



**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

**Cover Sheet**

**Date:** 6/6/2022      **VisitType:** Monitoring Visit      **Arrival:** 9:30 AM      **Departure:** 11:00 AM

**CCLC-55055**

**Brilliant Minds Academy of Georgia**

2408 Bemiss Road Valdosta, GA 31602 Lowndes County  
 (229) 469-4074 brilliantminds1984@gmail.com

**Regional Consultant**

Beth Houtz

Phone: (229) 238-2130  
 Fax: (229) 238-2955  
 beth.houtz@decal.ga.gov

**Mailing Address**  
 Same

**Quality Rated:** No

<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.
06/06/2022	Monitoring Visit	Good Standing	
12/22/2021	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	Front Area near Room A	One Year Olds and Two Year Olds and Three Year Olds and Five Year Olds	1	11	NC	7	NC	NA	NA	
Main	Room A	Infants	1	6	C	6	C	NA	NA	Diapering, Feeding, Free Play, Music, Transitioning
Main	Room B		0	0	C	5	C	NA	NA	Feeding, Diapering
Main	Room C		0	0	C	6	C	NA	NA	
Main	Room D		0	0	C	4	C	NA	NA	
Main	Room E		0	0	C	6	C	NA	NA	
Total Capacity @35 sq. ft.: 34					Total Capacity @25 sq. ft.: 0					
Total # Children this Date: 17			Total Capacity @35 sq. ft.: 34			Total Capacity @25 sq. ft.: 0				

Building	Playground	Playground Occupancy	Playground Compliance
Main	Playground A	31	C

**Comments**

An in-person walkthrough of the facility was conducted on June 6, 2022. A letter requesting documents be uploaded by June 13, 2022, for the monitoring visit review was left with the director after the walkthrough. The center does provide transportation. Background checks for all staff were reviewed during the walk through visit. The annual review was completed on June 13, 2022 and a copy of the report was emailed to the provider on this day.

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



**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@dec.state.ga.us](mailto:qualityrated@dec.state.ga.us) for more information. Free technical assistance is available!**

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](http://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)

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Danielle Chappell, Program Official

Date

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Beth Houtz, Consultant

Date



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**Findings Report**

**Date:** 6/6/2022 **VisitType:** Monitoring Visit **Arrival:** 9:30 AM **Departure:** 11:00 AM

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The following information is associated with a Monitoring Visit:

**Activities and Equipment**

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

**Technical Assistance**

**Technical Assistance**

591-1-1-.03(2) requires the Center to keep current lesson plans on site that reflect appropriate instruction practices and activities to support children's development. The Center shall have sufficient and varied play and learning equipment and materials to support the above program of activities in all developmental areas.

The consultant observed a lesson plan dated April 25, 2022. The consultant discussed with the provider about ensuring lesson plans are up to date and current for each classroom.

**Correction Deadline: 6/6/2022**

**Technical Assistance**

591-1-1-.03(6) requires Center Staff to ensure children less than three years of age do not spend more than one-half hour of time consecutively in confining equipment, such as swings, highchairs, jump seats, carriers or walkers. Children shall use such equipment only when they are awake. Such children shall be allowed time to play on the floor daily. Infants shall have supervised tummy time on the floor daily when they are awake.

The consultant discussed with the director about ensuring infants are not confined more than one-half hour of time consecutively in confining equipment, such as swings, highchairs, jump seats, carriers, walkers, or cribs. The consultant discussed with the director about ensuring all infants have floor play time and tummy time,

**Correction Deadline: 6/6/2022**

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

**Technical Assistance**

**Technical Assistance**

591-1-1-.12(6) requires that a variety of age-appropriate toys and play materials be available, stored on low, open shelves accessible to children in each room or assigned area. During the walk through the consultant did not observe any toys in classroom A or B. When the consultant asked the director about the lack of toys she stated that they had been cleaned and sanitized over the weekend and had not been put back out yet. The director then went and brought the cleaned toys into the classrooms. The consultant discussed always having toys accessible to children in care.

**Correction Deadline: 7/6/2022**

**Comment**

Center does not provide swimming activities.

**Children's Records**

**Records Reviewed: 5**

**Records with Missing/Incomplete Components: 3**

Child # 1	Not Met
<u>"Missing/Incomplete Components"</u>	
.08(1)-Emergency Contact information Missing,.08(1)-Parent Names, Work Numbers,.08(1)-Allergies and Disabilities	
Child # 2	Met
Child # 3	Not Met
<u>"Missing/Incomplete Components"</u>	
.08(1)-Parent Names, Work Numbers,.08(1)-Allergies and Disabilities	
Child # 4	Met
Child # 5	Not Met
<u>"Missing/Incomplete Components"</u>	
.08(1)-Parent Names, Work Numbers	

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

**Technical Assistance**

**Technical Assistance**

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, mental retardation or developmental disabilities which limit the child's participation in the program.

The consultant reviewed three enrollment forms that were missing parent's work addresses and numbers, allergy and disability statements, and emergency contact information. The consultant discussed with the director the importance of having each enrollment form completed and no blanks spots left.

**Correction Deadline: 6/6/2022**

**Facility**

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

**Not Met**

**Finding**

591-1-1-.19(1) requires a Center to provide 35 square feet of usable space per child, which will determine the Center's License capacity. It was determined based on observation that classroom A, that is licensed for six children had eleven children present in the classroom and classroom B that is licensed for five children had six children present in the classroom.

**POI (Plan of Improvement)**

The Center will limit the number of children in this space to the licensed capacity.

**Correction Deadline: 6/6/2022**

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**591-1-1-.25 Physical Plant - Safe Environment(CR) Not Met**

**Finding**

591-1-1-.25(13) requires that potentially hazardous equipment, materials and supplies be stored in a locked area inaccessible to children. It was determined based on observation that in classroom A there was a container of Wipe Out cleansing wipes and two spray bottles of 3M Disinfectant labeled "Keep out of reach of children." on top of the handwashing sink and accessible to children in care.

**POI (Plan of Improvement)**

The Center will identify all hazardous items and keep them in a locked area inaccessible to children. The Center will inform all Staff about hazardous items and the safe storage of those items.

**Correction Deadline: 6/6/2022**

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**591-1-1-.25 Physical Plant-Structural/Mechanical Not Met**

**Finding**

591-1-1-.25(19) prohibits the use of unapproved areas for children's activity. It was determined based on observation that there were eleven (11) children being housed in a special use classroom as their permanent classroom. Additionally, eight of the children were of diapering age and the special use classroom is a non-diapered room.

**POI (Plan of Improvement)**

The Center will discontinue use of this area.

**Correction Deadline: 6/6/2022**

**Technical Assistance**

591-1-1-.25(19) prohibits the use of unapproved areas for children's activity. The consultant observed diapered children to be housed in classroom B that is licensed as a non-dipaered classroom. The consultant discussed with the director about submitting an amendment to have the classroom changed to a diapered classroom.

**Correction Deadline: 6/6/2022**

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

**Comment**

Playground observed to be clean and in good repair.

<b>Food Service</b>
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**591-1-1-.15 Food Service & Nutrition Not Met**

**Comment**

CACFP Meal Pattern Requirements effective October 1, 2017 will be implemented October 1, 2018: 3 Components for breakfast: Grains, Vegetables, Fruits or both, Milk  
5 Components for lunch – Grains, Meat/Meat alternates, Fruits, Vegetable, and Milk OR Grains, Meat/Meat alternates, 2 different types of vegetables, and Milk  
2 of 5 Components for snack

Provided Updated CACFP Infant Meal pattern and Child/Adult Meal pattern flyers.

The Crediting Handbook for the CACFP can be located on DECAL and USDA's website:

DECAL

<http://dec.al.ga.gov/CACFP/Handbook.aspx>

USDA

<http://www.fns.usda.gov/cacfp/cacfp-handbooks>

**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 three bottles were kept at room temperature while sitting in children's cubbies and then given to infants for feeding. The bottles were not refrigerated until ready to use to prevent spoilage. Additionally, one of six bottles in the refrigerator were not labeled with the child's first and last name 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. The consultant discussed with the infant room staff that to prevent spoilage, bottles of formula or breast milk should not be allowed to stand at room temperature. Prepared bottles should be refrigerated until ready to use.

**Correction Deadline: 6/6/2022**

**Health and Hygiene**

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

**Not Met**

**Finding**

591-1-1-.10(1) requires Centers first licensed after March 1, 1991, and Centers that are renovated after March 1, 1991, to provide ventilation in the diapering areas with functioning exhaust fans and a duct system or by the required amount of window space provided by operable windows when open. It was determined based on observation that the infant room teacher did not open the classroom windows for diapering ventilation while they changed the diapers of three infants. No other ventilation was in the classroom.

**POI (Plan of Improvement)**

The responsible person(s) at the center will ensure that the exhaust fans and duct systems are functioning or that the required amount of operable window space is provided in each diapering area. The windows are able to be opened and have screens. The director stated that they would open the windows during diapering.

**Correction Deadline: 6/6/2022**

**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 the changing pad in classroom B (infant room) was not properly disinfected with a cleaning solution and then a disinfectant between each diaper change. Additionally, the changing pad in classroom B (infant room) had small tears on the surface and could not be properly sanitized and was no longer waterproof.

**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: 6/6/2022**

**Finding**

591-1-1-.10(9) requires Center Staff to not use the area used for diapering for food preparation and to keep the diapering area clear of formulas, food, food utensils and food preparation items. It was determined based on observation that there was an infant's bottle sitting on the diapering hand washing sink and next to the changing table.

**POI (Plan of Improvement)**

Center staff will be trained, specified areas will be available for food preparation and placement of food-related items, and the director will monitor.

**Correction Deadline: 6/6/2022**

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**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 two children did not wash their hands upon arrival and three infants in the infant room did not have their hands washed or cleaned with an individual washcloth after diapering. Additionally, the portable handwashing sink in the infant classroom was not plugged in and therefore could not be used for handwashing.

**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: 6/6/2022**

**Finding**

591-1-1-.17(8) requires staff to wash their hands with liquid soap and warm running water upon arrival for the day, when moving from one child care group to another, upon re-entering the child care area after outside play, before and after diapering each child, dispensing medication, applying topical medications, handling and preparing food, eating, drinking, preparing bottles, feeding each child, assisting children with eating and drinking, after toileting or assisting children with toileting, using tobacco products, handling garbage and organic waste, touching animals or pets, handling bodily fluids and after contamination by any means. It was determined based on observation that a staff member in the infant classroom did not wash their hands in between diapering children and did not wash their hands after diapering an infant and giving other infants a bottle. Additionally, a staff member in classroom A only used hand sanitizer upon arrival and did not use warm running water and liquid soap to wash their hands as required. The portable handwashing sinks were not plugged in and could not be used in classroom A or B.

**POI (Plan of Improvement)**

The Center will ensure liquid soap and warm running water are available for handwashing, train Staff on the handwashing requirements, review the requirements with Staff periodically, and monitor handwashing. The consultant discussed with the director that gloves and hand sanitizer may not take the place of hand washing with warm running water and liquid soap. The consultant also discussed with the director about the portable handwashing sinks being plugged in and available at all times when children and staff are present.

**Correction Deadline: 6/6/2022**

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

**Met**

**Comment**

The Provider currently does not dispense/administer medication.

**Safety**

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

**Met**

**Comment**

Age-appropriate discussion and/or redirection observed.

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

**Met**

**Comment**

Center does not provide routine transportation.

**Sleeping & Resting Equipment**



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

**Not Met**

**Finding**

591-1-1-.30(1)(a)2 requires that a crib mattress is firm, tight-fitting without gaps, at least 2 inches thick and covered with a waterproof, washable material. Before a change of occupant, each mattress shall be cleaned with a disinfectant. It was determined that three of six crib mattresses were not at least two inches thick as required. The crib mattresses were only an inch thick.

**POI (Plan of Improvement)**

The center will ensure that a crib mattress is firm, tight-fitting without gaps, at least

**Correction Deadline: 6/6/2022**

**Finding**

591-1-1-.30(1)(a)3 requires that each crib shall have only an individual, tight-fitting sheet which is changed daily or more often as needed and prior to a change of occupant. It was determined based on observation that five of six cribs did not have tight fitting sheets as required.

**POI (Plan of Improvement)**

The center will ensure that each crib has an individual, tight-fitting sheet which is changed daily or more often as needed and prior to a change of occupant. The center has purchased sheet straps to use on the crib sheets to make them tighter. The consultant observed the sheet straps stored on a shelf in the classroom and not in use.

**Correction Deadline: 6/6/2022**

**Staff Records**

**Records Reviewed: 5**

**Records with Missing/Incomplete Components: 0**

Staff # 1 Met

Date of Hire: 12/21/2021

Staff # 2 Met

Date of Hire: 10/18/2021

Staff # 3 Met

Date of Hire: 12/28/2021

Staff # 4 Met

Date of Hire: 03/28/2022

Reminder - Health & Safety training is required within 90 calendar days of hired

Staff # 5 Met

Date of Hire: 12/21/2021

**Staff Credentials Reviewed: 2**

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

**Met**

**Comment**

Criminal record checks were observed to be complete.

**Comment**

Director provided one file(s) for employees hired since last visit.

**591-1-1-.14 First Aid & CPR**

**Met**

**Comment**

Evidence observed of 50% of center staff certified in First Aid and CPR.

**Technical Assistance**

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.

The consultant observed three health and safety orientation training certificates that were dated after the first 90 days of employment. The consultant discussed with the director that each Staff member with direct care responsibilities should complete health and safety orientation training within the first 90 days of employment.

**Correction Deadline: 7/6/2022**

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**591-1-1-.31 Staff(CR)****Met****Comment**

Staff observed to be compliant with applicable laws and regulations.

<b>Staffing and Supervision</b>
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**591-1-1-.32 Staff:Child Ratios and Group Size(CR)****Not Met****Finding**

591-1-1-.32(3) requires a Center with a licensed capacity of 18 or fewer children to maintain Staff-child ratios in mixed-age groups of children under three years old based on the age of the youngest child under three years of age. Where all of the children in any one group are three years of age or older, the age of the majority of the children in the group shall determine the Staff: child ratios . It was determined based on observation that in classroom A there were; 6 one-year-old children, 2 two-year-old children, 2 three-year-old children, and 1 five-year-old child with 1 staff member for a ratio of 1:11. Based on the youngest child's age in the mixed age group the ratio for this group of children should have been based on the one-year-old ratio of 1:8, therefore two staff members were needed for the eleven children in the classroom for a ratio of 2:11.

**POI (Plan of Improvement)**

The Center will determine and maintain Staff: child ratios as required. A second teacher arrived during the visit to assist in the classroom. The consultant discussed ratios with the director.

**Correction Deadline: 6/6/2022**

**Finding**

591-1-1-.32(7) requires that children be supervised at all times appropriate to the individual age, needs and capabilities of each child. Such supervision must include, but not be limited to, indoor and outdoor activities, mealtimes, naptime, transportation, field trips, and transitions between activities. "Supervision" means that the appropriate number of Staff members are physically present in the area where children are being cared for and are providing watchful oversight to the children, volunteers and Students-in-Training. The persons supervising in the child care area must be alert, positioned to maximize their ability to hear and see the children at all times, and able to respond promptly to the needs and actions of the children being supervised, as well as the actions of the volunteers and Students-in-Training, and provide timely attention to the children's actions and needs. Staff shall be attentive and participating with all children during mealtimes and shall be seated within an arm's length away from children thirty-six (36) months of age and younger. It was determined based on observation that the only staff member in classroom A had to step out of the classroom on multiple occasions to greet parents at the door and take children to their classroom and therefore was not providing watchful oversight to the classroom. Additionally, the infant room staff member was not attentive and participating with three infants during feeding time, instead the teacher was observed to change the diaper of another infant while the others drank their bottles.

**POI (Plan of Improvement)**

The Center will train Staff and monitor to ensure they are providing supervision and watchful oversight to the children at all times.

**Correction Deadline: 6/6/2022**