



**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:** 8/9/2017      **VisitType:** Monitoring Visit      **Arrival:** 9:25 AM      **Departure:** 10:45 AM

**FR-9105100152**

**Padilla, Maria D.**

2395 WINDWAY COURT Norcross, GA 30071 Gwinnett County  
(404) 312-5910 riapadilla1@gmail.com

**Regional Consultant**

Tamra Thomas

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**Mailing Address**

2395 WINDWAY COURT  
NORCROSS, GA 30071

<b>Compliance Zone Designation</b>		
08/09/2017	Monitoring Visit	Good Standing
04/27/2017	Licensing Study	Good Standing
11/16/2016	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 the rules.

**Deficient** - Program is not demonstrating an acceptable level of performance in meeting the rules.

**Ratios/License Capacity**

Age Ranges	Children Present	Child For Pay	CAPS	Not for Pay	Provider Children
Infant (0-11 mos)	0	0	0	0	0
1 & 2 Years	4	4	0	0	0
3 & 4 Years	0	0	0	0	0
School Age(5+) Years	0	0	0	0	0
<b>Total Under 13 Years</b>	4	4	0	0	0
<b>Total Under 18 Years</b>	4				

Children Present: 4

Total Children: 4

Caregivers/Helpers Present: 1

Total Caregivers/Helpers: 1

**Comments**

Plan of Improvement: No Plan Developed

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).

**Reminder:** All employees of child care programs must be fingerprinted before **January 1, 2017**. For instructions and to submit records check applications online, please visit [www.decalkoala.com](http://www.decalkoala.com). You are encouraged not to wait and to complete the process as soon as possible.



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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), e-mail the following information to [CCSRefutations@decal.ga.gov](mailto:CCSRefutations@decal.ga.gov).

- 1) Facility name, license number and visit date
- 2) Your name, title/relationship to the facility, e-mail address & up to two phone number(s) where you can be reached
- 3) Specific rule number(s) that you are refuting, along with your concerns or questions regarding the rule citation

Refutations must be submitted to Child Care Services (CCS) within 10 business days of the completion date.

A sample form for submitting a refutation can be found at: <http://decal.ga.gov/ChildCareServices/RefutationInformation.aspx>

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.

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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)

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Maria Padilla, Program Official

Date

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Tamra Thomas, Consultant

Date



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### Findings Report

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The following information is associated with a Monitoring Visit:

### Activities and Equipment

**290-2-3-.12 Equipment and Supplies(CR)**

**Met**

**Comment**

Observed-Variety Of Equipment

**290-2-3-.19 Infant-Sleeping Safety Requirements(CR)**

**Met**

**Comment**

The provider had appropriate pack n' play for nap time.

**Correction Deadline: 8/9/2017**

**290-2-3-.07 Swimming Pools & Water-related Activities(CR)**

**Met**

**Comment**

No Swimming Activities Provided

### Children's Records

**290-2-3-.08 Children's Records**

**Technical Assistance**

**Technical Assistance**

The provider will obtain Liability forms from children enrolled August 7, 2017. The consultant provided a printed copy of the form.

**Correction Deadline: 8/9/2017**

### Facility

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**290-2-3-.11 Physical Plant - Safe Environment(CR)** **Met**

**Comment**

Observation-No Hazards Accessible

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**290-2-3-.13 Physical Plant-Structural/Mechanical(CR)** **Met**

**Comment**

Home Clean, Free of Hazards

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**290-2-3-.13 Playgrounds(CR)** **Met**

**Comment**

Outside Area Clean, Well Maintained

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**Health and Hygiene**

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**290-2-3-.11 Children's Health and Hygiene(CR)** **Met**

**Comment**

Staff Stated Proper Knowledge

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**290-2-3-.11 Diapering Areas & Practices(CR)** **Met**

**Comment**

Staff Stated Proper Knowledge

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**290-2-3-.11 Medications(CR)** **Met**

**Comment**

Provider does not provide Medication a this time.

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**Licensure**

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**290-2-3-.04 Application Requirements(CR)** **Met**

**Comment**

Appropriate number of children

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**Safety and Discipline**

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**290-2-3-.11 Discipline(CR)** **Met**

**Comment**

Observed-Positive Learning Environment

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**290-2-3-.11 Transportation(CR)** **Met**

**Comment**

No Routine Transportation Provided

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**Staff Records**

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**290-2-3-.21 Criminal Records Check(CR)** **Met**

**Comment**

Criminal Records Check complete

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**290-2-3-.07 Staff Qualifications(CR)****Met****Comment**

Staff qualifications/compliance with law

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**290-2-3-.07 Staff Training****Not Met****Finding**

290-2-3-.07(4) requires the Provider, Employees and Provisional Employees with direct care responsibilities to complete health and safety training at the time of employment. Staff employed prior to September 30, 2016 will complete the training by December 29, 2016 and Staff employed after September 30, 2016 will complete the training within the first 90 days of employment. The training must address the following health and safety topics: prevention and control of infectious diseases; 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 and abusive head trauma; emergency preparedness and response planning for emergencies resulting from a natural disaster, or threatening event such as violence at the facility; handling and storage of hazardous materials and the appropriate disposal of bio contaminants; and precautions in transporting children (if applicable).

It was determined based on a review of records, the provider has not completed the Health and Safety training.

**POI (Plan of Improvement)**

The Provider will complete the required training and will ensure any Employees complete the training. The Provider will develop a plan to ensure that any new Employees complete the training as required. The health and safety training flyer was printed and given to the provider.

**Correction Deadline: 9/8/2017**

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<b>Staff:Child Ratios and Supervision</b>
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**290-2-3-.07 Staff:Child Ratios(CR)****Met****Comment**

Appropriate Ratios Observed

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**290-2-3-.07 Supervision(CR)****Met****Comment**

Observed-Adequate Supervision