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: 1/7/2025 **VisitType:** Licensing Study **Arrival:** 12:40 PM **Departure:** 6:05 PM

CCLC-713
Appletree Prep Watkinsville
1471 Jennings Mill Road Watkinsville, GA 30677 Oconee County
(706) 546-9400 Marion@appletreeprep.com

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Mailing Address
Same

Quality Rated: ★ ★

Compliance Zone Designation		
01/07/2025	Licensing Study	Good Standing
08/28/2024	Incident Investigation Closure	Good Standing
07/18/2024	Incident 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	100	Infants	1	4	C	17	C	NA	NA	Diapering,Floor Play,Nap
Main	150	Infants and One Year Olds	1	5	C	15	C	NA	NA	Snack
Main	200	One Year Olds	1	8	C	18	C	NA	NA	Nap
Main	250	One Year Olds	1	4	C	22	C	NA	NA	Nap
Main	300	Two Year Olds	1	10	C	23	C	NA	NA	Nap,Transitioning
Main	350	Two Year Olds	1	9	C	22	C	NA	NA	Nap
Main	400	Two Year Olds and Three Year Olds	1	12	C	22	C	NA	NA	Nap
Main	450	GA PreK	1	19	C	20	C	NA	NA	Nap
Main	500	GA PreK	1	13	C	21	C	NA	NA	Nap
Main	550		0	0	C	26	C	36	C	
Main	Dining		0	0	C	24	C	NA	NA	
Main	Gym	Three Year Olds and Four Year Olds	1	12	C	60	C	83	C	Centers,Nap
		Total Capacity @35 sq. ft.: 320			Total Capacity @25 sq. ft.: 323			Building @35 capacity limited by Heath Department Limitations		
Total # Children this Date: 96		Total Capacity @35 sq. ft.: 320			Total Capacity @25 sq. ft.: 323					

Building	Playground	Playground Occupancy	Playground Compliance
Main	Playground A	67	C

Main	Playground B	200	C
Main	Playground C	95	C
Main	Playground D	52	C

Enrolled Children						
Under 1 years	**1 years**	**2 years**	**3 years**	**4 years**	**5 years (Prekonly)**	**5 years and older**
7	16	19	24	37	0	6

Comments
The purpose of today's visit was to conduct a licensing study and to follow up from the previous visit conducted on July 18, 2024.

Plan of Improvement: Developed This Date

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.decal.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.

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), do the following:

1) Log into DECAL KOALA www.decalkoala.com with the userid for your program
2) On the home page scroll down to the Inspection Reports and select 'Refute Citation' for the visit report in dispute
3) Select the specific rule number(s) that you are refuting, add the reason for disagreement regarding the rule citation, and upload supporting documentation
4) Submit the refutation in DECAL KOALA to Child Care Services (CCS) within 10 business days of the completion date.

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)

Important Quality Rated/CAPS Update:

As January 1, 2022, child care providers must be Quality Rated to receive Childcare and Parent Services (CAPS). Newly licensed, or new to CAPS providers may be eligible for the new CAPS/QR Provisional Status, allowing for scholarships while working toward a star rating.

Contact the Quality Rated help desk a1 855-800-7747 or qualityrated@decal.ga.gov **for more information. Free techincal assistance is available!**

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(Findings Report)

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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
Equipment and furniture observed to be properly secured, as applicable.

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

Comment
Center does not provide swimming activities.

Children's Records

591-1-1-.08 Children's Records **Met**

Comment
Records were observed to be complete and well organized.

Facility

591-1-1-.06 Bathrooms **Technical Assistance**

Comment
Bathrooms observed to be clean and well maintained.

Technical Assistance
591-1-1-.06(6) - Consultant discussed with director to ensure that restrooms have the necessary supplies.

Correction Deadline: 1/7/2025

591-1-1-.19 License Capacity(CR) **Met**

Comment
Licensed capacity observed to be met by center.

591-1-1-.25 Physical Plant - Safe Environment(CR) **Technical Assistance**

Comment
Center appears clean and well maintained.

Technical Assistance
591-1-1-.25(13) - Consultant discussed with director to ensure that plastic bags and baby wipes are stored out of reach of children.

Correction Deadline: 1/7/2025

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

Finding
591-1-1-.26(4) requires that playgrounds be protected from traffic or other hazards by a (4) four foot high fence or other barrier approved by this Department. Fencing material shall not present a hazard to children and shall be maintained so as to prevent children from leaving the playground area by any means other than through an approved access route. Fence gates shall be kept closed except when persons are entering or exiting the area. It was determined based on observation that there were hazards on the playground fence:
-Playground A: There was a gap at the measuring approximately four inches between the double gate leading to parking lot.
-Playground B: There was a gap measuring approximately six inches under the double gate at the back of the playground and a gap measuring approximately four inches under the gate between playgrounds A and B. Additionally there were loose and protruding wires at the bottom of the gate.
-Playground C: There was a gap measuring approximately four inches under the fence between playgrounds B and C where the dirt had washed from underneath it. There were protruding wires at the bottom of the gate between Playgrounds C and D.
-Playground D: There was a gap at the measuring approximately five inches under the double gate leading to parking lot.

POI (Plan of Improvement)
The Center will routinely check the fence to determine if it is in good repair and remains at least 4 feet high, and will repair any hazards. The Center will train Staff to identify and report any fence hazards and to keep the fence gates closed when not in use.

Correction Deadline: 1/17/2025

Recited on 1/7/2025

Technical Assistance
591-1-1-.26(6) - Consultant discussed with director to ensure that the missing pedal and handle grips are replaced on the tricycles on playground C.

Correction Deadline: 1/17/2025

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 there was between two and four inches of mulch in the fall zone around the swing on playground C and between one and three inches of mulch in the fall zone around the swings on playground D. Six inches of resilient surfacing is 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: 1/17/2025

Food Service

591-1-1-.15 Food Service & Nutrition **Met**

Correction Deadline: 8/29/2024

Corrected on 1/7/2025
.15(9) - The previous citation was observed to be corrected. Staff stated that director checks the ingredients for food ordered for the center and does not order foods that contain allergens.

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

Comment
Kitchen appears clean and well organized.

Health and Hygiene

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

Comment
Proper diapering procedures observed.

591-1-1-.17 Hygiene(CR) **Not Met**

Finding
591-1-1-17(7) requires that children wash their hands with liquid soap and warm running water upon arrival for care, when moving from one child care group to another, upon re-entering the child care area after outside play, before and after eating meals and snacks, handling or touching food, playing in water; after toileting and diapering, playing in sand, touching animals or pets, and contact with bodily fluids and after contamination by any other means. It was determined based on observation that a staff member did not wash the child's hands after completing the diaper changing process in classroom 100

POI (Plan of Improvement)
The Center will train Staff on required handwashing for children and Staff will ensure children's hands are washed when required. The Director will monitor for compliance.

Correction Deadline: 1/7/2025

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

Comment
Documentation for medication dispensing observed complete.

Policies and Procedures

591-1-1-.21 Operational Policies & Procedures **Met**

Comment
Program observed complete emergency drills

591-1-1-.27 Posted Notices **Met**

Comment
Please make sure that all required signs are posted and up to date.

Safety

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

Comment
Animals maintained clean and appropriately caged.

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

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

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

Comment
Center does not participate in field trips at this time.

591-1-1-.36 Transportation(CR) **Not Met**

Finding
591-1-1-.36(6) requires written Parental authorization for routine transportation provided by or on behalf of the Center. Written authorization must include the routine pick-up location, routine pick-up time, routine delivery location, routine delivery times and the name of any person authorized to receive the child. It was determined based on review of records that the center did not have written parental authorization for five of five children receiving transportation services.

POI (Plan of Improvement)
The Center will obtain the required written parental authorization.

Correction Deadline: 1/8/2025

Finding
591-1-1-.36(7)(b) requires that an d be maintained in the vehicle for each child being transported. The emergency medical information record for each child shall include a listing of the child's full name, date of birth, allergies, special medical needs and conditions, current prescribed medications that the child is required to take on a daily basis for a chronic condition, the name and telephone number of the child's doctor, the local medical facility that the Center uses in the area where the Center is located and the telephone numbers where the Parents can be reached. It was determined based on review of records that the center did not have an emergency medical information record for two of five children receiving transportation services. Further, it was determined that the emergency medical information records were not kept on the vehicle when children were being transported. .

POI (Plan of Improvement)
The Center will obtain a complete emergency medical information record for each child that is transported and maintain a copy on the vehicle.

Correction Deadline: 1/8/2025

Technical Assistance
591-1-1-.36(7)(c)3. - Consultant discussed with director to ensure that staff are documenting the date that transportation services took place on the checklist.

Correction Deadline: 1/8/2025

Sleeping & Resting Equipment

591-1-1-.30 Safe Sleeping and Resting Requirements(CR) — **Not Met**

Finding
591-1-1-.30(1)(a)3 requires that each crib shall have only an individual, tight-fitting sheet which is changed daily or more often as needed and prior to a change of occupant. It was determined based on observation that one crib had a sheet that was not tight fitting in classroom 100.

POI (Plan of Improvement)
The center will ensure that each crib has an individual, tight-fitting sheet which is changed daily or more often as needed and prior to a change of occupant.

Correction Deadline: 1/7/2025

Technical Assistance
591-1-1-.30(1)(d) - Consultant discussed with director to that napping children be placed with the head of one child facing the feet of the next child and that the cots should be placed twelve inches apart.

Correction Deadline: 1/7/2025

Staff Records

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

Comment
Criminal record checks were observed to be complete.

Comment
Director provided eight files for employees hired since last visit July 18, 2024.

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 review of records that staff #1, date of hire October 3, 2024, and staff #3, date of hire September 13, 2024, did not have evidence of current certification in first aid and CPR on file.

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: 2/6/2025

Finding

591-1-1-.14(3) requires the Center to have a first aid kit in each building of the Center and in any vehicle used by the Center for transportation of children, that contains scissors, tweezers, gauze pads, adhesive tape, thermometer, band-aids, assorted sizes, antibacterial ointment, insect-sting preparation, an antiseptic cleansing solution, triangular bandages, rubber gloves, protective eye wear, a protective face mask, and a cold pack. The first aid kit, together with a first aid instruction manual which must be kept with the kit at all times, shall be stored so that it is not accessible to children but is easily accessible to Staff. It was determined based on observation that the first aid kit did not have medical tape, scissors, tweezers, antibiotic ointment, antiseptic cleaning solution, protective eyewear, cold pack, masks, and a thermometer.

POI (Plan of Improvement)

Center Staff will provide any missing first aid kits, add any missing items to each first aid kit and will develop and use a plan for checking the kits and replacing missing items in each kit in the future. First aid kits and instruction manuals will be stored so that they kits are not accessible to children but are easily accessible to Center Staff.

Correction Deadline: 1/17/2025

591-1-1-.33 Staff Training — Not Met

Finding

591-1-1-.33(3) requires each Staff member with direct care responsibilities to complete health and safety orientation training within the first 90 days of employment. The state-approved training hours obtained will count toward required first year training hours. The training must address the following health and safety topics: prevention and control of infectious diseases (including immunizations); prevention of sudden infant death syndrome and use of safe sleeping practices; administration of medication, consistent with standards for parental consent; prevention of and response to emergencies due to food and allergic reactions; building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic; prevention of shaken baby syndrome, abusive head trauma and child maltreatment; emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility); handling and storage of hazardous materials and the appropriate disposal of bio contaminants; precautions in transporting children; recognition and reporting of child abuse and neglect; and child development. It was determined based on review of records that staff #1, date of hire October 3, 2024, staff #3, date of hire September 13, 2024, staff #14, date of hire March 8, 2024, staff #19, date of hire June 12, 2024, staff #20, date of hire June 26, 2024, and staff #21, date of hire March 23, 2024, did not have evidence of health and safety orientation training on file.

POI (Plan of Improvement)

The Center will develop and implement a plan to schedule and track this training for all employees based on their hire dates and will ensure that the training includes all required components as required.

Correction Deadline: 2/6/2025

Finding
91-1-1-.33(5) requires that every calendar year after the first year of employment, all supervisory and caregiver Personnel, except independent contractors, Students-in-Training and volunteers shall attend ten (10) clock hours of diverse training which is task-focused in on-going health, safety and early childhood or child development related topics and which is offered by an accredited college, university or vocational program or other Department-approved source. The annual ten (10) clock hours of training shall be chosen from the following fields: child development, including discipline, guidance, nutrition, injury control and safety; health, including sanitation, disease control, cleanliness, detection and disposition of illness; child abuse and neglect, including identification and reporting, and meeting the needs of abused and/or neglected children; and business related topics, including parental communication, recordkeeping, etc.; provided however that such business related training shall be limited to no more than two (2) of the required ten (10) clock hours of training. Records of completion of such training shall be maintained, as required by these rules. It was determined based on review of records that staff #2, date of hire October 1, 2007, staff #15, date of hire February 11, 2002, and staff #16, date of hire August 15, 2005, did not have evidence of ten clock hours of annual training on file for 2024.

POI (Plan of Improvement)
The Center will plan and schedule the required 10 hours of annual training each year and follow up to ensure the training is completed.

Correction Deadline: 2/6/2025

591-1-1-.31 Staff(CR) **Met**

Comment
Staff observed to be compliant with applicable laws and regulations.

Staffing and Supervision

591-1-1-.32 Staff:Child Ratios and Group Size(CR) **Met**

Comment
Center observed to maintain appropriate staff:child ratios.

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

Comment
Adequate supervision observed on this date.