



**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:** 1/24/2022 **VisitType:** Licensing Study

**Arrival:** 10:00 AM

**Departure:** 11:45 AM

**CCLC-51404**

**Bright Beginnings of Jefferson Too!**

1812 Washington Street Jefferson, GA 30549 Jackson County  
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**Regional Consultant**

Mandi Sloan

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**Mailing Address**

1988 Washington St  
Jefferson, GA 30549

**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.
01/24/2022	Licensing Study	Good Standing	
10/26/2021	Monitoring Visit	Good Standing	
01/13/2021	Licensing Study	Good Standing	

**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- 6wks- 6mths	Infants and One Year Olds	1	4	C	7	C	NA	NA	Feeding, Floor Play
Main	B- 6mths-12mths	Infants	1	6	C	9	C	NA	NA	Nap, Floor Play, Feeding
Main	C- 3 -4 years	Three Year Olds and Four Year Olds	1	14	C	19	C	NA	NA	Circle Time, Story
Main	D- 18mths - 24 mths	One Year Olds	1	5	C	10	C	NA	NA	Free Play
Main	E- 12mths - 18mths		0	0	C	10	C	NA	NA	Floor Play
Main	F- 2 yrs	Two Year Olds	1	10	C	10	C	NA	NA	Art
Total Capacity @35 sq. ft.:						65	Total Capacity @25 sq. ft.:		0	
Total # Children this Date: 39			Total Capacity @35 sq. ft.:			65	Total Capacity @25 sq. ft.:		0	

Building	Playground	Playground Occupancy	Playground Compliance
Main	Playground A - 3-4yrs	35	C
Main	Playground B - 6wks- 2 yrs	15	C

**Comments**

The purpose of today's visit was to conduct a Licensing Study.

Plan of Improvement: Developed This Date 01/24/2022

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 New Deadlines:

Due to the ongoing COVID restrictions, the deadline to become Quality Rated for programs who want to continue to receive Childcare and Parent Services (CAPS), has been extended to at least December 31, 2021.

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)

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), 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.

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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Chastity Stanton , Program Official

Date

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Mandi Sloan, Consultant

Date



Bright from the Start Georgia Department of Early Care and Learning  
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### Findings Report

**Date:** 1/24/2022    **VisitType:** Licensing Study    **Arrival:** 10:00 AM    **Departure:** 11:45 AM

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The following information is associated with a Licensing Study:

### Activities and Equipment

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

**Met**

**Comment**

Discussed rotating toys to support the procedures of daily disinfecting.

**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 # 1

Not Met

"Missing/Incomplete Components"

.08(1)-Doctor, Clinic, Phone Numbers

Child # 2

Met

Child # 3

Met

Child # 4

Met

Child # 5

Not Met

"Missing/Incomplete Components"

.08(1)-Emergency Contact information Missing

**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, mental retardation or developmental disabilities which limit the child's participation in the program. It was determined based on a review of records that one children's file did not contain the addresses of the person (s) to who the child may be released. In addition, one children's file did not contain the 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: 1/24/2022**

<b>Facility</b>
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**591-1-1-.19 License Capacity(CR)****Met****Comment**

Licensed capacity observed to be routinely met by center.

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**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 the following areas were not in good repair:

- Classroom A: One area of peeling paint was observed exposing the dry wall near the book shelf on the circle time rug
- Classroom D: Areas of exposed dry wall were present surrounding the half door separating classrooms A and D. Further an area of peeling paint was observed exposing the dry wall near the book shelf on the circle time rug
- Classroom F: Areas of peeling paint were observed exposing the dry wall over the table in the art center and under the cubbies where the children's personal belongings are kept

**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: 1/24/2022****Technical Assistance**

591-1-1-.25(8) - The consultant discussed with the provider to ensure that protective caps are replaced on electrical outlets that are within the children's reach when the outlets are no longer in use.

**Correction Deadline: 1/24/2022**

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**591-1-1-.26 Playgrounds(CR)****Not Met****Technical Assistance**

591-1-1-.26(4) - The consultant discussed maintenance of fencing material with the provider to ensure that the tops of fence posts do not develop sharp edges or wires which could present a hazard to the children in care.

**Correction Deadline: 1/24/2022**

**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 resilient surface (mulch) was not adequately maintained on Playground A under the green play structure with the yellow slide as one inch was present where three inches are required.

**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: 2/3/2022**

**Finding**

591-1-1-.26(9) requires the playground to be kept clean, free from litter and free of hazards, such as but not limited to rocks, exposed tree roots and exposed sharp edges of concrete. It was determined based on observation that Playground A was not kept clean and free from hazards as it contained an area (near the sand box) where landscaping cloth was exposed through the mulch posing a potential trip hazard to the children in care. Further, approximately one inch of standing water was located on the cover of the program's sand box posing a potential hazard to the children in care.

**POI (Plan of Improvement)**

The Center will remove any litter and fix or remove hazards from the playground and will routinely monitor the playground and remove litter and hazards.

**Correction Deadline: 1/24/2022**

<b>Food Service</b>
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**591-1-1-.15 Food Service & Nutrition**

**Not Met**

**Finding**

591-1-1-.15(2) requires that a signed written feeding plan for children less than one (1) year of age shall be obtained from Parent(s) and that instructions from the Parent(s) shall be updated regularly as new foods are added or other dietary changes are made. The feeding plan shall be posted in the child's assigned room and must include the child's feeding schedule, the amount of formula or breast milk to be given, instructions for the introduction of solid foods, the amount of food to be given and notation of any type(s) of commercially premixed formula which may not be used in an emergency because of food allergies. It was determined based on a review of records that six of six infant feeding plans did not contain instructions for the introduction of solid foods. In addition, the consultant discussed with the provider to ensure that the most current infant feeding plan document is obtained.

**POI (Plan of Improvement)**

The Center Director will develop and implement a plan to obtain and post the completed feeding plan as part of the enrollment process and to have parents update the plans on a regular basis that will include center staff involved with enrollment and those working in the infant classrooms.

**Correction Deadline: 1/24/2022**

**Technical Assistance**

591-1-1-.15(3) - The consultant discussed with the provider to ensure that the blue refrigerators in classroom A and classroom B are monitored to ensure that baby bottles and formula are refrigerated at a temperature of forty (40) degrees Fahrenheit or less.

**Correction Deadline: 1/24/2022**

**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 baby bottles located in the refrigerator in classroom B were not labeled with the individual child's name.

**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: 1/24/2022**

**591-1-1-.18 Kitchen Operations****Technical Assistance****Technical Assistance**

591-1-1-.18(5) - The consultant discussed with the provider to ensure that the freezer and refrigerator in the kitchen are monitored to ensure that all perishable and potentially hazardous foods are kept 40 degrees Fahrenheit or below. In addition, that the freezer temperature shall be maintained at zero (0) degrees Fahrenheit or below.

**Correction Deadline: 1/24/2022**

**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**

Proper hand washing observed throughout the center.

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

The Provider currently does not dispense/administer medication.

**Policies and Procedures****591-1-1-.21 Operational Policies & Procedures****Not Met****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 the center had not conducted an emergency drill for emergency situations (lockdown) in the year 2021. In addition, the center had not conducted a tornado drill every six months as one tornado drill was conducted in the year 2021 during the month of September.

**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: 1/29/2022**

**Safety**

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**591-1-1-.05 Animals** **Met**

**Comment**

Center does not keep animals on premises.

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

**Comment**

Staff were observed to maintain a positive learning environment on this date.

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

**Comment**

Center does not participate in field trips at this time.

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

**Comment**

Center does not provide routine transportation.

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**Sleeping & Resting Equipment**

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

**Comment**

Pleasant naptime environment observed.

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**Staff Records**

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**Records Reviewed: 9**

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

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Staff # 1	Met
Date of Hire: 08/18/2021	
Staff # 2	Met
Date of Hire: 01/05/2021	
Staff # 3	Not Met
Date of Hire: 05/03/2021	
<u>"Missing/Incomplete Components"</u>	
.14(2)-CPR missing	
Staff # 4	Met
Staff # 5	Met
Staff # 6	Met
Date of Hire: 08/26/2019	
Staff # 7	Not Met
Date of Hire: 11/22/2021	
<u>Reminder - Health &amp; Safety training is required within 90 calendar days of hired</u>	
<u>"Missing/Incomplete Components"</u>	
.09-Criminal Records Check Dissatisfied	
Staff # 8	Met



Date of Hire: 08/26/2019

Staff # 9

Met

Date of Hire: 08/06/2020

**Staff Credentials Reviewed: 3****591-1-1-.09 Criminal Records and Comprehensive Background Checks(CR)****Not Met****Finding**

591-1-1-.09(1)(j) requires that for portability for Directors, Employees and Provisional Employees, excluding Students-in-Training, only the most recently issued determination letter is eligible for portability and must be ported electronically. A Center may accept a satisfactory Fingerprint Records Check Determination letter or a satisfactory Comprehensive Records Check Determination letter issued by the Department if the Records Check Clearance Date is within the preceding 12 months from the hire date, the individual has not had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer, and the Center does not know or reasonably should not know that the individual's satisfactory status has changed. It was determined based on a review of records that staff person #6 with a documented date of hire of November 22, 2021 was not electronically ported to the program prior to beginning to work as staff person #6 was noted to have been electronically ported on December 2, 2021. The staff person was observed to be present at the center upon the program's licensing study in classroom D (12 to 18 months) with five one-year-old children.

**POI (Plan of Improvement)**

IMMEDIATE CORRECTION - The Center will ensure that only the most recently issued determination letter is electronically ported for Directors, Employees and Provisional Employees, excluding Students-in-Training. A Center may accept a satisfactory Fingerprint Records Check Determination letter or a satisfactory Comprehensive Records Check Determination letter issued by the Department if the Records Check Clearance Date is within the preceding 12 months from the hire date, the individual has not had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer, and the Center does not know or reasonably should not know that the individual's satisfactory status has changed. 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: 1/24/2022****591-1-1-.14 First Aid & CPR****Not Met****Finding**

591-1-1-.14(2) requires a Staff member who is trained in CPR and first aid to be on the premises and on any field trip whenever any child is present. In addition, Staff who provide direct care to children must satisfactorily obtain certification in first aid and CPR by December 29, 2016 if employed prior to September 30, 2016 and within 90 days of their hire date if employed after September 30, 2016. It was determined based on a review of records that staff person #3, with a documented date of hire of May 3, 2021 did not have valid evidence of CPR training as the training was observed to be obtained on October 9, 2020 through an online, not an in person source, and did not contain the required hands on skills check.

**POI (Plan of Improvement)**

The Center will develop a schedule to ensure there is always a staff person with current first aid and CPR training present and will develop and implement a plan to ensure all staff members have satisfactorily completed first aid and CPR training by the specified date.

**Correction Deadline: 2/23/2022****591-1-1-.31 Staff(CR)****Technical Assistance****Technical Assistance**

591-1-1-.31 - The consultant discussed with the provider to ensure that all lead staff who are enrolled in an approved education program complete the degree within 18 months.

**Comment**

Staff observed to be compliant with applicable laws and regulations.

## Staffing and Supervision

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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.