



**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:** 2/7/2017 **VisitType:** Complaint Investigation & Monitoring Visit **Arrival:** 12:50 PM **Departure:** 2:50 PM

**FR-16314**

**Jones, Shirley D**

11694 REGISTRY BOULEVARD Hampton, GA 30228 Clayton County  
(770) 703-6408 shirleyjones1956@att.net

**Mailing Address**

11694 REGISTRY BOULEVARD  
HAMPTON, GA 30228

**Regional Consultant**

Ashley Cunningham

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Ashley.Cunningham@dec.al.ga.gov

<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.
02/07/2017	Complaint Closure	Good Standing	
02/07/2017	Complaint Investigation & Monitoring Visit	Good Standing	
08/04/2016	Monitoring Visit	Good Standing	

**Ratios/License Capacity**

Age Ranges	Children Present	Child For Pay	CAPS	Not for Pay	Provider Children
Infant (0-11 mos)	1	1	0	0	0
1 & 2 Years	1	2	0	0	0
3 & 4 Years	2	3	0	0	0
School Age(5+) Years	0	0	0	0	0
Total Under 13 Years	4	6	0	0	0
Total Under 18 Years	4				

Children Present: 4

Total Children: 6

Caregivers/Helpers Present: 1

Total Caregivers/Helpers: 3

**Comments**

Plan of Improvement: Developed This Date 02/07/2017

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).



**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.

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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@decal.ga.gov](mailto:CCSRefutations@decal.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://decal.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)

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Shirley Jones, Program Official

Date

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Ashley Cunningham, Consultant

Date



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### Summary Report

**Date:** 2/7/2017 **VisitType:** Complaint Investigation & Monitoring Visit **Arrival:** 12:50 PM **Departure:** 2:50 PM

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The following information is associated with a Monitoring Visit:

### Activities and Equipment

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

**Not Met**

**Comment**

Discussed-SIDS/Infant Sleeping Position

**Finding**

290-2-3-.19(1)(b) requires that cots and mats shall be provided for each child who is two (2) years of age or older and who is required to take a nap and for each child under the age of two years who can climb out of a crib or other equipment approved for infant sleep. It was determined based on the consultant observation that children were sleeping on the floor and not cots or mats when the consultant arrived in the home.

**POI (Plan of Improvement)**

The Home Provider will

**Correction Deadline: 2/7/2017**

**Finding**

290-2-3-.19(1)(b)1 requires that cots and mats shall be of sound construction and of sufficient size to accommodate comfortably the size and weight of the child. Mats must be in good repair, washable, covered with waterproof material and at least two inches (2") thick. It was determined based on the consultant observation that two children were sleeping on one inch mats.

**POI (Plan of Improvement)**

The Home Provider will ensure that children sleep on two inch mats or cots.

**Correction Deadline: 2/7/2017**

**Finding**

290-2-3-.19(1)(b)3 requires that sheets or similar coverings for cots or mats shall either be marked for individual use or laundered daily. If individually marked, they must be laundered weekly or more frequently if needed. It was determined based on the consultant observation that three children did not have sheets on their mats.

**POI (Plan of Improvement)**

The Home Provider will

**Correction Deadline: 2/7/2017**

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

**N/A**

**Comment**

No Swimming Activities Provided

<b>Children's Records</b>
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**290-2-3-.08 Children's Records**

**Met**

**Comment**

Observed-Records Complete/Well Organized

**Correction Deadline: 8/5/2016**

**Corrected on 2/7/2017**

.08(1)(c) - Previous citation corrected in that all immunizations forms were up to date

**Correction Deadline: 8/4/2016**

**Corrected on 2/7/2017**

.08(3) - Previous citation corrected.

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**290-2-3-.08 Parental Authorization(CR)**

**Met**

**Comment**

Parent Authorizations Obtained/Completed

<b>Facility</b>
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**290-2-3-.11 Physical Plant - Safe Environment(CR)**

**Met**

**Comment**

Observation-No Hazards Accessible

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

**Met**

**Comment**

Home Clean, Free of Hazards

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

**Technical Assistance**

**Comment**

Outside Area Clean, Well Maintained

**Correction Deadline: 8/14/2016**

**Corrected on 2/7/2017**

.13(2)(b) - Previous citation corrected.

**Technical Assistance**

290-2-3-.13(2)(c) - Please ensure that your AC unit is enclosed with at least a four foot barrier.

**Correction Deadline: 2/7/2017**

<b>Health and Hygiene</b>
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**290-2-3-.11 Diapering Areas & Practices(CR)**

**Met**

**Comment**

Staff Stated Proper Knowledge

**290-2-3-.11 Medications(CR)****Not Evaluated****Comment**

Per the provider, medication is not dispensed.

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

290-2-3-.04(1)(d) - Provider meets application requirements in that she is operating with a valid license and cares for no more than six children.

**Correction Deadline: 2/7/2017****Safety and Discipline****290-2-3-.11 Animals****Met****Comment**

Appropriate Vaccination Records

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

Observed-Positive Learning Environment

**290-2-3-.11 First Aid Kit****Met****Comment**

Observed Kit Complete

**290-2-3-.11 Transportation(CR)****N/A****Comment**

No transportation.

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

Criminal Records Check complete

**290-2-3-.07 Independent Contractors(CR)****Met****Comment**

No Independent contractors

**290-2-3-.07 Other Staff Direct Contact with Children(CR)****Met****Comment**

No additional staff

**290-2-3-.07 Staff Training****Met****Correction Deadline: 2/26/2016****Corrected on 2/7/2017****.07(4) - Previous citation corrected in that the provider obtain 10 hours for 2016.****Comment**

Health/Safety training reminder. Please have it taken by June 30, 2017.

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<b>290-2-3-.07 Students-in-Training(CR)</b>	<b>Met</b>
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**Comment**

No Students-in-training

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<b>290-2-3-.07 Volunteers(CR)</b>	<b>Met</b>
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**Comment**

No Volunteers

<b>Staff:Child Ratios and Supervision</b>
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<b>290-2-3-.07 Staff:Child Ratios(CR)</b>	<b>Met</b>
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**Comment**

Appropriate Ratios Observed

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<b>290-2-3-.07 Supervision(CR)</b>	<b>Met</b>
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**Comment**

Observed-Adequate Supervision

**Comment**

Appropriate Ratios Observed