



**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:** 12/4/2019    **VisitType:** Licensing Study    **Arrival:** 9:00 AM    **Departure:** 12:40 PM

**CCLC-50415**

**The Ark Learning Center**

1860 Duluth Highway, #100 and #101 Lawrenceville, GA 30043  
 Gwinnett County  
 (770) 299-1283 thearklearningcenter1@gmail.com

**Mailing Address**  
 Same

**Regional Consultant**

Bridget Johnson  
 Phone: (770) 357-4913  
 Fax: (770) 357-4912  
 bridget.johnson@decal.ga.gov

**Quality Rated:** No

<b>Compliance Zone Designation</b>		
12/04/2019	Licensing Study	Good Standing
09/19/2019	Complaint Closure	Good Standing
09/12/2019	Complaint 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
Main Building	A-1st Right	Infants	1	2	C	13	C	NA	NA	Nap,TV
Main Building	B-2nd Right		0	0	C	11	C	NA	NA	
Main Building	C-3rd Right	Two Year Olds and Three Year Olds and Four Year Olds	2	14	NC	12	NC	NA	NA	TV,Free Play
Main Building	D-1st Left		0	0	C	7	C	NA	NA	
Main Building	E-Far Left		0	0	C	7	C	NA	NA	
Main Building	G-2nd Suite #101		0	0	C	21	C	NA	NA	
Total Capacity @35 sq. ft.: 71						Total Capacity @25 sq. ft.: 0				
Total # Children this Date: 16			Total Capacity @35 sq. ft.: 71			Total Capacity @25 sq. ft.: 0				

Building	Playground	Playground Occupancy	Playground Compliance

**Comments**

12/04/2019: The purpose of this visit was to conduct a licensing study and follow-up on any previous citations.

Plan of Improvement: Developed This Date 12/04/2019

Any rule violation which subjects a child to injury or life-threatening situation or any rule violations previously cited but not corrected, may result in the imposition of an adverse enforcement action. Serious or continued noncompliance may also jeopardize participation in one or more DECAL program(s).



Please refer to the website, <http://www.dec.ga.gov/CCS/RulesAndRegulations.aspx>, for information regarding October 1, 2018 rule changes about Criminal Records Checks that may affect your facility. In summary,

- New records checks will be required to be completed if a staff member experiences a six month break in service from the child care industry
- New clearance is required at least once every five years
- Any staff member solely responsible for supervising children will be required to have completed a comprehensive background clearance
- All staff members are required to have completed at least a national fingerprint based clearance check
- Any staff member with only the national fingerprint based clearance, must be under constant and direct supervision of a staff member with a satisfactory comprehensive records check clearance
- Facilities are required to use DECAL KOALA for Criminal Records Checks, including to verify portability of an employee

O.C.G.A. Section 42.1.12(i)(2) requires Bright from the Start: Georgia Department of Early Care and Learning to notify licensed child care programs on accessing and retrieving from the Georgia Bureau of Investigation's (GBI) website a list of the names and addresses of all registered sexual offenders. Please see GBI's website located at <http://gbi.georgia.gov> to access the Georgia Sex Offender Registry.

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#### Refutation Process:

You have the right to refute any of the citations noted in this report with which you disagree. To refute a citation(s), e-mail the following information to [CCSRefutations@dec.ga.gov](mailto:CCSRefutations@dec.ga.gov).

- 1) Facility name, license number and visit date
- 2) Your name, title/relationship to the facility, e-mail address & up to two phone number(s) where you can be reached
- 3) Specific rule number(s) that you are refuting, along with your concerns or questions regarding the rule citation

Refutations must be submitted to Child Care Services (CCS) within 10 business days of the completion date.

A sample form for submitting a refutation can be found at: <http://dec.ga.gov/ChildCareServices/RefutationInformation.aspx>

Your refutation will be forwarded to the appropriate CCS manager, who will follow up with you about your concerns. If you have any questions about this process, contact our office at 404-657-5562.

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Bright from the Start recommends that all licensed child care providers carry liability insurance coverage sufficient to protect its clients. If you do not have this liability insurance, you are required to post a notice with ½ inch letters in a conspicuous location in the program, notify the parent or guardian of each child in care in writing, obtain their signature to acknowledge receipt and maintain this written acknowledgment on file at the program at all times while the child attends the program and for 12 months after the child's last date of attendance. (O.C.G.A. Section 20-1A-4)



#### Important New Deadlines:

Your program must be Quality Rated by December 31, 2020 in order to continue to receive Childcare and Parent Services (CAPS).

Get started today! Sign up by completing a short online application: <https://qualityrated.dec.ga.gov/>  
Request free technical assistance to help you earn your star rating by contacting the Quality Rated help desk at 855-800-7747 or [qualityrated@dec.ga.gov](mailto:qualityrated@dec.ga.gov)

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Cathy Lampton, Program Official

Date

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Bridget Johnson, Consultant

Date



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### Findings Report

**Date:** 12/4/2019 **VisitType:** Licensing Study **Arrival:** 9:00 AM **Departure:** 12:40 PM

#### CCLC-50415

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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

A variety of equipment and toys were observed throughout the center.

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

N/A

#### Comment

Center does not provide swimming activities.

### Children's Records

**Records Reviewed: 5**

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

Child # 1	Met
Child # 2	Met
Child # 3	Met
Child # 4	Met
Child # 5	Met

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

Met

#### Comment

Parent agreements observed obtained/completed.

#### Comment

Parent authorizations obtained/completed.

**Comment**

Records were observed to be complete and well organized.

<b>Facility</b>
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**591-1-1-.06 Bathrooms****Met****Comment**

Bathrooms observed to be clean and well maintained.

**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 two staff members cared for 14 children in Room C - 3rd Right and the room is only licensed for 12 children.

**POI (Plan of Improvement)**

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

**Correction Deadline: 12/4/2019**

**591-1-1-.25 Physical Plant - Safe Environment(CR)****Met****Comment**

Center appears clean and well maintained.

**Comment**

No hazards observed accessible to children on this date.

**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****Met****Comment**

Center menu meets USDA guidelines.

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

Kitchen appears clean and well organized.

<b>Health and Hygiene</b>
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**591-1-1-.07 Children's Health****Not Met****Finding**

591-1-1-.07(5) requires Center Staff to not permit children to wear around their necks or attach to their clothing pacifiers or other hazardous items. It was determined based on observation that a child in the infant classroom had a pacifier clip attached to their shirt.

**POI (Plan of Improvement)**

The pacifier clip was immediately removed. The Center will instruct Staff regarding this safety requirement.

**Correction Deadline: 12/4/2019**

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

**Comment**

Staff state proper knowledge of diapering procedures.

**Correction Deadline: 5/23/2019**

**Corrected on 12/4/2019**

**.10(1) - On this date consultant observed that both exhaust fans were working as ventilation fans and not return fans.**

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

**Comment**

Proper hand washing observed throughout the center.

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

**Comment**

The Provider currently does not dispense/administer medication.

<b>Policies and Procedures</b>
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**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 facility could not locate their emergency drills log in order to ensure the drills were being conducted in the required time frames.

**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: 12/9/2019**

<b>Safety</b>
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**591-1-1-.05 Animals** **N/A**

**Comment**

Center does not keep animals on premises.

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

**Comment**

Age-appropriate discussion and/or redirection observed.

**Comment**

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

**Correction Deadline: 9/12/2019**

**Corrected on 12/4/2019**

**.11(1) - On this date consultant observed correction of previous citation in that discussion and redirection was used at the facility.**

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**591-1-1-.13 Field Trips(CR)** **N/A**

**Comment**

Center does not participate in field trips at this time.

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**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(3)(a-b) requires any Center that provides any type of transportation to obtain two (2) hours of state-approved or state-accepted transportation training, biannually, for the Director and for each person responsible for or who participates in the transportation of children. The training shall include, but is not limited to, a review of the transportation rules, a review of approved transportation forms and procedures, and instruction on the usage and completion of the forms and procedures. This training may be counted as part of the annual training requirements for Staff. It was determined based on a review of records that the driver had not completed the required transportation training.

**POI (Plan of Improvement)**

The Center will ensure that the Director, Center Staff, and any person responsible for the transportation of children has completed the required transportation training.

**Correction Deadline: 12/14/2019**

**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 a review of records that the facility did not have a copy of the vehicle safety inspection form for Consultant to review to determine that a current inspection had been completed within the last 12 months.

**POI (Plan of Improvement)**

The Center will obtain the annual vehicle inspection.

**Correction Deadline: 12/9/2019**

**Technical Assistance**

591-1-1-.36(7)(a) - Please ensure that the date for the current week of transportation is written on the transportation checklist for each week of transportation.

**Correction Deadline: 12/5/2019**

**Finding**

591-1-1-.36(7)(d)2. requires that the second designated Staff person conduct a check of the vehicle immediately upon the completion of the first check of the vehicle. The responsible person shall physically walk through the entire vehicle; visually inspect all seat surfaces, under all seats and in all compartments or recesses in the vehicle's interior; and sign the passenger transportation checklist(s), indicating all of the children have exited the vehicle. There shall be continuous watchful oversight of the vehicle between the first check and second check. It was determined based on a review of records that none of the transportation checklists reviewed had signatures documenting that a second check of the vehicle was conducted for the afternoon route from Mason Elementary School on any date in November and for December 2-3, 2019.

**POI (Plan of Improvement)**

The Center will train Staff who are or may be involved in transporting children in how to thoroughly inspect a vehicle and properly complete transportation documentation. The Center will review and monitor.

**Correction Deadline: 12/4/2019**

**Sleeping & Resting Equipment**

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

**Comment**

The correct number of mats, sheets and blankets were observed on this date. Cleaning and disinfecting of mats was discussed with the director on this date.

**Staff Records**

Staff # 1	Not Met
Date of Hire: 01/03/2019	
<u>"Missing/Incomplete Components"</u>	
.14(2)-CPR missing,.14(2)-First Aid Missing	
Staff # 2	Met
Date of Hire: 10/21/2019	
Staff # 3	Met
Date of Hire: 03/05/2019	
Staff # 4	Not Met
Date of Hire: 06/01/2019	
<u>"Missing/Incomplete Components"</u>	
.14(2)-CPR missing,.14(2)-First Aid Missing	
Staff # 5	Not Met
Date of Hire: 06/01/2019	
<u>"Missing/Incomplete Components"</u>	
.14(2)-CPR missing,.14(2)-First Aid Missing	
Staff # 6	Met
Date of Hire: 03/25/2019	
Staff # 7	Not Met
Date of Hire: 10/04/2019	
<u>"Missing/Incomplete Components"</u>	
.36(3)(a-b)-2 hrs. Transportation Training missing	

**Staff Credentials Reviewed: 1**

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

**Comment**

Criminal record checks were observed to be complete and satisfactory for nine of nine staff members on this date.

**591-1-1-.14 First Aid & CPR Not Met**

**Comment**

Please replace/add a triangular bandage to the first aid kit for the facility.

**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 review of records that three staff members employed at the facility beyond 90 days did not have current training in CPR and First Aid.

**POI (Plan of Improvement)**

The Director stated that the staff should have the training completed by the end of December 2019. 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: 1/1/2020**

**Recited on 12/4/2019**

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**591-1-1-.33 Staff Training** **Met**

**Correction Deadline: 10/12/2019**

**Corrected on 12/4/2019**

**.33(3) - On this date consultant observed correction of previous citation in that all staff employed beyond 90 days had completed the required health and safety orientation training.**

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

**Finding**

591-1-1-.31(2)(c) requires the Center to maintain a copy and/or written verification of the credential or degree awarded to the lead teacher that is required by these rules in the lead teacher's file, to make the document available for inspection and to provide the document to Department staff upon request. It was determined based on a review of records that there was no proof on file for any of the staff working as lead teachers to show that they had enrolled in a credential program within their first six months of employment as required.

**POI (Plan of Improvement)**

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

**Correction Deadline: 12/4/2019**

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

**Correction Deadline: 9/12/2019**

**Corrected on 12/4/2019**

**.32(1) - On this date consultant observed correction of previous citation in that appropriate ratios were maintained in all classrooms.**

**Finding**

591-1-1-.32(4) requires that children under three years old be housed in separate physical areas from older children and cannot be mixed with older children except at specified times and circumstances. It was determined based on observation that four two-year-old children were housed with three and four-year-old children upon consultant's arrival to the facility.

**POI (Plan of Improvement)**

The Center will maintain separation of these children under three years old.

**Correction Deadline: 12/4/2019**

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

**Comment**

Staff observed to provide direct supervision and be attentive to children's needs.

**Correction Deadline: 9/12/2019**

**Corrected on 12/4/2019**

**.32(7) - On this date consultant observed correction of previous in that appropriate supervision was observed at all times.**

