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: 9/30/2025 **VisitType:** Licensing Study **Arrival:** 12:15 PM **Departure:** 6:10 PM

CCLC-56794
Children's Courtyard #3253
1195 Old Peachtree Rd. Lawrenceville, GA 30043 Gwinnett County
(770) 676-6759

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		
09/30/2025	Licensing Study	Good Standing
04/08/2025	Complaint Closure	Good Standing
04/08/2025	Incident Investigation Closure	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
Main	1L-Infant	Infants and One Year Olds	4	9	C	18	C	NA	NA	Nap,Floor Play,Diapering
Main	1R-Four to Five year old	Three Year Olds and Four Year Olds	2	18	C	35	C	NA	NA	Nap
Main	2L-One Year Old	One Year Olds	3	8	C	15	C	NA	NA	Nap
Main	2R-Three Year Old	Three Year Olds and Four Year Olds	1	16	C	46	C	NA	NA	Nap
Main	3L-Older One Year Old	One Year Olds and Two Year Olds	2	10	C	20	C	NA	NA	Nap
Main	3R Private-Pre-K	GA PreK	2	17	C	31	C	NA	NA	Transitioning,Nap
Main	4L-Two Year Old	Two Year Olds and Three Year Olds	2	16	C	25	C	NA	NA	Nap
Main	5L-Pre-K	GA PreK	2	17	C	27	C	NA	NA	Transitioning,Nap
Main	Middle-Pre-K	GA PreK	2	20	C	29	C	NA	NA	Nap
		Total Capacity @35 sq. ft.: 246			Total Capacity @25 sq. ft.: 0					
Total # Children this Date: 131		Total Capacity @35 sq. ft.: 246			Total Capacity @25 sq. ft.: 0					

Building	Playground	Playground Occupancy	Playground Compliance
Main	A	34	C

Main	B	80	C
Main	C	199	C

Enrolled Children						
Under 1 years	**1 years**	**2 years**	**3 years**	**4 years**	**5 years (Prekonly)**	**5 years and older**
7	15	23	26	70	7	56

Comments

The consultant discussed the visit report with the Director, Natalia Espinosa Ballesteros, on September 30, 2025.

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.

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@decal.ga.gov **for more information. Free techincal assistance is available!**

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Summary Report

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The following information is associated with a Licensing Study:

Activities and Equipment

591-1-1-.03 Activities **Met**

Comment
Lesson Plans were observed to be posted and reflected the current weeks activities in each classroom.

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

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

Technical Assistance
591-1-1-.12(8) - Consultant discussed with director to ensure that vinyl furniture with holes or tears are removed or replaces in classrooms 4L, 5L, and 3R.

Correction Deadline: 9/30/2025

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

Comment
Center does not provide swimming activities.

Children's Records

Records Reviewed: 5 **Records with Missing/Incomplete Components: 2**

Child # 4 Not Met
"Missing/Incomplete Components"
.08(1)-Doctor, Clinic, Phone Numbers

Child # 5 Not Met
"Missing/Incomplete Components"
.08(1)-Doctor, Clinic, Phone Numbers

591-1-1-.08 Children's Records **Not Met**

Comment
Parent authorizations obtained/completed.

Finding
591-1-1-.08(1) requires the Center Staff to maintain a file for each child while such child is in care and for one year after that child is no longer enrolled. In order for the file to be complete, the file shall contain the following: child’s name, birth date, sex, address, living arrangement, name of school if applicable; names of both Parents, home and work addresses, and home and work telephone numbers; name(s) and addresses of the person(s) to whom the child may be released including address, telephone numbers, relationship to child and to Parent(s), and other identifying information; name(s) and telephone number(s) of person(s) to contact in emergencies when the Parent cannot be reached; name and telephone number of the child’s primary source of health care; and a statement regarding known allergies, physical problems, mental health disorders, intellectual disabilities or developmental disabilities which limit the child’s participation in the program. It was determined based on review of records that two of five children's records did not have the name and telephone number of the child’s primary source of health care.

POI (Plan of Improvement)
Center staff will develop a plan that includes how to obtain all required information for currently enrolled children and how to ensure this is done for future enrollees as well. The plan will also include how and where to maintain files for the required amount of time. The plan will be implemented and followed.

Correction Deadline: 10/3/2025

Recited on 9/30/2025

Facility

591-1-1-.06 Bathrooms — **Met**

Comment
Bathrooms observed to be clean and well maintained.

591-1-1-.19 License Capacity(CR) — **Met**

Comment
Licensed capacity observed to be routinely met by center on this date.

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 fluids are stored out of reach of children in classroom 1R and that plungers and toilet brushes are stored out of reach of children in classroom 2R.

Correction Deadline: 9/30/2025

Technical Assistance
591-1-1-.25(3) - Consultant discussed with director to ensure that the weather stripping is repaired on the doorway to classroom 5L.

Correction Deadline: 9/30/2025

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 gap measuring approximately six inches at the bottom of the fence and protruding wires at the bottom at the bottom of the gate between the two patio areas. It was further determined that the bottom of the fence was not secured between playground B and the grassy area on the right of the building and between playground A and B, creating a potential entrapment hazard. There was also a gap measuring 4 inches between the end of the fence and the building on the patio area.

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: 10/3/2025

Recited on 9/30/2025

Finding
591-1-1-.26(8) requires climbing and swinging equipment to have a resilient surface beneath the equipment and the fall zone from such equipment must be adequately maintained by the Center to assure continuing resiliency. It was determined based on observation that the resilient surface under the swings measured 4 inches in places on playground C. A minimum of six inches is required. Further, the mats under the swing were not flush to the ground creating a potential tripping hazard on playground B. Also, a corner of the resilient surfacing was missing on playground A.

POI (Plan of Improvement)
The Center will add additional resilient surfacing to the fall zones where needed and check daily, adding resilient surfacing as needed to maintain adequate resiliency.

Correction Deadline: 10/10/2025

Food Service

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

Technical Assistance
591-1-1-.15(2) - Consultant discussed with director to ensure that infant feeding plans are updated regularly.

Correction Deadline: 9/30/2025

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

Comment
Kitchen appears clean and well organized on this date.

Health and Hygiene

591-1-1-.10 Diapering Areas & Practices(CR) — **Not Met**

Finding
591-1-1-.10(4) requires that if diapers are changed on a diaper changing surface, the surface shall be smooth, nonporous, and equipped with a guard or rails to prevent falls. Between each diaper change, the diaper changing surface shall be cleaned with a disinfectant and dried with a single-use disposable towel. It was determined based on observation that center staff did not disinfect the changing surface after completing the diaper procedure in classroom 1L.

POI (Plan of Improvement)
The Center will ensure there is a smooth, nonporous changing surface that has a guard or rails for safety in each classroom that houses children wearing diapers. Center Staff will be trained and have adequate supplies to properly clean the diaper changing surface between each diaper change.

Correction Deadline: 9/30/2025

Correction Deadline: 4/8/2025

Corrected on 9/30/2025
.10(5) - The previous citation was observed corrected on this date. The Consultant observed that staff were attentive to the children during the diapering process.

591-1-1-.17 Hygiene(CR) — **Not Met**

Finding
591-1-1-17(7) requires that children wash their hands with liquid soap and warm running water upon arrival for care, when moving from one child care group to another, upon re-entering the child care area after outside play, before and after eating meals and snacks, handling or touching food, playing in water; after toileting and diapering, playing in sand, touching animals or pets, and contact with bodily fluids and after contamination by any other means. It was determined based on observation that the children did not wah their hands after returning from the playground in classroom 4L.

POI (Plan of Improvement)
The Center will train Staff on required handwashing for children and Staff will ensure children's hands are washed when required. The Director will monitor for compliance.

Correction Deadline: 9/30/2025

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

Comment
The Provider currently does not dispense/administer medication.

Policies and Procedures

591-1-1-.21 Operational Policies & Procedures **Not Met**

Technical Assistance
591-1-1-.21(2)(r) - New - Discussed updating the Center's policies and procedures to include the program's practices regarding the expulsion and suspension of children enrolled for care within the description of behavior management and discipline actions used by the Center.

Also discussed to ensure a description of the practices followed by the Center to prevent shaken baby syndrome and abusive head trauma in children up to five years of age that includes the following information: how to recognize, respond to, and report the signs and symptoms of shaken baby syndrome and abusive head trauma; strategies to assist staff members in understanding how to care for infants and how to cope with a crying, fussing, or distraught child; strategies to ensure staff members understand the brain development of children up to five years of age; and a list of prohibited behaviors when dealing with children.

Additional information can be found in the CCLC Indicator Manual found on DECAL's website at: https://www.decal.ga.gov/CCS/RulesAndRegulations.aspx or through the Center on Shaken Baby Syndrome found at: https://dontshake.org/.

Correction Deadline: 10/5/2025

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 center staff did not conduct a lock-down drills within the last six months.

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: 10/3/2025

Recited on 9/30/2025

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

Comment
Observed all required posted notices.

Safety

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

Comment
Center does not keep animals on premises.

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

Correction Deadline: 4/8/2025

Corrected on 9/30/2025
.11(2) - The previous citation was observed corrected on this date. The Consultant observed age-appropriate redirection during the visit.

591-1-1-.13 Field Trips(CR) **Met**

Comment
Field trip documentation observed to be complete on this date.

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

Comment
The vehicle had an approved fire extinguisher and first aid kit on this date.

Finding
591-1-1-.36(4)(a) requires an annual safety check for each vehicle. The annual safety check, completed by a trained individual, should include a check of the: tires, headlights, horn, taillights, turn signals, brake lights, brakes, suspension, exhaust system, steering, windows, windshields and windshield wipers. A copy of the annual safety check will be kept in the Center or on the vehicle and should include evidence of any repairs and/or replacements that were identified as needed on the inspection report. It was determined based on review of records that the center did not have evidence of an annual safety check for vehicle tag #GIQ646 or vehicle tag #GIQ647.

POI (Plan of Improvement)
The Center will obtain the annual vehicle inspection.

Correction Deadline: 10/5/2025

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 a review of records that the center did not have an emergency medical information record for one of 26 transported children.

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.

Correction Deadline: 10/1/2025

Correction Deadline: 4/14/2025

Corrected on 9/30/2025
.36(7)(c)3. -The previous citation was observed corrected on this date. The Consultant observed that center staff recorded the date for each transportation route.

Sleeping & Resting Equipment

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)3 - Consultant discussed with director to ensure that each child has a sheet that covers the entire surface of their cot to provide a barrier between the child’s body and the sleeping equipment.

Correction Deadline: 9/30/2025

Staff Records

Records Reviewed: 30 — **Records with Missing/Incomplete Components: 1**

Staff # 14 — Not Met

Date of Hire: 04/27/2018

"Missing/Incomplete Components"

.31(2)(b)2.-Staff Qualifications-Education Missing

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

Comment
Criminal record checks were observed to be complete.

Comment
Director provided two files for employees hired since last visit April 8, 2025.

591-1-1-.14 First Aid & CPR(CR) **Technical Assistance**

Technical Assistance
591-1-1-.14(1)(a) - Discussed that effective July 1, 2025, new staff are required to obtain pediatric First Aid and pediatric CPR training within 45 days of employment. It was further discussed that programs must have at least one person with current pediatric First Aid and pediatric CPR training in each classroom at all times.

Correction Deadline: 10/30/2025

Technical Assistance
591-1-1-.14(3) -Consultant discussed with director to ensure that the first aid kit on vehicle tag #GIQ646 has a first aid manual, antiseptic, and scissors; and the first aid kit on vehicle tag #GIQ647 has tweezers and a manual.

Correction Deadline: 10/10/2025

591-1-1-.33 Staff Training **Technical Assistance**

Correction Deadline: 10/30/2025

Corrected on 9/30/2025
.33(5)(a) - The previous citation was observed corrected on this date. Per the director, staff are comopleting annual training through the Online Learning Library Initiative (OLLI).

Technical Assistance
591-1-1-.33(5)(b)1. - New - Discussed that effective July 1, 2025, all staff are required to obtain at least two hours in evidence based, developmentally appropriate language and literacy practices and at least two hours in on-going child development and health and safety related topics as part of their 10 hours of annual training.

Correction Deadline: 10/30/2025

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

Comment
Staff observed to be compliant with applicable laws and regulations.

Finding
591-1-1-.31(2)(b)3.(i) requires that newly hired teachers who do not possess the educational and qualifying child care experience requirements must enroll in a program of study to obtain one of the educational credentials and qualifying experience requirements as required by these rules within six months after employment at the Center and complete the credential or degree within 18 months after enrollment. It was determined based on review of records that staff #14, date of hire, April 27, 2018, did not have evidence of having obtained an educational credential on file. Staff #14 was to complete their credential by May 2025.

POI (Plan of Improvement)
The Center will ensure that all teachers will comply with the educational and qualifying child care experience requirements.

Correction Deadline: 9/30/2025

Staffing and Supervision

591-1-1-.32 Staff:Child Ratios and Group Size(CR) **Met**

Comment
Center observed to maintain appropriate staff:child ratios.

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

Comment
Adequate supervision observed on this date.