



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: 8/1/2022 **VisitType:** Licensing Study **Arrival:** 10:35 AM **Departure:** 11:15 AM

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@dec.al.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.
08/01/2022	Licensing Study	Good Standing	
03/10/2022	Monitoring Visit	Good Standing	
09/29/2021	Licensing Study	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-end right	One Year Olds and Two Year Olds	1	5	C	7	C	NA	NA	Story
Main	B-middle	Infants and One Year Olds	2	3	C	9	C	NA	NA	Diapering, Floor Play, Feeding
Main	C-left		0	0	C	8	C	NA	NA	
Main	D-front right	Three Year Olds	1	9	C	9	C	NA	NA	Centers
Main	E-front left	Four Year Olds	1	7	C	10	C	NA	NA	Outside
Total Capacity @35 sq. ft.: 43					Total Capacity @25 sq. ft.: 0					
Total # Children this Date: 24			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 Director, Nellie Kates, stated that the program does not provide routine transportation, administer medications, or provide swimming activities. The provider was asked to submit Administrative Review documents in Decal Koala by August 8, 2022.

Plan of Improvement: Developed This Date 08/01/2022

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, <http://www.dec.state.ga.us/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



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 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 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



**Bright from the Start Georgia Department of Early Care and Learning
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Findings Report

Date: 8/1/2022 **VisitType:** Licensing Study

Arrival: 10:35 AM

Departure: 11:15 AM

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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)

N/A

Comment

Center does not provide swimming activities.

Children's Records

Records Reviewed: 5

Records with Missing/Incomplete Components: 0

Child # 1	Met
Child # 2	Met
Child # 3	Met
Child # 4	Met
Child # 5	Met

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

Met

Comment

Records were observed to be complete and well organized.

Facility

591-1-1-.06 Bathrooms **Met**

Comment

Bathrooms observed to be clean and well maintained.

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) **Met**

Comment

Center appears clean and well maintained.

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

Comment

Playground observed to be clean and in good repair.

Food Service

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

Finding

591-1-1-.15(5) requires that the Center provide a menu listing all meals and snacks to be served during the current week except for School-age Centers where the food may be provided by the Parent(s) by agreement between the School-age Center and the Parent(s). Substitutions shall be recorded on the posted menu and menus shall be retained at the Center for six (6) months. It was determined based on a review of records that the center did not provide a menu listing all meals and snacks to be served during the current week at the request of the Department.

POI (Plan of Improvement)

The Center will list all of the current week's meals and snacks and all substitutions on the menu and keep past menus on file for six months and will implement a system to monitor this.

Correction Deadline: 8/1/2022

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) **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) **N/A**

Comment

The Provider currently does not dispense/administer medication.

Policies and Procedures

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 submitted for review at the request of the Department.

POI (Plan of Improvement)

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

Correction Deadline: 8/6/2022

Comment

Program observed complete emergency drills

Safety

591-1-1-.05 Animals

N/A

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)

N/A

Comment

Center does not participate in field trips at this time.

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

N/A

Comment

Center does not provide routine transportation.

Sleeping & Resting Equipment

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

Met

Comment

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

Records Reviewed: 6

Records with Missing/Incomplete Components: 6

Staff # 1

Not Met

Date of Hire: 10/21/2021

"Missing/Incomplete Components"

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

.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

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

Staff # 5

Not Met

Date of Hire: 08/27/2018

"Missing/Incomplete Components"

.14(2)-CPR missing

Staff # 6

Not Met

Date of Hire: 03/01/2019

"Missing/Incomplete Components"

.14(2)-CPR 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

Criminal record checks were observed to be complete.

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

Complete first aid kit observed in the center on this date.

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: 9/30/2022

591-1-1-.33 Staff Training

Defer

Defer

591-1-1-.33(5)- This citation was deferred. Annual training will be reviewed during the next regulatory visit in 2023.

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

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

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