

Date:	2/27/2023	VisitType:	Licensing Study
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Arrival: 10:00 AM

Departure: 2:30 PM

# CCLC-37126

## Legacy Academy Satellite

1825 Satellite Blvd. Duluth, GA 30097 Gwinnett County (770) 622-9200 lasatellite@legacyacademy.com

# **Regional Consultant**

Leena Mitchell

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Joint with: Erikka Benning

Mailing Address Same



				<b>Compliance Zone Designation</b> - 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				
	02/27/2023	Licensing Study		standing, support, and deficient.				
	11/28/2022	Complaint Investigation Follow Up		Support -	Program is demonstrating an acceptable level of performance in meeting the rules. Program performance is demonstrating a need for improvement in meeting			
	11/28/2022	Complaint Closure	Good Standing	Deficient -	rules. 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/1L	Infants	2	10	С	20	С	NA	NA	Floor Play
Main	B/2L	One Year Olds	1	3	С	19	С	NA	NA	Circle Time
Main	C/3L	One Year Olds	1	4	С	21	С	NA	NA	Outside
Main	D/4L	Two Year Olds and Three Year Olds	2	13	С	26	С	NA	NA	Circle Time
Main	E/Center L		0	0	С	29	С	NA	NA	Not In Use
Main	F/Center R	Three Year Olds	1	13	С	30	С	NA	NA	Outside
Main	G/3R	Four Year Olds and Five Year Olds	1	11	С	31	С	NA	NA	Circle Time
Main	H/2R	GA PreK	2	17	С	47	С	NA	NA	Outside
Main	l/1R	GA PreK	2	20	С	42	С	NA	NA	Transitioning
		Total Capacity @35 sq. ft.: 2	263		Total C ft.: 0	Capacity @	25 sq.		@35 cap shall Limi	acity limited by tations
Total # Children this Date: 91		Total Capacity @35 sq. ft.: 2	263		Total C	Capacity @	25 sq.			

I otal # Children this Date: 91

acity @25 sq ft.: 0

Building	Playground	Playground Occupancy	Playground Compliance
Main	PG/A/Left	65	С
Main	PG/B/Back	107	С
Main	PG/C/Right	97	С

<u>Comments</u> The purpose of this visit was to conduct licensing study.

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).

<ul> <li>Please refer to the website, <u>http://www.decal.ga.gov/CCS/RulesAndRegulations.aspx</u>, for information regarding October 1, 2018 rule changes about Criminal Records Checks that may affect your facility. In summary,</li> <li>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</li> <li>New clearance is required at least once every five years</li> </ul>
<ul> <li>Any staff member solely responsible for supervising children will be required to have completed a comprehensive background clearance</li> <li>All staff members are required to have completed at least a national fingerprint based clearance check</li> <li>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</li> <li>Facilities are required to use DECAL KOALA for Criminal Records Checks, including to verify portability of an employee</li> </ul>

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 a1 855-800-7747 or <u>qualityrated@decal.ga.gov</u> for more information. Free techincal assistance is available!

Leena Mitchell, Regional Consultant

Date

STA	OF G OF G		2 Martin Luth	t Georgia Department of Early Care and Learning uther King Jr. Drive SE, 670 East Tower Atlanta, GA 30334 (404) 657-5562 WWW.DECAL.GA.GOV (Findings Report)				
Date:	2/27/2023	VisitType:	Licensing Study		10:00 AM	Departure:	2:30 PM	
						al Consultant		
	-37126 cy Academy∛	Satellite			-	a Mitchell		
1825 :	Satellite Blvd.	Duluth, GA	30097 Gwinnett County acyacademy.com	,	Fax: leen	ne: (706) 433-7 (706) 310-6944 a.mitchell@dec	l al.ga.gov	
<b>Mailing</b> Same	Address				Joint	t with: Erikka Be	enning	
The fo	llowing infor	mation is as	sociated with a Licens	sing Study:				
					Activitie	es and Equ	iipment	
591-1-	112 Equipm	ent & Toys(	CR)				Met	
<b>Comm</b> A varie		ent and toys v	vere observed througho	ut the center.				
Comm Equipm		ture observe	d to be properly secured	d. as applicable				
			Water-related Activitie		-	Not	Evaluated	
Comm Center	ent does not pro	vide swimmir	ng activities.					
	•				С	hildren's F	ecords	
591-1- <sup>-</sup>	108 Childre	n's Records				Technical A	ssistance	
591-1- -releas		ensure that name, phone	parents provide and/or number, full address a			tion as needed:		
							Facility	
504.4								
<b>ວ</b> 91-1-'	106 Bathroo	oms					Not Met	
Comm Bathro	ent oms observed	l to be clean	on this date.					

## Georgia Department of Early Care and Learning

## Finding

591-1-1-.06(4) requires a Center first licensed after March 1, 1991, and Centers that remodel or add to existing plumbing facilities, to have the bathroom area fully enclosed and ventilated to the outside of the building with either an open screened window or functioning exhaust fan and duct system and requires Centers without fully enclosed bathrooms to ensure there is adequate ventilation to control odors and adequate sanitation measures to prevent the spread of contagious diseases. It was determined based on observation that the girls bathroom exhaust fan in classroom 2R was not in working order on this date.

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

The Center will fully enclose and ventilate bathroom areas, as required, and will provide adequate ventilation and sanitation in bathrooms that are not fully enclosed.

## Correction Deadline: 3/29/2023

#### 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)

## **Technical Assistance**

591-1-1-.25 - Please be mindful to keep items that pose a hazard inaccessible to children.

## Comment

Center appears clean and well maintained.

## Comment

Please secure cleaning tools (i.e., broom, plunger) out of reach of children.

## 591-1-1-.26 Playgrounds(CR)

## Comment

Playground observed to be clean and in good repair. Please ensure to monitor the fence for wear and tear.

## 591-1-1-15 Food Service & Nutrition

## Comment

Consultant discussed with provider to add thermometer's to both the refrigerator and freezer in all classrooms.

## Comment

Consultant discussed with the provider about replacing all 2% milk with 1% milk for children over two-years-old.

## Comment

Please ensure that bottles are covered and fully labeled with child's full name.

## Comment

Please ensure that infant feeding forms are updated regularly.

## **Technical Assistance**

591-1-1-.15(1) - CACFP Meal Pattern Requirements effective October 1, 2017 will be implemented October 1, 2018: 3 Components for breakfast: Grains, Vegetables, Fruits or both, Milk 5 Components for lunch – Grains, Meat/Meat alternates, Fruits, Vegetable, and Milk OR Grains, Meat/Meat alternates, 2 different types of vegetables, and Milk 2 of 5 Components for snack

Provided Updated CACFP Infant Meal pattern and Child/Adult Meal pattern flyers.

The Crediting Handbook for the CACFP can be located on DECAL and USDA's website: DECAL http://decal.ga.gov/CACFP/Handbook.aspx USDA http://www.fns.usda.gov/cacfp/cacfp-handbooks

**Technical Assistance** 

Food Service

**Technical Assistance** 

Met

#### 591-1-1-.18 Kitchen Operations

#### Comment

Kitchen appears clean and well organized.

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

# **Health and Hygiene**

## Comment Staff state proper knowledge of diapering procedures. 591-1-1-.17 Hygiene(CR) Comment Proper hand washing observed throughout the center. Correction Deadline: 11/28/2022 Corrected on 2/27/2023 .17(2) - The consultant observed the previous citation to be corrected in that the consultant observed proper hygiene for all children on this date. Correction Deadline: 11/28/2022 Corrected on 2/27/2023 .17(7) - The consultant observed the previous citation to be corrected in that the consultant observed proper hand washing for the children on this date. Correction Deadline: 11/28/2022 Corrected on 2/27/2023 .17(8) - The consultant observed the previous citation to be corrected in that the consultant observed proper hand washing for the staff on this date. 591-1-1-.20 Medications(CR) Comment Discussed proper medication documentation and procedures. **Policies and Procedures**

591-1-121 Operational Policies & Procedures	Met
Comment	
Program observed complete emergency drills	
591-1-127 Posted Notices	Met
Comment	
Please make sure that all required signs are posted and up to date.	
591-1-129 Required Reporting	Met
Comment	
Thank you for reporting as required.	
	Safety

#### 591-1-1-.05 Animals

#### Comment

Center does not keep animals on premises.

Met

Met

Met

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

#### Comment

Staff were observed to maintain a positive learning environment on this date.

## 591-1-1.13 Field Trips(CR)

#### Comment

Center does not participate in field trips at this time.

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

#### Comment

Complete documentation of transportation observed.

#### Comment

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

- Vehicle Tag # PVW 89974- Expires February 24, 2024.

- Vehicle Tag # - PVW 8995 - Expires February 24, 2024.

#### Correction Deadline: 12/5/2022

#### Corrected on 2/27/2023

.36(3)(a-b) - The consultant observed the previous citation to be corrected in that the consultant observed proper transportation documentation on this date.

## Sleeping & Resting Equipment

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

## Comment

Discussed SIDS and infant sleeping position.

#### Comment

Pleasant naptime environment observed.

#### Finding

591-1-1-.30(1)(b)1 requires that cots and mats are of sound construction and of sufficient size to accommodate comfortably the size and weight of the child; and that mats are in good repair, washable, covered with a waterproof material and at least two inches (2") thick. It was determined based on observation that rest mats in classrooms 1R, 2R, 3R, Center R were not a least two inches thick as required, and some were not in good repair.

#### POI (Plan of Improvement)

The Center will ensure that cots and mats are of sound construction and of sufficient size to accommodate the size and weight of the child and mats are in good repair, washable, covered with a waterproof material and is at least two inches thick.

#### Correction Deadline: 3/24/2023

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

#### Comment

The director provided three files for staff members hired since the previous visit conducted on September 20, 2022. The consultant observed three of three newly hired staff members to have evidence of a satisfactory criminal record check letter on file.

Not Evaluated

Met

Not Met

Met

Staff Records

#### 591-1-1-.09 Criminal Records Check(CR)

#### Comment

Criminal records checks were observed to be complete.

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

#### Comment

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

#### Comment

Please replace/add missing/expired item(s) in first aid kit(s).

#### 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 review of records that the Director did not have evidence of CPR and first aid 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.

#### Correction Deadline: 3/29/2023

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

Comment

Documentation observed of required 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 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 #9 with a documented date of hire of October 18, 2022.

Staff member #17 with a documented date of hire of November 10, 2022.

#### **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: 3/3/2023

Recited on 2/27/2023

Not Met

Not Met

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

#### 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)

#### Comment

Center observed to maintain appropriate staff:child ratios.

#### Comment

Discussed combining children of mixed ages.

#### Correction Deadline: 11/28/2022

#### Corrected on 2/27/2023

.32(1) - The consultant observed the previous citation to be corrected in that the consultant observed center to maintain the required staff:child ratios on this date.

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

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

Correction Deadline: 11/28/2022

Corrected on 2/27/2023

.32(7) - The consultant observed the previous citation to be corrected in that the consultant observed children to be properly supervised on this date.

Met

Met