





**Reminder:** All employees of child care programs must be fingerprinted before **January 1, 2017**. For instructions and to submit records check applications online, please visit [www.decalkoala.com](http://www.decalkoala.com). You are encouraged not to wait and to complete the process as soon as possible.



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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@decga.gov](mailto:CCSRefutations@decga.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://decga.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.

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)

\_\_\_\_\_  
Vanessa Goodman, Program Official

\_\_\_\_\_  
Date

\_\_\_\_\_  
Ruby Norman, Consultant

\_\_\_\_\_  
Date



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

### Findings Report

**Date:** 10/26/2017 **VisitType:** Licensing Study

**Arrival:** 11:00 AM

**Departure:** 1:00 PM

**FR-14227**

**Goodman, Vanessa M**

2761 SPIRIT CREEK ROAD Hephzibah, GA 30815 Richmond County  
(706) 373-3680 vanessagoodman40@yahoo.com

**Mailing Address**

2761 SPIRIT CREEK ROAD  
HEPHZIBAH, GA 30815

**Regional Consultant**

Ruby Norman

Phone: (770) 405-7959

Fax: (404) 591-5187

laura.davis@dec.al.ga.gov

The following information is associated with a Licensing Study:

### Activities and Equipment

**290-2-3-.12 Equipment and Supplies(CR)**

**Met**

**Comment**

Observed-Variety Of Equipment

**290-2-3-.19 Infant-Sleeping Safety Requirements(CR)**

**Met**

**Comment**

Discussed infant safe sleep and sleep equipment

**290-2-3-.07 Swimming Pools & Water-related Activities(CR)**

**Met**

**Comment**

No Swimming Activities Provided

### Facility

**290-2-3-.11 Physical Plant - Safe Environment(CR)**

**Met**

**Comment**

Observation-No Hazards Accessible

**290-2-3-.13 Physical Plant-Structural/Mechanical(CR)**

**Met**

**Comment**

Home Clean, Free of Hazards

**290-2-3-.13 Playgrounds(CR)**

**Met**

**Correction Deadline: 5/28/2017**

**Corrected on 10/26/2017**

**.13(2)(a) - Correction of previous citation, the three boards on the fence were repaired.**

### Health and Hygiene

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**290-2-3-.11 Children's Health and Hygiene(CR)** **Met**

**Comment**

Staff Stated Proper Knowledge

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**290-2-3-.11 Diapering Areas & Practices(CR)** **Met**

**Comment**

Staff Stated Proper Knowledge

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**290-2-3-.11 Medications(CR)** **Met**

**Comment**

Provider stated that no medication is dispensed at this time.

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**Licensure**

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**290-2-3-.04 Application Requirements(CR)** **Met**

**Comment**

The provider cared for three for pay and five for no pay on this date.

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**Safety and Discipline**

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**290-2-3-.11 Discipline(CR)** **Met**

**Comment**

Observed-Discussion/Redirection

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**290-2-3-.11 Transportation(CR)** **Met**

**Comment**

No Routine Transportation Provided

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**Staff Records**

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**290-2-3-.21 Criminal Records Check(CR)** **Met**

**Comment**

Criminal Records Check complete

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**290-2-3-.07 First Aid & CPR** **Met**

**Comment**

Observed-Provider Certified First Aid & CPR

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**290-2-3-.07 Staff Qualifications(CR)** **Met**

**Comment**

Staff qualifications/compliance with law

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**Staff:Child Ratios and Supervision**

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**290-2-3-.07 Staff:Child Ratios(CR)** **Met**

**Comment**

Appropriate Ratios Observed

**Comment**

Observed-Adequate Supervision