



**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:** 4/16/2019    **VisitType:** Monitoring Visit    **Arrival:** 11:30 AM    **Departure:** 3:15 PM

**CCLC-50284**

**Trilogy Achievement Academy**

155 Williams Road Statesboro, GA 30458 Bulloch County  
(912) 243-9123 info@thetrilogy.academy

**Regional Consultant**

Haley Carwile

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haley.carwile@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.
04/16/2019	Monitoring Visit	Good Standing	
12/21/2018	Initial Licensing Study	Good Standing	

**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.

**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	Infants and One Year Olds	2	6	C	9	C	NA	NA	Floor Play, Outside, Nap
Main	B	One Year Olds and Two Year Olds	2	6	C	9	C	NA	NA	Circle Time
Main	C	One Year Olds and Two Year Olds	1	3	C	12	C	NA	NA	Circle Time
Main	D	Two Year Olds and Three Year Olds	2	5	C	12	C	NA	NA	Circle Time, Nap
Main	E		0	0	C	12	C	NA	NA	
Main	F		0	0	C	15	C	NA	NA	
Main	G		0	0	C	23	C	NA	NA	
Main	H		0	0	C	24	C	NA	NA	
Main	I		0	0	C	13	C	NA	NA	

Total Capacity @35 sq. ft.: 129

Total Capacity @25 sq. ft.: 0

Total # Children this Date: 20

Total Capacity @35 sq. ft.: 129

Total Capacity @25 sq. ft.: 0

Building	Playground	Playground Occupancy	Playground Compliance
Main	Playground A	25	C
Main	Playground B	46	C
Main	Playground C	71	C

**Comments**

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.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.

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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.ga.gov](mailto:CCSRefutations@dec.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://dec.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)



#### 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.ga.gov/>  
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.ga.gov](mailto:qualityrated@dec.ga.gov)

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Cindy Gastelum, Program Official

Date

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Haley Carwile, Consultant

Date



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### Findings Report

**Date:** 4/16/2019 **VisitType:** Monitoring Visit **Arrival:** 11:30 AM **Departure:** 3:15 PM

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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.

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

**N/A**

**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**

**Finding**

591-1-1-.25(3) requires the Center and surrounding premises to be kept clean, free of debris and in good repair. Hygienic measures such as, but not limited to, screened windows and proper waste disposal procedures shall be utilized to minimize the presence of rodents, flies, roaches and other vermin at the Center. It was determined based on observation that in Room A (infants) that the side of the counter of the diapering area was not attached and needed to be glued back.

**POI (Plan of Improvement)**

The Center will have the Center and surrounding areas cleaned, make repairs where needed, and remove all debris is removed. The Center will implement a plan to keep areas clean and in good repair that includes regular monitoring.

**Correction Deadline: 4/16/2019**

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

**Met**

**Comment**

Playground observed to be clean and in good repair.

## Food Service

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

Not Met

#### Technical Assistance

591-1-1-.15(3) - Please ensure that infants that are enrolled in the licensed program bring pre-made bottles labeled and dated daily.

**Correction Deadline: 4/16/2019**

#### Finding

591-1-1-.15(3) requires baby bottles and formula to be labeled with the individual child's name; supplied by the Parent daily in bottles; and refrigerated at a temperature of forty (40) degrees Fahrenheit or less. Only the current day's formula or breast milk shall be served. If formula must be provided by the Center, only commercially prepared, ready-to-feed formula shall be used. Refrigerated or frozen breast milk shall only be heated or thawed under warm running water or in a container of warm water. It was determined based on observation that the fridge in Room A (infants) was reading fifty-five degrees Fahrenheit and not forty degrees Fahrenheit or less as required.

#### POI (Plan of Improvement)

The Center will train Staff to follow the required procedures, ensure that parents are fully informed, and will review and monitor regularly.

**Correction Deadline: 4/16/2019**

## 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

Staff were observed to remind children to wash hands.

### 591-1-1-.20 Medications(CR)

Not Evaluated

#### Comment

The Provider currently does not dispense/administer medication.

## Safety

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

Met

#### Comment

Age-appropriate discussion and/or redirection observed.

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

Not Evaluated

#### Comment

Center does not provide routine transportation at this time.

## Sleeping & Resting Equipment

**Finding**

591-1-1-.30(4). requires that if cots and mats are stored in the children's activity room or area, they shall be stored to prevent children's access to them and to allow maximum use of play space. When storage is available and used for the storage of cots and mats that allows the cots, mats and any bedding to be stored without touching any other cots, mats or bedding, the bedding may be left on the cot or mat. When such storage is not available for the cots and mats, each child's bedding shall be kept separate from other children's bedding and stored in containers marked for individual use, such as, but not limited to, bins, cubbies, or bags. It was determined based on observation that in Room B (ones and twos) that cots were stored accessible to the children in care.

**POI (Plan of Improvement)**

The Center will store cots and mats so children do not have access to them and they don't take up play space and will store them so each child's bedding is separate from the others.

**Correction Deadline: 4/16/2019**

<b>Staff Records</b>
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**Records Reviewed: 11**

**Records with Missing/Incomplete Components: 7**

Staff # 1	Met
Date of Hire: 02/25/2019	
Staff # 2	Not Met
Date of Hire: 12/26/2018	
<u>"Missing/Incomplete Components"</u>	
.33(3)-Health & Safety Certificate	
Staff # 3	Not Met
Date of Hire: 12/26/2018	
<u>"Missing/Incomplete Components"</u>	
.33(3)-Health & Safety Certificate	
Staff # 4	Met
Date of Hire: 12/21/2018	
Staff # 5	Not Met
Date of Hire: 01/07/2010	
<u>"Missing/Incomplete Components"</u>	
.33(3)-Health & Safety Certificate,.14(2)-First Aid Missing,.14(2)-CPR missing	
Staff # 6	Not Met
Date of Hire: 12/26/2018	
<u>"Missing/Incomplete Components"</u>	
.33(3)-Health & Safety Certificate	
Staff # 7	Not Met
Date of Hire: 12/26/2018	

**Records Reviewed: 11**

**Records with Missing/Incomplete Components: 7**

"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing,.33(3)-Health & Safety Certificate

Staff # 8 Met  
Date of Hire: 12/21/2018

Staff # 9 Met  
Date of Hire: 12/26/2018

Staff # 10 Not Met  
Date of Hire: 12/26/2018

"Missing/Incomplete Components"

.33(3)-Health & Safety Certificate

Staff # 11 Not Met  
Date of Hire: 12/26/2018

"Missing/Incomplete Components"

.33(3)-Health & Safety Certificate

**Staff Credentials Reviewed: 11**

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

**Comment**

Criminal record checks were observed to be complete.

**Comment**

Director provided six files for employees hired since last visit.

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**591-1-1-.33 Staff Training Not Met**

**Finding**

591-1-1-.33(3) requires each staff member with direct care responsibilities to complete health and safety training at the time of employment that will count toward required annual training: 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 health and safety training within the first 90 days of employment. It was determined based on review of files that four staff members had not completed the health and safety training in a timely manner as required.

**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.

**Correction Deadline: 5/16/2019**

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**591-1-1-.31 Staff(CR) Not Met**

**Finding**

591-1-1-.31(2)(c) requires the Center to maintain a copy and/or written verification of the credential or degree awarded to the lead teacher that is required by these rules in the lead teacher's file, to make the document available for inspection and to provide the document to Department staff upon request. It was determined based on review of files that two lead teachers did not have a copy of their credential at the center as required.

**POI (Plan of Improvement)**

The Center will review lead teacher records to ensure the required documentation is on file and will obtain and file it if not found.

**Correction Deadline: 4/16/2019**

<b>Staffing and Supervision</b>
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**591-1-1-.32 Staff:Child Ratios and Group Size(CR)** **Met**

**Comment**

Center observed to maintain appropriate staff:child ratios.

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

**Comment**

Adequate supervision observed on this date.