



**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:** 8/8/2017

**VisitType:** Licensing Study

**Arrival:** 9:30 AM

**Departure:** 12:30 PM

**FR-000012767**

**Williams-Jones, Linda M**

2550 CUMBERLAND BLVD, S.E. #802 Smyrna, GA 30080 Cobb  
County  
(678) 360-5701 ZAMOI@HOTMAIL.COM

**Mailing Address**

2550 CUMBERLAND BLVD, S.E. #802  
SMYRNA, GA 30080

**Regional Consultant**

Courtney Moody

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**Compliance Zone Designation**

08/08/2017	Licensing Study	Good Standing
04/06/2017	Monitoring Visit	Good Standing
10/27/2016	Licensing Study	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 the rules.

**Deficient** - Program is not demonstrating an acceptable level of performance in meeting the rules.

**Ratios/License Capacity**

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

Children Present: 6

Total Children: 6

Caregivers/Helpers Present: 1

Total Caregivers/Helpers: 1

**Helper Needed**

**Comments**

Plan of Improvement: Developed This Date 08/08/2017

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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Linda Williams-Jones, Program Official

Date

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Courtney Moody, Consultant

Date



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### Findings Report

**Date:** 8/8/2017 **VisitType:** Licensing Study **Arrival:** 9:30 AM **Departure:** 12:30 PM

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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)**

**Not Met**

**Finding**

290-2-3-.19(1)(a) requires that the Home shall provide either a safety approved crib or other equipment that is approved for infant sleep for each infant (any child under the age of twelve (12) months or any child who is under eighteen (18) months of age who is not walking), who cannot climb out of the crib or other approved equipment. Each crib shall be safety approved in compliance with Consumer Product Safety Commission (CPSC) and American Society of Testing and Materials International (ASTM) safety standards; any other equipment, such as, but not limited to, a portable crib, playpen, play yard or bassinet, shall be in compliance with current ASTM Standard Consumer Safety Specifications for Non-Full-Size Baby Cribs/Play Yards. It was determined that based on observation that the provider was caring for three infants and did not have safety approved cribs or other equipment that is approved and in compliance with the CPSC and ASTM standards for infant sleep for each infant in care. Two cribs were observed for four enrolled infants.

**POI (Plan of Improvement)**

The Home Provider will obtain more safety approved cribs or other equipment that is approved and in compliance with the CPSC and ASTM standards for infant sleep for each infant in care.

**Correction Deadline: 8/8/2017**

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

**N/A**

**Comment**

No Swimming Activities Provided

### Children's Records

Child # 1 Not Met

"Missing/Incomplete Components"

Immunization Form - (.08)(1)(c)

Child # 6 Not Met

"Missing/Incomplete Components"

Immunization Form - (.08)(1)(c)

### 290-2-3-.08 Children's Records

**Not Met**

#### Finding

290-2-3-.08(2) requires the Home to maintain a file for each Child that includes evidence of age-appropriate immunizations or a signed affidavit against such immunizations; enrollment in the Home may not continue for more than 30 days without such evidence. It was determined based on review of records that the provider did not have evidence of current immunizations on file for two enrolled children.

#### POI (Plan of Improvement)

The Home Provider will ensure that an immunization record/signed affidavit is on file for each enrolled Child.

**Correction Deadline: 8/8/2017**

**Facility**

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

**Not Met**

#### Finding

290-2-3-.11(2)(c) requires that documentation of drills required by these rules shall be maintained in the Home. The Home shall 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 Home shall maintain documentation of the dates and times of these drills for two years. It was determined based on review of records that the Home did not have evidence of completing emergency drills for the year of 2017.

#### POI (Plan of Improvement)

The Provider will develop and implement a plan and schedule for conducting the required drills, completing the documentation, keeping the documentation on file for two years.

**Correction Deadline: 9/7/2017**

**Correction Deadline: 4/6/2017**

**Corrected on 8/8/2017**

**.11(2)(f) - Previous citation observed corrected.**

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

**Met**

#### Comment

Home Clean, Free of Hazards

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

**Met**

#### Comment

Outside Area Clean, Well Maintained

**Health and Hygiene**

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<b>290-2-3-.11 Children's Health and Hygiene(CR)</b>	<b>Met</b>
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**Comment**

Staff Stated Proper Knowledge

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<b>290-2-3-.11 Diapering Areas &amp; Practices(CR)</b>	<b>Met</b>
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**Comment**

Provider Stated Appropriate Diapering

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<b>290-2-3-.11 Medications(CR)</b>	<b>Met</b>
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**Comment**

Per provider, medication is not dispensed at the Home.

<b>Licensure</b>
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<b>290-2-3-.04 Application Requirements(CR)</b>	<b>Met</b>
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**Comment**

Appropriate number of children

<b>Safety and Discipline</b>
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<b>290-2-3-.11 Animals</b>	<b>N/A</b>
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**Comment**

No Animals Kept

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<b>290-2-3-.11 Discipline(CR)</b>	<b>Met</b>
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**Comment**

Pleasant Interactions Observed

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<b>290-2-3-.11 First Aid Kit</b>	<b>Met</b>
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**Comment**

Observed complete kit

**Correction Deadline: 8/8/2017**

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

No Routine Transportation Provided

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

All staff were observed to have satisfactory determination letters on this date.

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

Staff qualifications/compliance with law

<b>Staff:Child Ratios and Supervision</b>
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**Comment**

Appropriate Ratios Observed

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**290-2-3-.07 Supervision(CR)****Technical Assistance****Technical Assistance**

290-2-3-.07(13) - Proper supervision for answering the entrance access gate discussed with the provider.