

## 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:** 2/21/2023 Arrival: 10:35 AM Departure: 2:15 PM VisitType: Monitoring Visit

**CCLC-885** 

## La Petite Academy - Crooked Creek

6275 Crooked Creek Rd. Norcross, GA 30092 Gwinnett County (770) 417-1762 7432@lapetite.com

Regional Consultant

Leena Mitchell

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**Mailing Address** Same





Con	Compliance Zone Designation					
	Good Standing	Monitoring Visit	02/21/2023			
Goo	Good Standing	Licensing Study	09/13/2022			
Sup	Good Standing	Complaint Closure	06/30/2022			

npliance Zone Designation - A summary measure of a program's 12 month monitoring ory, as it pertains to child care health and safety rules. The three compliance zones are good ding, support, and deficient.

od Standing - Program is demonstrating an acceptable level of performance in meeting the rules.

Program performance is demonstrating a need for improvement in meeting port 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	One Year Olds	1	8	С	14	С	NA	NA	Centers
Main	B- 2R		0	0	С	13	С	NA	NA	Not In Use
Main	C - 3R	Two Year Olds	2	10	С	19	С	NA	NA	Lunch
Main	D - 4R	GA PreK	1	16	С	23	С	32	С	Lunch
Main	E- Front Left	Infants and One Year Olds	1	4	С	14	С	NA	NA	Floor Play
Main	F- 2L		0	0	С	24	С	33	С	Not In Use
Main	G- Back Left	GA PreK	1	16	С	22	С	NA	NA	Lunch
Main	H- Middle	Two Year Olds and Three Year Olds	1	12	С	22	С	31	С	Centers
		Total Capacity @35 sq. ft.: 1	51		Total C	apacity @	25 sq.			

ft.: 178

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Total # Children this Date: 66 Total Capacity @35 sq. ft.: 151 Total Capacity @25 sq.

Building	Playground	Playground Occupancy	Playground Compliance
Main	Playground-Back	32	С
Main	Playground-front left	25	С
Main	Playground-Right	114	С
Main	Playground-second left	21	С

The purpose of this visit was to conduct a monitoring visit and follow up on previous citations.

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, <a href="http://www.decal.ga.gov/CCS/RulesAndRegulations.aspx">http://www.decal.ga.gov/CCS/RulesAndRegulations.aspx</a>, 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.

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#### 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 <a href="mailto:qualityrated@decal.ga.gov">qualityrated@decal.ga.gov</a> for more information. Free techincal assistance is available!

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ietrich Wright, Program Official	Date	Leena Mitchell, Consultant	Date



# Bright from the Start Georgia Department of Early Care and Learning 2 Martin Luther King Jr. Drive SE, 670 East Tower Atlanta, GA 30334

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## (Findings Report)

Revision Date: 2/24/2023 4:27:00 PM

Date: 2/21/2023 VisitType: Monitoring Visit Arrival: 10:35 AM Departure: 2:15 PM

CCLC-885 Regional Consultant

La Petite Academy - Crooked Creek

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Same

## The following information is associated with a Monitoring Visit:

## **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.

Facility

## 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** 

## **Technical Assistance**

591-1-1-.25 - Please secure cleaning tools (i.e., broom, plunger) out of reach of children.

#### Comment

Center appears clean and well maintained.

## **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 diaper cream which is marked to be kept "out of the reach of children" was observed to be accessible to children in an unlocked cabinet under the diaper changing table in classroom 1R
- One container of diaper cream which are marked to be kept "out of the reach of children" were observed to be accessible to children on a shelf in the restroom in classroom 3R
- A teacher's backpack was observed sitting in a chair that was accessible to children in the middle classroom.
- A teacher's purse was observed in an unlocked cabinet under the diaper changing table accessible to children in classroom 1R

## 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: 2/21/2023

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

Met

#### Comment

Playground observed to be clean and in good repair. Please ensure to monitor the playground areas for the following hazards:

- Normal wear and tear of playground equipment and toys.
- Potential entrapment hazards in the fence surrounding the playground area.
- Biting and/or stinging insects (i.e. ants, bees, etc.).
- Loose and/or weak tree branches surrounding the playground area.
- Standing water in and around playground equipment after inclement weather.
- Fall zones and resilient surface.

Correction Deadline: 9/30/2022

## **Corrected on 2/21/2023**

.26(8) - The consultant observed the previous citation to be corrected in that the consultant observed adequate amount of resilient surface beneath the equipment on this date. Please ensure to fluff and redistribute after heavy rainfall.

## **Health and Hygiene**

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

Met

#### Comment

Proper diapering procedures observed. Please ensure windows are open during diaper changing for classrooms with licensed window ventilation.

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## 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.

Safety

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

Met

#### Comment

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

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

**Not Met** 

#### 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 # - RMS 7782 - Expires August 22, 2023.

## **Finding**

591-1-1-.36(7)(c)2. requires that the driver or other designated person shall immediately document in writing, with a check or other mark/symbol to account for each child listed on the passenger transportation checklist each time a child enters and exits the vehicle. The driver or other designated staff person shall document in writing with a different mark/symbol to account for each child listed on the passenger transportation checklist who was not present on the vehicle for any reason. An explanation shall be documented in writing whenever a child is transported to a field trip site but is not present on the return trip to the Center. It was determined based on review of records that the center did not document with a check or other mark/symbol to account for the load and unloading of two of three children receiving school transportation services to North Metro Elementary on February 6, 2023.

## POI (Plan of Improvement)

The driver/other designated person will immediately document in writing with a check/mark/symbol each time a child gets on and off the vehicle.

## Correction Deadline: 2/22/2023

#### Finding

591-1-1-.36(7)(c) 3. requires that the driver or other designated person document in writing the time of arrival and departure each time the vehicle departs from the Center, is loaded or unloaded at each school and when the vehicle returns to the Center; each time the vehicle departs from the Center, arrives at the location where any child is picked up or dropped off and when the vehicle returns to the Center; each time the vehicle leaves the Center, arrives at a field trip destination, leaves a field trip destination, and returns to the Center. It was determined based on review of records that the driver did not document in writing the time of arrival of the vehicle during the following times of routine transportation:

February 15, 2023: return time to facility was not noted for afternoon transportation from Chestnut Elementary School.

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

The Center will ensure that each time of arrival and departure is documented by the driver or designated person with training, review and monitoring.

Correction Deadline: 2/22/2023

Correction Deadline: 9/14/2022

## **Corrected on 2/21/2023**

.36(7)(d)1. - The consultant observed the previous citation to be corrected in that the consultant observed staff person signatures for first and second check on this date.

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Sleeping & Resting Equipment

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

Met

#### Comment

Discussed SIDS and infant sleeping position.

#### Comment

Pleasant naptime environment observed.

#### 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.

Correction Deadline: 9/13/2022

#### **Corrected on 2/21/2023**

.30(1)(b)3 - The consultant observed the previous citation to be corrected in that the consultant observed children laying on bottom sheets and not directly on the cot on this date.

**Staff Records** 

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

Met

#### Comment

The director provided three files for staff members hired since the previous visit conducted on September 13, 2022. The consultant observed three of three newly hired staff members to have evidence of a satisfactory criminal record check letter on file.

## 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 review of records that less than 50% of the caregiver staff had evidence of CPR and first aid training 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: 3/23/2023

## **Finding**

591-1-1-.14(1)(a) requires, in a Center that provides transportation, that either the driver or another Staff person present on the vehicle have current evidence of successful completion of a biennial training program in cardiopulmonary resuscitation (CPR) and a triennial training program in first aid offered by certified or licensed health care professionals or trainers and which dealt with the provision of emergency care to infants and children. It was determined based on review of records that staff member #8 with a documented date of hire of July 18, 2022 did not obtain first aid and CPR training prior to driving the bus alone on February 13, 2023.

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

The Center will verify proof of CPR/1st aid training and schedule Staff so that there is always a staff person on the vehicle with this training.

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Correction Deadline: 2/21/2023

## **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 of review of records that three staff members did not have evidence of personnel files 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: 2/26/2023

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

**Not Met** 

#### Comment

Please ensure completed orientation checklists are documented and signed.

#### **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 member did not completed health and safety orientation training within their first 90 days of employment:

Staff member #2 with a documented date of hire of August 2, 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: 3/23/2023

#### Comment

Discussed: Health and Safety Training is required for each staff member with direct care responsibilities within 90 calendar days of their hire date.

Correction Deadline: 3/11/2022

#### **Corrected on 2/21/2023**

.33(5) - The consultant observed the previous citation to be corrected in that the consultant observed two staff members to have evidence of 10 clock hours of 2022 training.

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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

Discussed combining children of mixed ages.

Correction Deadline: 9/13/2022

#### **Corrected on 2/21/2023**

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

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

**Technical Assistance** 

## **Technical Assistance**

591-1-1-.32 - Adequate supervision observed on this date. Please ensure that staff members are attentive and participating with all children during mealtimes and shall be seated within an arms length away from children 36-months of age and younger.

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