



**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:** 8/28/2019    **VisitType:** Technical Assistance    **Arrival:** 9:45 AM    **Departure:** 10:45 AM

**CCLC-36982**

**Tabernacle of Praise Early Learning Center**

1640 Highway 42 North McDonough, GA 30253 Henry County  
 (770) 692-4606 admin@topearlylearningcenter.com

**Regional Consultant**

La Tonya Bonner  
 Phone: (770) 357-7034  
 Fax: (770) 357-7033  
 latonya.bonner@decal.ga.gov

**Mailing Address**  
 Same

**Quality Rated:**

<b>Compliance Zone Designation</b>			<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 standing, support, and deficient.  <b>Good Standing</b> - Program is demonstrating an acceptable level of performance in meeting the rules. <b>Support</b> - Program performance is demonstrating a need for improvement in meeting rules. <b>Deficient</b> - Program is not demonstrating an acceptable level of performance in meeting the rules.
08/20/2019	Complaint Investigation Follow Up	Good Standing	
08/20/2019	Complaint Closure	Support	
07/31/2019	Monitoring Visit	Good Standing	

Building	Room	Age Group	Staff	Children	NC/C	Max 35 SF.	35 SF. Comp.	Max 25 SF.	25 SF. Comp.	Notes
Main	C-3rd Left (Potty Trained Only)		0	0		8	C	NA	NA	
Main	E- 5th Left		0	0		8	C	NA	NA	
Main	F- Back (4-5yrs)		0	0		22	C	NA	NA	
Main	G- PreK-2nd Right		0	0		21	C	NA	NA	
Main	H-PreK ( 1st Right)		0	0		17	C	NA	NA	
Main	I- School Age		0	0		17	C	NA	NA	
Main	Rm. A- 1st Left		0	0		8	C	NA	NA	
Main	Rm. B- 2nd Left		0	0		8	C	NA	NA	
Main	Rm. D- 4th Left		0	0		8	C	NA	NA	
Total Capacity @35 sq. ft.: 117					Total Capacity @25 sq. ft.: 0					
Total # Children this Date: 0			Total Capacity @35 sq. ft.: 525			Total Capacity @25 sq. ft.: 0				

Building	Playground	Playground Occupancy	Playground Compliance
Main	Playground	46	C

**Comments**

The consultant conducted an Initial TA Agreement on this date.  
 The TA Agreement was signed on this date and a copy was left with the center director on this date.

The first TA Agreement was scheduled for September 5th at 9:30 am.

No Goals were created on this date.

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/Regulations.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.

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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@dec.state.ga.us](mailto:CCSRefutations@dec.state.ga.us).

- 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://dec.state.ga.us/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)



#### Important New Deadlines:

Your program must be Quality Rated by December 31, 2020 in order to continue to receive Childcare and Parent Services (CAPS).

Get started today! Sign up by completing a short online application: <https://qualityrated.dec.state.ga.us/>  
Request free technical assistance to help you earn your star rating by contacting the Quality Rated help desk at 855-800-7747 or [qualityrated@dec.state.ga.us](mailto:qualityrated@dec.state.ga.us)

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Rajeeyah Jones, Program Official

Date

La Tonya Bonner, Consultant

Date



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**Date:** 1/1/0001

**Purpose:**

**Arrival:**

**Departure:**

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**Consultant**

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670 East Tower

Atlanta, GA 30334

Phone: ()

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County