



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: 10/7/2025 VisitType: POI Follow Up

Arrival: 8:35 AM Departure: 9:50 AM

CCLC-58059
Stonewell Academy
204 Park Lane Thomaston, GA 30286 Upson County
(706) 938-0835

Regional Consultant
Brandi Mangino
Phone: (478) 314-9726
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Mailing Address
Same

Quality Rated: ★

Compliance Zone Designation			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.
10/07/2025	POI Follow Up	Good Standing	
09/29/2025	TA Follow Up	NA	
09/08/2025	POI Follow Up	Deficient	

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	A	Two Year Olds	2	8	C	13	C	NA	NA	Free Play
Main	B	One Year Olds	2	2	C	12	C	NA	NA	Floor Play
Main	C		0	0	C	9	C	NA	NA	
Main	D	Three Year Olds and Four Year Olds	1	7	C	9	C	NA	NA	Transitioning
Total Capacity @35 sq. ft.:			43		Total Capacity @25 sq. ft.: 0					
Total # Children this Date: 17			Total Capacity @35 sq. ft.: 43		Total Capacity @25 sq. ft.: 0					

Building	Playground	Playground Occupancy	Playground Compliance
Main	Playground	3	C
Main	Right (Large)	12	C

Comments

The purpose of this visit was to conduct a Plan of Improvement follow-up.

Plan of Improvement: Developed This Date



For additional information regarding any licensing topics discussed during this visit, please consult the Rules and Regulations Indicator Manual. This manual provides comprehensive clarification of each rule, including evaluation indicators, related best practices, and relevant considerations to support your program's continued and sustained compliance.

To access the Indicator Manual, please scan the QR code below or visit our website at <https://www.decal.ga.gov/CCS/RulesAndRegulations.aspx>.

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

You have received permission to operate and the form received with this report is intended to serve as a temporary license which is **valid for thirty(30) days**. Your actual license/ will be emailed to you upon receipt of the licensing fee. You may pay the licensing fee either online at <http://www.decal.ga.gov/> or by certified check or money order mailed to: Bright from the Start, 2 Martin Luther King Jr. Drive SE, Suite 670 East Tower, Atlanta, GA 30334

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 at 855-800-7747 or qualityrated@decal.ga.gov for more information. Free technical assistance is available!



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Summary Report

Date: 10/7/2025 VisitType: POI Follow Up

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The following information is associated with a POI Follow Up:

Activities and Equipment

591-1-1-.12 Equipment & Toys(CR)

Met

Correction Deadline: 9/8/2025

Corrected on 10/7/2025

.12(1) - Citation observed to be corrected on this date. Equipment was being used in correct manner at the time of the visit.

Facility

591-1-1-.26 Playgrounds(CR)

Met

Correction Deadline: 9/15/2025

Corrected on 10/7/2025

.26(3) - Citation corrected as a large shade structure was built for shade.

Correction Deadline: 9/18/2025

Corrected on 10/7/2025

.26(6) - Citation corrected.

Food Service

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

Not Met

Finding

591-1-1-.15(7) requires that food be served according to manufacturer's instructions and recommendations. Foods that are associated with young children's choking incidents, such as, but not limited to, peanuts, hot dogs, raw carrots, popcorn, fish with bones, cheese cubes, grapes and any other food that is of similar shape and size of the trachea/windpipe shall not be served to the children less than four (4) years of age. Children older than four (4) years of age may be served these foods provided that the foods are cut in such a way as to minimize choking. Food shall not be accessible or served to children until it has been chopped, diced, cut or mashed and is appropriate for each child's age and individual eating, chewing and swallowing ability. It was determined based on observation that blueberries were served to children for breakfast on this date.

POI (Plan of Improvement)

The Center will train Staff and monitor food served and accessible to children to ensure that the food does not present a choking hazard.

Correction Deadline: 10/7/2025

Health and Hygiene

Correction Deadline: 9/8/2025

Corrected on 10/7/2025

.10(2) - Citation corrected. Sinks were in working order.

Correction Deadline: 9/8/2025

Corrected on 10/7/2025

.17(8) - Citation corrected.

Policies and Procedures**Finding**

591-1-1-.21(1)(r) requires Center policies and procedures include 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. It was determined based on a review of records the center did not update the policies and procedures as required to show how the center will 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

POI (Plan of Improvement)

The Center will write or revise policies and procedures to include the required description of the Center's practices used to prevent shaken baby syndrome and abusive head trauma in children up to five years or age.

Correction Deadline: 10/12/2025

Sleeping & Resting Equipment

Correction Deadline: 9/8/2025

Corrected on 10/7/2025

.30(1)(a)2 - Citation observed to be corrected on this date. Mattresses were observed to meet rule requirements.

Correction Deadline: 9/8/2025

Corrected on 10/7/2025

.30(1)(a)3 - Citation observed to be corrected.

Correction Deadline: 9/8/2025

Corrected on 10/7/2025

.30(1)(d) - Citation observed to be corrected. Cribs were spaced accordingly.

Correction Deadline: 9/8/2025

Corrected on 10/7/2025

.30(2)(c) - Citation observed to be corrected on this date.

Staff Records

Records Reviewed: 10

Records with Missing/Incomplete Components: 2

Staff # 3

Not Met

Date of Hire: 08/11/2025

"Missing/Incomplete Components"

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

Staff # 4

Not Met

Date of Hire: 08/11/2025

"Missing/Incomplete Components"

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

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

Consultant requested to view all Criminal Record checks for employees hired after last visit. Director stated that there have been no new hires since last visit

Correction Deadline: 9/8/2025

Corrected on 10/7/2025

.09(1)(a) - Citation observed to be corrected.

Correction Deadline: 9/8/2025

Corrected on 10/7/2025

.09(1)(c) - Citation observed to be corrected.

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

591-1-1-.14(1)(a) requires all Staff who provide direct care to children must obtain certification in a biennial training program in pediatric cardiopulmonary resuscitation (CPR) and a triennial training program in pediatric first aid within the first 45 days of employment. Current and valid evidence of the successful completion of such training shall be maintained on the Center's premises. The hours obtained completing this certification will not count towards the required annual training hours. It was determined based on a review of records that staff members #3 and #4 did not have first aid and CPR within 45 days of hire in that they were hired August 11, 2025 and did not have it as of October 7, 2025.

POI (Plan of Improvement)

All caregiver Staff will complete the required training. The Director will send copies via email verification of completed CPR/First Aid certification to the consultant upon completion and will develop a plan to ensure all caregiver Staff have completed this training within the first 45 days of employment and that evidence of successful completion of the training is on file available for inspection.

Correction Deadline: 11/6/2025

Finding

591-1-1-.14(1)(b) requires the training must be done by certified or licensed health care professionals or trainers and must deal with the provision of emergency care to infants and children. It was determined based on a review of first aid records the emergency care of infant and children was not listed and the area was left blank for the staff members that had current first aid and CPR.

POI (Plan of Improvement)

All caregiver Staff must successfully complete a biennial training program in cardiopulmonary resuscitation (CPR) and a triennial training program in first aid taught by certified or licensed health care professionals or trainers and must deal with the provision of emergency care to infants and children. The Director will send copies via email of verification of completed CPR/First Aid certification to the Consultant upon completion.

Correction Deadline: 11/6/2025

591-1-1-.24 Personnel Records**Met**

Correction Deadline: 9/13/2025

Corrected on 10/7/2025

.24(1) - Citation observed to be corrected.

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

Correction Deadline: 9/8/2025

Corrected on 10/7/2025

.33(1) - Citation observed to be corrected.

Finding

591-1-1-.33(2)(a)-(n) requires the initial Center orientation to include the following subjects: a) the Center's policies and procedures; b) the portions of these rules dealing with the care, health and safety of children; c) the Staff person's assigned duties and responsibilities; d) reporting requirements for suspected cases of child abuse, neglect or deprivation; e) communicable diseases and serious injuries; f) emergency weather plans; g) the program's emergency preparedness plan; h) childhood injury control; i) the administration of medicine; j) reducing the risk of Sudden Unexpected Infant Death (SUID), which includes Sudden Infant Death Syndrome (SIDS); k) hand washing; l) fire safety; m) water safety; and n) prevention of HIV/AIDS and blood borne pathogens. It was determined based on a review of records that center staff did not have the update orientation paperwork showing they were trained in j) reducing the risk of Sudden Unexpected Infant Death (SUID), which includes Sudden Infant Death Syndrome (SIDS)

POI (Plan of Improvement)

The Center will provide orientation in all missing subjects to the employee(s) and will take steps to provide a complete orientation to new Employees in the future.

Correction Deadline: 10/8/2025

Defer

591-1-1-.33(5)-Citation will be deferred until the first regulatory visit for 2026 as staff have until December 31, 2025 to complete annual training or the year.

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: 3/6/2025