



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: 1/16/2025 **VisitType:** Licensing Study

Arrival: 10:45 AM **Departure:** 2:15 PM

CCLC-61943

Laughing Tots

5293 Mill Store Road Lake Park, GA 31636 Lowndes County
(229) 464-2608 laughingtotslakepark@gmail.com

Regional Consultant

Lisa Pitts

Phone: (678) 747-6859

Fax: (706) 314-7903

lisa.pitts@decal.ga.gov

Joint with: Kayla Coats

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. 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.
01/16/2025	Licensing Study	Good Standing	
09/23/2024	Monitoring Visit	Good Standing	
06/13/2024	Monitoring Visit	Good Standing	

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 Building	Room A	Infants and One Year Olds	1	6	C	13	C	NA	NA	Nap,Feeding,Flo or Play
Main Building	Room B	Two Year Olds	1	7	C	15	C	NA	NA	Free Play
Main Building	Room C	Three Year Olds and Four Year Olds	1	11	C	24	C	NA	NA	Free Play,Circle Time
Total Capacity @35 sq. ft.: 52			Total Capacity @25 sq. ft.: 0							
Total # Children this Date: 24			Total Capacity @35 sq. ft.: 52			Total Capacity @25 sq. ft.: 0				

Building	Playground	Playground Occupancy	Playground Compliance
Main Building	Playground A	14	C

Enrolled Children						
Under 1 years	1 years	2 years	3 years	4 years	5 years (Prekonly)	5 years and older
6	8	7	1	12	0	4

Comments

The purpose of this visit was to conduct a 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).

Please refer to the website, <http://www.dec.al.ga.gov/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

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 user id 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!



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

(Findings Report)

Date: 1/16/2025 **VisitType:** Licensing Study

Arrival: 10:45 AM **Departure:** 2:15 PM

CCLC-61943

Laughing Tots

5293 Mill Store Road Lake Park, GA 31636 Lowndes County
(229) 464-2608 laughingtotslakepark@gmail.com

Regional Consultant

Lisa Pitts

Phone: (678) 747-6859

Fax: (706) 314-7903

lisa.pitts@dec.al.ga.gov

Joint with: Kayla Coats

Mailing Address

Same

The following information is associated with a LS:

Activities and Equipment

591-1-1-.03 Activities

Not Met

Finding

591-1-1-.03(2) requires the Center to keep current lesson plans on site that reflect appropriate instruction practices and activities to support children's development. The Center shall have sufficient and varied play and learning equipment and materials to support the above program of activities in all developmental areas. It was determined based on observation that classrooms A, B, and C did not have current lesson plans available for the consultant to review.

POI (Plan of Improvement)

The Center will keep current lesson plans on site that include appropriate instruction practices and activities and will have sufficient and varied play and learning equipment and materials to support the activities.

Correction Deadline: 1/16/2025

591-1-1-.12 Equipment & Toys(CR)

Met

Comment

Discussed adding equipment and toys to enhance variety.

591-1-1-.35 Swimming Pools & Water-related Activities(CR)

Met

Comment

Center does not provide swimming activities.

Facility

591-1-1-.06 Bathrooms

Not Met

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 ventilation was not working properly.

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: 2/15/2025

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

Comment

Please be mindful to keep items that pose a hazard inaccessible to children.

Technical Assistance

591-1-1-.25(3) - The Coordinator and the Director discussed the water damage on the ceiling tiles on this date.

Correction Deadline: 1/16/2025

591-1-1-.25 Physical Plant-Structural/Mechanical

Not Met

Finding

591-1-1-.25(14) requires the Center to be lighted with a minimum of twenty-five foot candles of illumination except during rest periods. Areas used for napping shall be lit dimly. Not all rooms were appropriately illuminated when it was determined based on observation that the lighting in the bathroom, where the sink is located was not working.

POI (Plan of Improvement)

To ensure that appropriate lighting is provided, the center will [].

Correction Deadline: 2/15/2025

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

Not Met

Finding

591-1-1-.26(4) requires that playgrounds be protected from traffic or other hazards by a (4) four foot high fence or other barrier approved by this Department. Fencing material shall not present a hazard to children and shall be maintained so as to prevent children from leaving the playground area by any means other than through an approved access route. Fence gates shall be kept closed except when persons are entering or exiting the area. It was determined based on observation that there was a gap measuring at 4 inches on the bottom of the fence, on the left side of the play area. It was also determined that there were fence boards laying around the play area that had nails protruding out.

POI (Plan of Improvement)

The Center will routinely check the fence to determine if it is in good repair and remains at least 4 feet high, and will repair any hazards. The Center will train Staff to identify and report any fence hazards and to keep the fence gates closed when not in use.

Correction Deadline: 1/16/2025

Finding

591-1-1-.26(6) requires that playground equipment provide an opportunity for the children to engage in a variety of experiences and shall be age-appropriate. For example, toddlers shall not be permitted to swing in swings designed for School-age Children. The outdoor equipment shall be free of lead-based paint, sharp corners and shall be regularly maintained in such a way as to be free of rust and splinters that could pose significant safety hazard to the children. All equipment shall be arranged so as not to obstruct supervision of children. It was determined based on observation that the metal piece to the pop up tent, for shade, was not properly stored in an area where it was not accessible to the children in care.

POI (Plan of Improvement)

The Center will provide a variety of age-appropriate equipment that is arranged so as not to obstruct supervision of children. Staff will check the equipment daily to ensure that the equipment is free of hazards, rust and splinters.

Correction Deadline: 1/26/2025

Food Service

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

Technical Assistance

Technical Assistance

591-1-1-.15(6)(a) - The Coordinator and director discussed food being out for long periods of time.

Correction Deadline: 1/16/2025

591-1-1-.18 Kitchen Operations

Technical Assistance

Technical Assistance

591-1-1-.18(5) - The Coordinator and Director discussed replacing thermometers on this date.

Correction Deadline: 1/16/2025

Health and Hygiene

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

Met

Comment

Staff state proper knowledge of diapering procedures.

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.

Policies and Procedures

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

Not Met

Finding

591-1-1-.21(3) requires that the Center conduct drills for fire, tornado and other emergency situations. The fire drills will be conducted monthly and tornado and other emergency situation drills will be conducted every six months. The Center shall maintain documentation of the dates and times of these drills for two years. It was determined based on a review of records that the program did not have evidence that drills were completed for the months of May, June, July, August, September, October, November, and December of 2024.

POI (Plan of Improvement)

The Center will hold the drills as required and keep the documentation of the drills on file for two years.

Correction Deadline: 1/21/2025

Safety

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

Met

Comment

Age-appropriate discussion and/or redirection observed.

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

Met

Comment

Center does not provide routine transportation.

Sleeping & Resting Equipment

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

Technical Assistance

Comment

Discussed SIDS and infant sleeping position.

Technical Assistance

591-1-1-.30(4) - The Coordinator and Director discussed placing covers over the cots that are stacked in the classrooms.

Correction Deadline: 1/16/2025

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

Criminal record checks were observed to be complete.

Correction Deadline: 9/23/2024**Prior Visits: 09/23/2024****Corrected on 1/16/2025****.09(1)(a) - Previous citations corrected.****Correction Deadline: 9/23/2024****Prior Visits: 09/23/2024****Corrected on 1/16/2025****.09(1)(c) Previous citations corrected. All criminal background checks were complete on this date.****591-1-1-.14 First Aid & CPR(CR)****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 only one staff present had evidence of first aid and CPR for the consultant review.

POI (Plan of Improvement)

The Center Director and at least 50% of the care giver 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 care giver 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: 2/15/2025**591-1-1-.24 Personnel Records****Not Met****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 on a review of records that the three staff members present did not have a file for the consultant to review.

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: 1/21/2025**591-1-1-.33 Staff Training****Not Met****Finding**

591-1-1-.33(6) requires that evidence of orientation and training shall be documented in the Personnel file of each Staff member and shall be available to the Department for inspection. It was determined based on a review of records that staff did not have evidence of orientation and training for the consultant to review.

POI (Plan of Improvement)

The Center will develop and implement procedures to review staff records for documentation of training and orientation, to obtain and place missing documentation in staff records, and to file such documents in staff records on an ongoing basis.

Correction Deadline: 1/26/2025

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.

Correction Deadline: 9/23/2024

Prior Visits: 09/23/2024

Corrected on 1/16/2025

.32(2) - Previous citations corrected.

Correction Deadline: 9/23/2024

Prior Visits: 09/23/2024, 06/13/2024

Corrected on 1/16/2025

.32(4) - Previous citations corrected.

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

Adequate supervision observed on this date.