and E sleeping cots were not labeled for individual use on this date.

POI (Plan of Improvement)

The Center will ensure that cots and mats are used by the same child daily and marked for individual use.

Correction Deadline: 8/2/2023

Staff Records

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 on a review of records, that the Director and six out of eleven staff did not have current First Aid/CPR on this date.

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. The Director indicated First Aid/CPR will be provided on August 5, 2023.

Correction Deadline: 9/1/2023

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 records that the provider did not have any personnel files available for review on this date.

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: 8/7/2023

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 a review of records, eleven staff did not have proof of initial orientation training prior to duty assignment on this date.

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: 8/2/2023

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 five staff who were beyond their 90 day hire date did not have health and safety training on this date.

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: 9/1/2023

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

Not Met

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, four lead teachers did not have proof of lead teacher credential or professional learning plan on this date.

POI (Plan of Improvement)

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

Correction Deadline: 8/2/2023

Staffing and Supervision

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

Met

Comment

Adequate supervision observed on this date.

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

Met

Comment

Adequate supervision observed on this date.