



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: 12/13/2023 **VisitType:** Licensing Study

Arrival: 10:15 AM

Departure: 2:45 PM

CCLC-38463

CreekStone Academy at Little Tikes

2960 Albion Farm Road Duluth, GA 30097 Gwinnett County
 (770) 476-4221 aharris@creekstone-littletikes.com

Regional Consultant

Leena Mitchell

Phone: (706) 433-7111

Fax: (706) 310-6944

leena.mitchell@dec.al.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.
12/13/2023	Licensing Study	Good Standing	
06/30/2023	Licensing Study	Good Standing	
04/27/2023	Complaint Closure	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	A/1R/1	Infants	2	4	C	13	C	NA	NA	Floor Play
Main	B/1L/2	Infants	2	4	C	13	C	NA	NA	Circle Time
Main	C/2L/3	Two Year Olds	1	7	C	20	C	NA	NA	Art
Main	D/3L/4	Two Year Olds	1	6	C	18	C	NA	NA	Centers
Main	E/1CL/5	One Year Olds	1	6	C	15	C	NA	NA	Transitioning
Main	F/ 2CL/9	Three Year Olds	1	13	C	18	C	NA	NA	Outside
Main	G/3CL/11	GA PreK	3	18	C	27	C	NA	NA	Centers
Main	H/4CL/13		0	0	C	20	C	27	C	Not In Use
Main	I/5CL/15	GA PreK	2	14	C	19	C	NA	NA	Outside
Main	J/CBack/16	GA PreK	2	12	C	25	C	35	C	Centers
Main	K/7R/14	GA PreK	2	14	C	19	C	NA	NA	Centers
Main	L/6R/12		0	0	C	19	C	26	C	Not In Use
Main	M/5R/10	GA PreK	3	14	C	26	C	36	C	Centers
Main	N/4R/8	Three Year Olds	2	13	C	20	C	NA	NA	Outside
Main	O/3R/7		0	0	C	16	C	NA	NA	Not In Use
Main	P/2R/6		0	0	C	22	C	NA	NA	Not In Use
Total Capacity @35 sq. ft.:			310		Total Capacity @25 sq. ft.: 310					
Total # Children this Date: 125			Total Capacity @35 sq. ft.:		Total Capacity @25 sq. ft.: 310					

Building	Playground	Playground Occupancy	Playground Compliance
Main	PG A/1R/Front	33	C
Main	PG B/2R	18	C
Main	PG C/3R	14	C
Main	PG D/1L Front	10	C
Main	PG E/L Back	46	C

Comments

The purpose of this visit was to conduct a licensing study.

Plan of Improvement: Developed This Date 12/13/2023

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.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), 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!

Angelia Harris, Program Official

Date

Leena Mitchell, Regional 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.

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.

Comment

Pool not in use at this time, gates observed locked.

Children's Records

591-1-1-.08 Children's Records

Technical Assistance

Technical Assistance

591-1-1-.08 - Please ensure that parents provide and/or update the following information as needed: release to persons' name, phone number, full address and relationship to the child.

Facility

591-1-1-.06 Bathrooms

Met

Correction Deadline: 7/30/2023

Corrected on 12/13/2023

.06(4) - The consultant observed the previous citation to be corrected in that the consultant observed bathrooms to be clean and in good repair on this date.

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 that the following potentially hazardous equipment, materials or supplies were accessible to the children in care:

- One container of tylenol which is marked to be kept "out of the reach of children" was observed to be accessible to children in a child's diaper bag in classroom D/4.
- A teacher's purse was observed sitting on shelf that was accessible to children in classrooms 9 and 16. Also, a teacher's purse was in an unlocked cabinet in classroom 14 and 16.
- One can of Lysol which is marked to be kept "out of the reach of children" was observed to be accessible to children in an unlocked cabinet in classroom E/5.
- Teacher scissors were accessible to children in classrooms 14 and 16.

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: 12/13/2023**Correction Deadline: 7/14/2023****Corrected on 12/13/2023**

.25(3) - The consultant observed the previous citation to be corrected in that the consultant observed facility to be clean, free of debris and in good repair on this date.

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

591-1-1-.26 - Please ensure to monitor the playground areas for the following hazardous items:

- Fluff and redistribute resilient surface surrounding the fall zones.
- Biting and/or stinging insects (i.e., bees, ants, etc.).
- Vines protruding through the fence becoming accessible to the children present for care.
- Exposed tree roots (i.e., potential tripping hazard, etc.).
- Loose and/or weak tree branches.
- Normal wear and tear of playground equipment.
- Normal wear and tear of the fence surrounding the playground areas
- Please ensure gates are kept closed at all times except when entering and exiting the playground.

Food Service

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

Center menu meets USDA guidelines.

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

Kitchen appears clean and well organized.

Health and Hygiene

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

591-1-1-.10 - Discussed labeling of "diapering only" areas and staff work stations.

Comment

Hand washing requirements for diapering were discussed with the director on this date.

Comment

Proper diapering procedures observed.

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

Please ensure lids remain on trash containing organic waste.

Comment

Proper hand washing observed throughout the center.

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****Met****Comment**

Program observed complete emergency drills

591-1-1-.27 Posted Notices**Met****Comment**

Observed all required posted notices.

591-1-1-.29 Required Reporting**Not Met****Technical Assistance**

591-1-1-.29 - Discussed reporting requirements.

Finding

591-1-1-.29(2) requires the Director or designated person-in-charge to report or cause to be reported any cases or suspected cases of notifiable communicable diseases (COVID-19, Tuberculosis, Measles, etc.) or any viruses or illnesses identified during a public health emergency, immediately to the Department and to the local County Health Department as required by the rules of the Georgia Department of Public Health, Rule 511-2-1, Notification of Disease. It was determined based on review of records that a positive COVID case was identified during the week of December 4, 2023, and provider did not report the illness to the department as required.

POI (Plan of Improvement)

The Center will develop a procedure so everyone knows how and when to report cases of suspected notifiable communicable diseases to the County Health Department and will follow-up to make sure they are reported as required.

Correction Deadline: 12/13/2023

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

Animals maintained clean and appropriately caged.

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
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Comment

Field trip documentation observed to be complete.

591-1-1-.36 Transportation(CR)	Met
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Comment

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

Comment

The consultant observed the following vehicles to have a current vehicle inspection report on file:

- Vehicle Tag # - DWF 682 - Expires March 10, 2024.

- Vehicle Tag # - PZT 9775 - Expires March 10, 2024.

Correction Deadline: 6/30/2023

Corrected on 12/13/2023

.36(7)(d)2. - The consultant observed the previous citation to be corrected in that the consultant observed documentation of second check of vehicle on this date.

Sleeping & Resting Equipment

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

591-1-1-.30 - Discussed SIDS and infant sleeping position.

Comment

The correct number of mats, sheets and blankets were observed on this date. Cleaning and disinfecting of mats was discussed with the director on this date.

Staff Records

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

Director provided file(s) for employees hired since last visit on June 30, 2023. The consultant observed newly hired staff members to have evidence of a satisfactory criminal record check letter on file.

591-1-1-.09 Criminal Records Check(CR)	Met
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Comment

Criminal records checks were observed to be complete.

591-1-1-.14 First Aid & CPR	Not Met
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Comment

Complete first aid kits observed in center and on vehicles.

Comment

Evidence observed of 50% of center staff certified in First Aid and CPR.

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 review of records that the following staff members did not obtain first aid and CPR training within their first 90 days of employment:

Staff member #7 with a documented date of hire of June 19, 2023, certificate dated November 2, 2023.

Staff member #9 with a documented date of hire of April 17, 2023, certificate dated July 19, 2023.

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: 12/13/2023

Recited on 12/13/2023

591-1-1-.33 Staff Training**Not Met****Comment**

Documentation observed of required annual staff training.

Comment

Please ensure completed orientation checklists are documented with staff members start date.

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 review of records that the following staff members did not complete health and safety orientation training within their first 90 days of employment:

Staff member #7 with a documented date of hire of June 19, 2023.

Staff member #26 with a documented date of hire of July 21, 2023.

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: 12/13/2023

Recited on 12/13/2023

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**

Center observed to maintain appropriate staff:child ratios.

591-1-1-.32 Supervision(CR)**Met****Comment**

Adequate supervision observed on this date.

