**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:** 6/17/2025 **VisitType:** Licensing Study **Arrival:** 11:40 AM **Departure:** 6:15 PM

**CCLC-58057**
**Great Beginnings of Dacula**
1271 Harbins Rd. Dacula, GA 30019 Gwinnett County
(770) 995-4343 info@gbdacula.com

Regional Consultant
Lynn Schnitzer
Phone: (678) 717-5720
Fax: (770) 344-5683
lynn.schnitzer@decal.ga.gov

**Mailing Address**
Same

**Quality Rated:** ★ ★

| Compliance Zone Designation | | |
|---|---|---|
| 06/17/2025 | Licensing Study | Good Standing |
| 04/28/2025 | Incident Investigation Closure | Good Standing |
| 04/16/2025 | Incident Investigation & Follow Up | 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 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 |
|---|---|---|---|---|---|---|---|---|---|---|
| I | C- 3's | | 0 | 0 | C | 23 | C | 32 | C | |
| I | E- 4's | Three Year Olds | 1 | 15 | C | 27 | C | 38 | C | Nap |
| I | F- 4's | Three Year Olds | 1 | 14 | C | 27 | C | 38 | C | Nap |
| I | G-Private Pre-K | | 0 | 0 | C | 27 | C | NA | NA | |
| I | H- 3's & 4's | Three Year Olds | 2 | 14 | C | 27 | C | 37 | C | Nap |
| I | I | Two Year Olds | 2 | 14 | C | 29 | C | NA | NA | Nap |
| I | J- 2's | Two Year Olds | 2 | 14 | C | 33 | C | NA | NA | Transitioning |
| I | K- 2's | Two Year Olds | 1 | 10 | C | 34 | C | NA | NA | Nap |
| I | L- 1's | One Year Olds and Two Year Olds | 2 | 10 | C | 22 | C | NA | NA | Nap |
| I | M- 1's | One Year Olds and Two Year Olds | 2 | 10 | C | 22 | C | NA | NA | Nap |
| I | N- 6wks-12mths | One Year Olds | 3 | 10 | C | 23 | C | NA | NA | Floor Play,Diapering, Nap |
| I | O- 6wks- 12 mths | Infants and One Year Olds | 2 | 6 | C | 16 | C | NA | NA | Feeding,Floor Play,Nap |
| | | Total Capacity @35 sq. ft.: 310 | | | Total Capacity @25 sq. ft.: 733 | | | | | |
| II | A-GA- Pre-K 1 | Four Year Olds and Five Year Olds | 1 | 17 | C | 23 | C | 33 | C | Nap |
| II | B- Gym/ Afterschool 5-12 yrs | Five Year Olds and Six Year Olds and Over | 2 | 33 | C | 111 | C | NA | NA | Centers |
| II | C- GA-Pre-K- 3 | Five Year Olds | 1 | 17 | C | 22 | C | 30 | C | Nap |
| II | D- GA Pre-K 2 | Four Year Olds | 1 | 17 | C | 25 | C | 35 | C | Nap |

| | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| II | E GA Pre-K - 6 | | 0 | 0 | C | 27 | C | 38 | C | |
| II | F- GA Pre-K -5 | Five Year Olds and Six Year Olds and Over | 1 | 17 | C | 24 | C | 34 | C | TV |
| II | G- GA Pre-K-7 | | 0 | 0 | C | 22 | C | 31 | C | |
| II | H- GA Pre-K- 4 | | 0 | 0 | C | 23 | C | 32 | C | |
| | | Total Capacity @35 sq. ft.: 277 | | | Total Capacity @25 sq. ft.: 733 | | | | | |
| Total # Children this Date: 218 | | Total Capacity @35 sq. ft.: 587 | | | Total Capacity @25 sq. ft.: 733 | | | | | |

| Building | Playground | Playground Occupancy | Playground Compliance |
|---|---|---|---|
| I | Playground A- 6wks-12myhs | 25 | C |
| I | Playground B- 1's &2 yrs | 40 | C |
| I | Playground C-2's - 4's | 73 | C |
| I | Playground D- 4- 7 yrs | 63 | C |
| II | Playground E - 4- 12 yrs | 135 | C |

| **Enrolled Children** | | | | | | |
|---|---|---|---|---|---|---|
| **Under 1 years** | **1 years** | **2 years** | **3 years** | **4 years** | **5 years (Prekonly)** | **5 years and older** |
| 5 | 21 | 41 | 47 | 24 | 0 | 100 |

**Comments**
June 17, 2025-The visit was not closed on this date due to time constraints. Upon its completion, a copy of the report will be sent to the child care program via email.
June 18, 2025- The visit was completed. The consultant discussed the visit with the Director, Alexa Martinez.

Plan of Improvement: Developed 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.decal.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 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.

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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 Quality Rated/CAPS Update:

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 CAPS/ QR Provisional Status, allowing for scholarships while working toward an initial star rating. Provisional Status eligibility will be determined at the time of CAPS enrollment as part of the CAPS application process.

**Contact the Quality Rated help desk at 855-800-7747 or** qualityrated@decal.ga.gov **for more information. Free technical assistance is available!**

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**(Findings Report)**

**Date:** 6/17/2025 **VisitType:** Licensing Study **Arrival:** 11:40 AM **Departure:** 6:15 PM

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**Mailing Address**
Same

**The following information is associated with a Licensing Study:**

## Activities and Equipment

**Records Reviewed: 46** **Records with Missing/Incomplete Components: 2**

Staff # 28 Not Met

Date of Hire: 06/05/2024

"Missing/Incomplete Components"

.33(3)-Health & Safety Certificate

Staff # 45 Not Met

Date of Hire: 05/31/2018

"Missing/Incomplete Components"

.09-Criminal Records Check Missing

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

**Comment**
Equipment and furniture observed to be properly secured, as applicable.

**591-1-1-.35 Swimming Pools & Water-related Activities(CR)** **Not Evaluated**

**Comment**
Center does not provide swimming activities.

**Comment**
Pool not in use at this time, gates observed locked.

## Children's Records

**Records Reviewed: 46** **Records with Missing/Incomplete Components: 2**

Staff # 28 Not Met

Date of Hire: 06/05/2024

"Missing/Incomplete Components"

.33(3)-Health & Safety Certificate

Staff # 45 Not Met

Date of Hire: 05/31/2018

**Records Reviewed: 46** **Records with Missing/Incomplete Components: 2**

"Missing/Incomplete Components"

.09-Criminal Records Check Missing

**591-1-1-.08 Children's Records** **Technical Assistance**

**Comment**
Parent authorizations obtained/completed.

**Technical Assistance**
591-1-1-.08(1) - Consultant discussed with director to ensure that children's enrollment forms are completely filed out.

**Correction Deadline: 6/17/2025**

## Facility

**Records Reviewed: 46** **Records with Missing/Incomplete Components: 2**

Staff # 28 Not Met

Date of Hire: 06/05/2024

"Missing/Incomplete Components"

.33(3)-Health & Safety Certificate

Staff # 45 Not Met

Date of Hire: 05/31/2018

"Missing/Incomplete Components"

.09-Criminal Records Check Missing

**591-1-1-.06 Bathrooms** **Met**

**Correction Deadline: 7/3/2025**

**Corrected on 6/17/2025**
**.06(4) - The previous citation was observed corrected on this date. The Consultant observed that the ventilation in Building I, classroom L-1's was working.**

**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**

**Technical Assistance**
591-1-1-.25(13) - Consultant discussed with director to ensure that cleaning solutions and cleaning tools are stored out of reach of children in classrooms Building I, G-Private Pre-K, Building I, E-4's, and Building II, F-GA Pre-K-5

**Correction Deadline: 6/17/2025**

**Technical Assistance**
591-1-1-.25(3) - Consultant discussed with director to ensure to repair the peeling trim on the children's sink in classroom Building I, M-1's.

**Correction Deadline: 6/17/2025**

**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 the fence had the following hazards:
-There were protruding wires and a gap that was approximately 5 inches on the gate between Playground C-2's --4's and Playground E-4-12 yrs.
-There were protruding wires at the bottom of the gate between Playground B- 1's & 2 yrs.
-There was loose mesh on the gates on sidewalk in front of the pool.

**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: 6/17/2025**

## Food Service

| **Records Reviewed: 46** | **Records with Missing/Incomplete Components: 2** |
|---|---|

Staff # 28 — Not Met

Date of Hire: 06/05/2024

"Missing/Incomplete Components"

.33(3)-Health & Safety Certificate

Staff # 45 — Not Met

Date of Hire: 05/31/2018

"Missing/Incomplete Components"

.09-Criminal Records Check Missing

### 591-1-1-.15 Food Service & Nutrition — Technical Assistance

**Comment**
Center menu meets USDA guidelines.

**Comment**
Consultant observed that the infant feeding forms were updated every three months.

**Technical Assistance**
591-1-1-.15(3) - Consultant discussed with the director to ensure that two of six children's bottles are labeled with each child's full name.

**Correction Deadline: 6/17/2025**

### 591-1-1-.18 Kitchen Operations — Met

**Comment**
Kitchen appears clean and well organized.

## Health and Hygiene

| **Records Reviewed: 46** | **Records with Missing/Incomplete Components: 2** |
|---|---|

Staff # 28 — Not Met

Date of Hire: 06/05/2024

"Missing/Incomplete Components"

.33(3)-Health & Safety Certificate

Staff # 45 — Not Met

Date of Hire: 05/31/2018

| Records Reviewed: 46 | Records with Missing/Incomplete Components: 2 |
|---|---|

<u>"Missing/Incomplete Components"</u>

.09-Criminal Records Check Missing

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

**Comment**
Proper diapering procedures observed.

**591-1-1-.17 Hygiene(CR)** **Met**

**Comment**
Proper hand washing observed throughout the center.

**591-1-1-.20 Medications(CR)** **Not Met**

**Finding**
591-1-1-.20(3) requires the Center to maintain a record of medication dispensed that includes the date, time and amount of medication, any noticeable adverse reaction, and the signature or initials of the person administering the medication. It was determined based on review of records that 'albuterol sulfate' was to be administered on October 8, 2024, and staff did not indicate if the medication was dispensed.

**POI (Plan of Improvement)**
The Center will train Staff responsible for dispensing medication in the accurate completion and storage of the records and will implement a plan to monitor this.

**Correction Deadline: 6/17/2025**

**Finding**
591-1-1-.20(5) requires that medicines no which are no longer to be dispensed shall be returned to the child's Parent(s) immediately. It was determined based on observation that the center did not return five medications that were no longer being dispensed.

**POI (Plan of Improvement)**
The Center will train Staff on a system for tracking the use of medications and returning them to Parent(s).

**Correction Deadline: 6/17/2025**

## Policies and Procedures

| Records Reviewed: 46 | Records with Missing/Incomplete Components: 2 |
|---|---|

Staff # 28 Not Met

Date of Hire: 06/05/2024

<u>"Missing/Incomplete Components"</u>

.33(3)-Health & Safety Certificate

Staff # 45 Not Met

Date of Hire: 05/31/2018

<u>"Missing/Incomplete Components"</u>

.09-Criminal Records Check Missing

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

**Comment**
Program observed complete emergency drills

**591-1-1-.27 Posted Notices** **Met**

**Comment**
Observed all required posted notices.

## Safety

Staff # 28 Not Met

Date of Hire: 06/05/2024

"Missing/Incomplete Components"

.33(3)-Health & Safety Certificate

Staff # 45 Not Met

Date of Hire: 05/31/2018

"Missing/Incomplete Components"

.09-Criminal Records Check Missing

**591-1-1-.05 Animals** **N/A**

**Comment**
Center does not keep animals on premises.

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

**Correction Deadline: 4/28/2025**

**Corrected on 6/17/2025**
**.11(2) - The previous citation was observed corrected on this date. The Consultant observed center staff to use appropriate child guidance techniques.**

**591-1-1-.13 Field Trips(CR)** **Not Evaluated**

**Comment**
Center does not participate in field trips at this time.

**591-1-1-.36 Transportation(CR)** **Not Met**

**Comment**
A current/completed inspection was observed for all vehicles used in transporting children this date.

**Finding**
591-1-1-.36(7)(b) requires that an emergency medical information record be maintained in the vehicle for each child being transported. The emergency medical information record for each child shall include a listing of the child's full name, date of birth, allergies, special medical needs and conditions, current prescribed medications that the child is required to take on a daily basis for a chronic condition, the name and telephone number of the child's doctor, the local medical facility that the Center uses in the area where the Center is located and the telephone numbers where the Parents can be reached. It was determined based on review of records that the center did not have an emergency medical information record for one of 33 children receiving school transportation services. Further, five of 33 emergency medical information records did not have information regarding the student's special medical needs and conditions, and five of 33 emergency medical information records did not have the telephone number of the child's doctor .

**POI (Plan of Improvement)**
The Center will obtain a complete emergency medical information record for each child that is transported and maintain a copy on the vehicle. The center staff pulled the documents from the children's files and add the documents to the transportation binder.

**Correction Deadline: 6/20/2025**

**Recited on 6/17/2025**

**Finding**
591-1-1-.36(7)(c)3. requires that the driver or other designated person document in writing the date and 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 center staff did not write the date for transportation routes to Alcova Elementary School, Dacula Elementary School, Mulberry Elementary School, and Yargo Elementary School,conducted between May 12, 2025, and May 23, 2025.

**POI (Plan of Improvement)**
The Center will ensure that each date and time of arrival and departure is documented by the driver or designated person with training, review and monitoring.

**Correction Deadline: 6/18/2025**

## Sleeping & Resting Equipment

**Records Reviewed: 46** **Records with Missing/Incomplete Components: 2**

Staff # 28 Not Met

Date of Hire: 06/05/2024

"Missing/Incomplete Components"

.33(3)-Health & Safety Certificate

Staff # 45 Not Met

Date of Hire: 05/31/2018

"Missing/Incomplete Components"

.09-Criminal Records Check Missing

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

**Comment**
Staff stated knowledge of infant safe sleep requirements.

**Technical Assistance**
591-1-1-.30(1)(b)1 - Consultant discussed with director to ensure that sleep mats that have torn vinyl and exposed foam are discarded.

**Correction Deadline: 6/17/2025**

## Staff Records

**Records Reviewed: 46** **Records with Missing/Incomplete Components: 2**

Staff # 28 Not Met

Date of Hire: 06/05/2024

"Missing/Incomplete Components"

.33(3)-Health & Safety Certificate

Staff # 45 Not Met

Date of Hire: 05/31/2018

"Missing/Incomplete Components"

.09-Criminal Records Check Missing

**591-1-1-.09 Criminal Records and Comprehensive Background Checks(CR)** **Not Met**

**Comment**
Director provided five files for employees hired since last visit April 16, 2025.

**Finding**
591-1-1-.09(1)(c) requires the Center to ensure that every Employee has a valid and current satisfactory Comprehensive Records Check Determination on file prior to being present at the Center while any child is present for care or before an individual age 17 or older resides in the Center. The Comprehensive Records Check Determination must have a Records Check Clearance Date that is no older than the preceding 12 months of the hire date; provided, however, if the Employee has had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer, a new satisfactory Comprehensive Records Check Determination is required. It was determined based on review of records that staff #45's, date of hire May 31, 2018, criminal background check had expired on May 27, 2025. Staff #45 was observed to be caring for children in Building I, classroom E-4's at the time of the visit. Staff #45 was removed from the classroom and the director submitted a records check application to the department for staff #45, and made an appointment for them to submit fingerprints to an authorized fingerprinting site during the visit.

**POI (Plan of Improvement)**
IMMEDIATE CORRECTION - The Center will ensure that every Employee has a valid and current satisfactory Comprehensive Records Check Determination on file prior to being present at the Center while any child is present for care or before an individual age 17 or older resides in the Center. The Comprehensive Records Check Determination must have a Records Check Clearance Date that is no older than the preceding 12 months of the hire date; provided, however, if the Employee has had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer, a new satisfactory Comprehensive Records Check Determination is required. The program's owner or an officer/member of the corporation must view the A to Z Background Check video units pertaining to this records check rule and return the signed affidavit within one week from this visit date. The center will ensure the CRC rules are maintained.

**Correction Deadline: 6/17/2025**

**Finding**
591-1-1-.09(1)(l)3. requires the Center to immediately require a new Comprehensive Records Check Determination for a Director, Employee or Provisional Employee at least once every five years. It was determined based on review of records that staff #45's, date of hire May 31, 2018, criminal background check had expired on May 27, 2025. Staff #45 was observed to be caring for children in Building I, classroom E-4's at the time of the visit. Staff #45 was removed from the classroom and the director submitted a records check application to the department for staff #45, and made an appointment for them to submit fingerprints to an authorized fingerprinting site during the visit.

**POI (Plan of Improvement)**
IMMEDIATE CORRECTION - The Center will that each Director, Employee and Provisional Employee has a Comprehensive Records Check Determination on file that has been issued within the past five years. The program's owner or an officer/member of the corporation must view the A to Z Background Check video units pertaining to this records check rule and return the signed affidavit within one week from this visit date. The Center will ensure CRC rules are maintained.

**Correction Deadline: 6/17/2025**

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**591-1-1-.14 First Aid & CPR** — **Technical Assistance**

**Comment**
Consultant observed evidence of 100% of center staff hired more than 90 days to have current certification in First Aid and CPR.

**Technical Assistance**
591-1-1-.14(3) - Consultant observed a complete first aid kit in the center and on each vehicle used for transportation. Consultant discussed with the director to ensure that the first aid kits on the vehicles had a thermometer.

**Correction Deadline: 6/27/2025**

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

**Comment**
Consultant observed documentation of required annual staff training.

**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 staff #28, date of hire June 5, 2024, did not have evidence of completed health and safety orientation training on file. Further, staff #8, date of hire October 30, 2017, and staff #16, date of hire July 6, 2021, were determined to have six hours of health and safety orientation training on file.

**POI (Plan of Improvement)**
The Center will ensure that new hires who have not completed health and safety orientation training or who completed complete health and safety orientation training more than 12 months prior to their hire date will complete their training within 90 days. The center will create a system to track completion of the required training.

**Correction Deadline: 7/17/2025**

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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

**Records Reviewed: 46** **Records with Missing/Incomplete Components: 2**

Staff # 28 Not Met

Date of Hire: 06/05/2024

"Missing/Incomplete Components"

.33(3)-Health & Safety Certificate

Staff # 45 Not Met

Date of Hire: 05/31/2018

"Missing/Incomplete Components"

.09-Criminal Records Check Missing

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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.