



**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:** 11/21/2022 **VisitType:** Complaint Investigation Follow Up **Arrival:** 10:30 AM **Departure:** 12:30 PM

**CCLC-35081**

**Little Angel's Learning Center**

306 Roosevelt St. Dublin, GA 31021 Laurens County  
 (478) 275-3233 nellkates@aol.com

**Regional Consultant**

Laura Johnson

Phone: (470) 891-3520

Fax: (678) 913-0577

laura.johnson@decal.ga.gov

**Mailing Address**  
 Same

**Quality Rated:** ★ ★

<u>Compliance Zone Designation</u>		
11/21/2022	Complaint Investigation Follow Up	Good Standing
08/01/2022	Licensing Study	Good Standing
03/10/2022	Monitoring Visit	Good Standing

**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.

**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-end right	One Year Olds and Two Year Olds	1	5	C	7	C	NA	NA	Centers
Main	B-middle	Infants	1	3	C	9	C	NA	NA	Floor Play
Main	C-left		0	0	C	8	C	NA	NA	
Main	D-front right	Two Year Olds	1	5	C	9	C	NA	NA	Centers
Main	E-front left	Four Year Olds and Five Year Olds	1	3	C	10	C	NA	NA	Centers
Total Capacity @35 sq. ft.: 43					Total Capacity @25 sq. ft.: 0					
Total # Children this Date: 16			Total Capacity @35 sq. ft.: 43			Total Capacity @25 sq. ft.: 0				

Building	Playground	Playground Occupancy	Playground Compliance
Main	Playground	36	C

**Comments**

An in-person visit was completed on this date. The center had no new hires and all Criminal Records Checks were observed complete.

Plan of Improvement: No Plan Developed 01/01/0001

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



### 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](mailto: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](http://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)

Nellie Kates, Program Official

Date

Laura Johnson, Consultant

Date



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**Findings Report**

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The following information is associated with a Complaint Investigation Follow Up:

**Food Service**

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

**Met**

**Correction Deadline: 8/1/2022**

**Corrected on 11/21/2022**

**.15(5) - This citation was corrected on this date. A current menu was observed posted in all classrooms on this date.**

**Policies and Procedures**

**591-1-1-.21 Operational Policies & Procedures**

**Not Met**

**Finding**

591-1-1-.21(1)(p) requires the Center to have a written plan for handling emergencies, including but not limited to severe weather, loss of electrical power or water and death, serious injury or loss of a child, a threatening event, or natural disaster which may occur at the Center; to have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, and continuity of operations. The plan must apply to all children in care and include specific accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions and shall include assurance that no Center Personnel will impede in any way the delivery of emergency care or services to a child by licensed or certified emergency health care professionals. It was determined based on a review of records that a complete Emergency Preparedness Plan was not available at the center on this date.

**POI (Plan of Improvement)**

The Center will write or revise an emergency plan that includes all of the required items.

**Correction Deadline: 12/5/2022**

**Recited on 11/21/2022**

**Staff Records**

**Records Reviewed: 6****Records with Missing/Incomplete Components: 6**

Staff # 1 Not Met

Date of Hire: 10/21/2021

"Missing/Incomplete Components"

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

Staff # 2 Not Met

Date of Hire: 08/13/2012

"Missing/Incomplete Components"

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

Staff # 3 Not Met

Date of Hire: 07/08/2013

"Missing/Incomplete Components"

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

Staff # 4 Not Met

Date of Hire: 08/14/2012

"Missing/Incomplete Components"

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

Staff # 5 Not Met

Date of Hire: 08/27/2018

"Missing/Incomplete Components"

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

Staff # 6 Not Met

Date of Hire: 03/01/2019

"Missing/Incomplete Components"

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

**Staff Credentials Reviewed: 4**

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

**Comment**

Consultant requested to view all Criminal Record checks for employees hired after last visit. Director stated that there have been no new hires since last visit

**Comment**

Director provided [ ] file(s) for employees hired since last visit.

**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 at least 50% of the caregiver staff did not have valid evidence of completing biennial training in CPR as required in that the Director and staff completed CPR training online and had not completed an in-person, hands on skills assessment in a classroom setting as required.

**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: 1/31/2023**

**Recited on 11/21/2022**

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**591-1-1-.33 Staff Training**

**Defer**

**Defer**

591-1-1-.33(5)- This citation was deferred on this date. The program is still within their correction window.

**POI (Plan of Improvement)**

The Center will plan and schedule the required 10 hours of annual training each year and follow up to ensure the training is completed.

**Correction Deadline: 12/31/2022**