



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: 11/24/2025 **VisitType:** Complaint Investigation Follow Up **Arrival:** 10:00 AM **Departure:** 12:55 PM

CCLC-51917

Smart Start Pre-School Learning Academy

505 Bartow Street Thomasville, GA 31792 Thomas County
(229) 225-1122

Regional Consultant

Angela Williams-Jackson

Phone: (404) 710-3984

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angela.williams-jackson@decal.ga.gov

Mailing Address

Same

Quality Rated: ★ ★

<u>Compliance Zone Designation</u>			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.
11/24/2025	Complaint Investigation Follow Up	Good Standing	
08/11/2025	Licensing Study	Good Standing	
07/08/2025	Complaint Closure	Good Standing	

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	Room A - Infants	Infants and One Year Olds	1	5	C	14	C	NA	NA	Free Play, Floor Play
Main	Room B - 1 to 2 yr olds		0	0	C	13	C	NA	NA	
Main	Room C - Older 2's	Two Year Olds	1	6	C	20	C	NA	NA	Free Play
Main	Room D - 5 to 12 yr olds		0	0	C	19	C	26	C	
Main	Room E - 3 to 4 yr olds	Three Year Olds and Four Year Olds and Five Year Olds and Six Year Olds and Over	1	7	C	20	C	27	C	Art
			Total Capacity @35 sq. ft.: 86			Total Capacity @25 sq. ft.: 0				
Total # Children this Date: 18			Total Capacity @35 sq. ft.: 86			Total Capacity @25 sq. ft.: 0				

Building	Playground	Playground Occupancy	Playground Compliance
Main	Playground A	21	C
Main	Playground B	48	C

Comments

Repeat citation and TA were left with the Center on 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.dec.al.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 user id 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 at 855-800-7747 or qualityrated@dec.al.ga.gov for more information. Free technical assistance is available!



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Summary Report

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The following information is associated with a Complaint Investigation Follow Up:

	Facility
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591-1-1-.25 Physical Plant - Safe Environment(CR)

Not Met

Correction Deadline: 8/11/2025

Corrected on 11/24/2025

The previous citation was observed to be corrected on this date. There were no hazards accessible to children on this date.

Finding

591-1-1-.25(3) requires the Center and surrounding premises to be kept clean, free of debris and in good repair. Hygienic measures such as, but not limited to, screened windows and proper waste disposal procedures shall be utilized to minimize the presence of rodents, flies, roaches and other vermin at the Center. It was determined based on observation that the following areas were not clean and in need of repair that posed a health and safety hazard:

Main Room C

- The ceiling vents in both bathrooms had dust and debris

Main Room E

- The vent fan in the first bathroom to the left was not working.

POI (Plan of Improvement)

The Center will have the Center and surrounding areas cleaned, make repairs where needed, and remove all debris is removed. The Center will implement a plan to keep areas clean and in good repair that includes regular monitoring.

Correction Deadline: 12/8/2025

Recited on 11/24/2025

Policies and Procedures

Technical Assistance

The Consultant discussed with the Director updating the Center's policies and procedures to include the program's practices regarding the expulsion and suspension of children enrolled for care within the description of behavior management and discipline actions used by the Center.

Also discussed to ensure a description of the practices followed by the Center to prevent shaken baby syndrome and abusive head trauma in children up to five years of age that includes the following information: how to recognize, respond to, and report the signs and symptoms of shaken baby syndrome and abusive head trauma; strategies to assist staff members in understanding how to care for infants and how to cope with a crying, fussing, or distraught child; strategies to ensure staff members understand the brain development of children up to five years of age; and a list of prohibited behaviors when dealing with children. Additional information can be found in the CCLC Indicator Manual found on DECAL's website at: <https://www.dec.al.ga.gov/CCS/RulesAndRegulations.aspx> or through the Center on Shaken Baby Syndrome found at: <https://dontshake.org/>.

Correction Deadline: 11/29/2025

Correction Deadline: 8/16/2025

Corrected on 11/24/2025

The previous citation was observed to be corrected on this date. The smoke detector and fire extinguisher check were conducted and documented through October 2025.

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

Correction Deadline: 8/11/2025

Corrected on 11/24/2025

The previous citation was observed to be corrected on this date. The current license and infectious disease chart was posted.

Safety**591-1-1-.36 Transportation(CR)****Met**

Correction Deadline: 8/21/2025

Corrected on 11/24/2025

The previous citation was observed to be corrected on this date. The previous Staff Member cited had current transportation training on file.

Correction Deadline: 8/12/2025

Corrected on 11/24/2025

The previous citation was observed to be corrected on this date. The dates were completed on the checklist for the last two weeks.

Staff Records

Records Reviewed: 7

Records with Missing/Incomplete Components: 3

Staff # 1

Not Met

Date of Hire: 05/15/2025

"Missing/Incomplete Components"

.24(1)-Evidence of Orientation Missing,.33(3)-Health & Safety Certificate

Staff # 2

Not Met

Date of Hire: 03/12/2009

"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing

Staff # 5

Not Met

Date of Hire: 08/12/2025

"Missing/Incomplete Components"

.24(1)-Evidence of Orientation Missing

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

Director provided two files for employees hired since the last visit.

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

Correction Deadline: 8/11/2025

Corrected on 11/24/2025

The previous citation was observed to be corrected on this date. The Staff Member had current first aid and CPR completed in- person on file.

Finding

591-1-1-.14(2)(b) requires that there must always be one staff person present in each classroom where children are present that has current and valid pediatric cardiopulmonary resuscitation (CPR) and pediatric first aid training. It was determined based on a review of records that the Staff Member's #2 did not have evidence of current first aid and CPR training as required.

POI (Plan of Improvement)

The Director will schedule and/or position caregiver Staff throughout the Center to ensure at least one currently pediatric CPR and First Aid trained Staff person is present in each classroom where children are present.

Correction Deadline: 12/29/2025

Recited on 11/24/2025

591-1-1-.24 Personnel Records**Not Met****Finding**

591-1-1-.24(1) requires the center to maintain a personnel file on the Director, all Employees, Provisional Employees, Personnel, Staff, Students-in-Training, Volunteers, Clerical, Housekeeping, Maintenance, and other Support Staff for the duration of the term of employment plus one calendar year, and it shall contain the following: identifying information to include: name, date of birth, social security number, current address and current telephone number; employment history; as applicable to the position held: evidence of education and qualifying work experience; evidence of all training required by these rules which shall include: title of training, date of training, trainer's signature, location of training and number of clock hours obtained; a statement completed by the staff member that the information provided is true and accurate; any other records required by these rules; and as applicable to the position held, evidence of required orientation including date and signature of person providing the orientation; It was determined based on a review of records that Staff Members #1, #5, and #6 did not have orientation on file as required.

POI (Plan of Improvement)

The Center will secure required information for all Personnel. The Center will ensure that complete information is in the personnel file for all Directors, Employees, Provisional Employees, Personnel, Staff, Students-in-Training, Volunteers, Clerical, Housekeeping, Maintenance and other Support Staff.

Correction Deadline: 11/29/2025

Technical Assistance

The Consultant discussed with the Director that all Employees, including volunteers, independent contractors, students-in-training, etc. should have a completed initial program orientation form on file.

Correction Deadline: 11/29/2025

591-1-1-.33 Staff Training**Not Met**

Finding

591-1-1-.33(3)(a)-(k) 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: a) prevention and control of infectious diseases (including immunizations); b) prevention of sudden infant death syndrome and use of safe sleeping practices; c) administration of medication, consistent with standards for parental consent; d) prevention of and response to emergencies due to food and allergic reactions; e) 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; f) prevention of shaken baby syndrome, abusive head trauma and child maltreatment; g) 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); h) handling and storage of hazardous materials and the appropriate disposal of bio contaminants; i) precautions in transporting children; j) recognition and reporting of child abuse and neglect; and k) child development to include all major domains: cognitive; social and emotional; physical development and motor skills; communication, language, and literacy; and approaches to play and learning. It was determined based on a review of records that Staff Member #1 did not have evidence of health and safety orientation training completed within the first 90 days of employment.

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: 12/24/2025

Defer

Evaluation of the previous citation was deferred on this date to the next regulatory visit.

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: 9/10/2025

Technical Assistance

The Consultant discussed with the Director that effective July 1, 2025, all staff are required to obtain at least two hours in evidence based, developmentally appropriate language and literacy practices and at least two hours in on-going child development and health and safety related topics as part of their 10 hours of annual training.

Correction Deadline: 12/24/2025