



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: 9/9/2025 **VisitType:** Licensing Study

Arrival: 8:50 AM **Departure:** 1:40 PM

CCLC-58742
Higher Heights Learning Academy, Inc.
6270 Red Oak Road Atlanta, GA 30349 Fulton County
(678) 489-8534

Regional Consultant
Shameka Dozier
Phone: (770) 857-7010
Fax: (770) 357-7009
shameka.dozier@decal.ga.gov

Mailing Address
Same

Quality Rated: No

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.
09/09/2025	Licensing Study	Good Standing	
07/09/2024	Licensing Study	Good Standing	
08/21/2023	Initial Licensing Study	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	A		0	0	C	20	C	NA	NA	
Main	B	Infants and One Year Olds and Two Year Olds	2	4	C	16	C	NA	NA	TV
Main	C		0	0	C	22	C	NA	NA	
Main	D		0	0	C	27	C	NA	NA	
Total Capacity @35 sq. ft.: 85			Total Capacity @25 sq. ft.: 0							
Total # Children this Date: 4			Total Capacity @25 sq. ft.: 0							

Building	Playground	Playground Occupancy	Playground Compliance
Main	A	30	C

Enrolled Children						
Under 1 years	1 years	2 years	3 years	4 years	5 years (Prekonly)	5 years and older
1	2	3	0	0	0	1

Comments

Food preparation training, transportation forms, emergency fire drills, operational policies & procedures, pediatric First Aid and pediatric CPR training within 45 days of employment, 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 was discussed with the provider 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.decgal.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 at 855-800-7747 or qualityrated@decgal.ga.gov for more information. Free technical assistance is available!



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Summary Report

Date: 9/9/2025 VisitType: Licensing Study

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The following information is associated with a Licensing Study:

Activities and Equipment

591-1-1-.03 Activities

Technical Assistance

Technical Assistance

591-1-1-.03(2) - Consultant discussed with the provider to ensure that lesson plans are current and dated.

Correction Deadline: 9/9/2025

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

Met

Comment

A variety of equipment and toys were observed throughout the center on this date.

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

N/A

Comment

Center does not provide swimming activities.

Children's Records

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

Met

Correction Deadline: 7/19/2024

Corrected on 9/9/2025

.08(2) - Previous citation of three children files having expired immunization, or no immunization on file was observed to be corrected on this date.

Facility

591-1-1-.06 Bathrooms

Met

Comment

Bathrooms observed to be clean and well maintained.

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

Met

Comment

Licensed capacity observed to be routinely met by center on this date.

Finding

591-1-1-.25(13) requires that potentially hazardous equipment, materials and supplies be stored in a locked area inaccessible to children. It was determined based on observation that the following hazards were observed:

Room B

-two tower fans were placed on top of the white shelf on the left side of the room and a white table in the back of the room.

-an extension cord with electrical cords attached to a computer and printer were under the black table at the back of the room and were accessible to children.

Playground walkway

- a manual lawn mower, black pole, and two doors were laying/ placed on the back of the wall and were accessible to children.

POI (Plan of Improvement)

The Center will identify all hazardous items and keep them in a locked area inaccessible to children. The Center will inform all Staff about hazardous items and the safe storage of those items.

Correction Deadline: 9/9/2025

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

Not Met

Finding

591-1-1-.26(9) requires the playground to be kept clean, free from litter and free of hazards, such as but not limited to rocks, exposed tree roots and exposed sharp edges of concrete. It was determined based on observation that there were vines on the back and left side of the fence. It was further observed that a broken tree branch with limbs were hanging over the back fence.

POI (Plan of Improvement)

The Center will remove any litter and fix or remove hazards from the playground and will routinely monitor the playground and remove litter and hazards.

Correction Deadline: 9/26/2025

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

Met

Comment

Center menu meets USDA guidelines.

591-1-1-.18 Kitchen Operations

Met

Comment

Kitchen appears clean and well organized on this date.

Health and Hygiene**591-1-1-.10 Diapering Areas & Practices(CR)**

Met

Comment

Hand washing requirements for diapering were discussed with the director on this date.

591-1-1-.17 Hygiene(CR)

Met

Comment

Proper hand washing observed throughout the center on this date.

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

N/A

Comment

The Provider currently does not dispense/administer medication.

Policies and Procedures

Technical Assistance

591-1-1-.21(1)(a-o) - Discussed 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.gov/CCS/RulesAndRegulations.aspx> or through the Center on Shaken Baby Syndrome found at: <https://dontshake.org/>.

Correction Deadline: 9/14/2025

Finding

591-1-1-.21(3) requires that the Center 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 Center shall maintain documentation of the dates and times of these drills for two years. It was determined based on review of records that no emergency drills were conducted for January through August of 2025.

POI (Plan of Improvement)

The Center will hold the drills as required and keep the documentation of the drills on file for two years.

Correction Deadline: 9/14/2025

591-1-1-.27 Posted Notices

Met

Comment

Observed all required posted notices.

Safety**591-1-1-.05 Animals**

N/A

Comment

Center does not keep animals on premises.

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)

N/A

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 there was no parental authorization for children who are transported as 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 children were missing.

POI (Plan of Improvement)

The Center will obtain the required written parental authorization.

Correction Deadline: 9/10/2025

Technical Assistance

591-1-1-.36(7)(b) - Medical information was discussed with the provider on this date.

Correction Deadline: 9/10/2025

Finding

591-1-1-.36(7)(c) requires the center to use passenger transportation checklists, in a format approved by the Department, to account for each child during transportation. A separate passenger checklist must be used for each vehicle. It was determined based on review of records that the transportation log being used was not in a format approved by the Department. Consultant observed the transportation log that was used to be missing the staff / facility names, vehicle tag number, and pick up/ delivery location.

POI (Plan of Improvement)

The Center will maintain a passenger checklist as required.

Correction Deadline: 9/10/2025

Sleeping & Resting Equipment

591-1-1-.30 Safe Sleeping and Resting Requirements(CR)

Met

Comment

The correct number of mats, sheets and blankets were observed on this date. Cleaning and disinfecting of mats was discussed with the director on this date.

Staff Records

Records Reviewed: 9

Records with Missing/Incomplete Components: 4

Staff # 1

Not Met

Date of Hire: 04/14/2025

"Missing/Incomplete Components"

.24(1)-Evidence of Orientation Missing

Staff # 4

Not Met

Date of Hire: 06/03/2024

"Missing/Incomplete Components"

.24(1)-Evidence of Orientation Missing

Staff # 5

Not Met

Date of Hire: 08/13/2024

"Missing/Incomplete Components"

.24(1)-Evidence of Orientation Missing

Staff # 7

Not Met

Date of Hire: 08/21/2023

"Missing/Incomplete Components"

.24(1)-Evidence of Orientation Missing,.33(5)-10 Hrs. Annual Training,.33(6)-Training Documentation Missing

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

Met

Comment

Criminal record checks were observed to be complete.

591-1-1-.09 Criminal Records Check(CR)

Met

Comment

Criminal records checks were observed to be complete.

591-1-1-.14 First Aid & CPR(CR)

Technical Assistance

Comment

Evidence observed of 100% of center Staff certified in First Aid and CPR containing emergency care for infants and children on this date.

Correction Deadline: 8/8/2024

Corrected on 9/9/2025

.14(1) - Previous citation of staff #7 who is the director did not having current CPR training and the center having less than fifty percent (50%) of CPR training available for inspection was observed to be corrected on this date as consultant observed all staff to be current in CPR training.

Technical Assistance

591-1-1-.14(1)(a) - Discussed that effective July 1, 2025, new staff are required to obtain pediatric First Aid and pediatric CPR training within 45 days of employment. It was further discussed that programs must have at least one person with current pediatric First Aid and pediatric CPR training in each classroom at all times.

Correction Deadline: 9/9/2025

591-1-1-.33 Staff Training

Not Met

Technical Assistance

591-1-1-.33(4) - Food preparation training was discussed on this date.

Correction Deadline: 10/9/2025

Finding

591-1-1-.33(5)(a) 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 offered by an accredited college, university or vocational program or other Department-approved source. It was determined based on review of records that staff #7 had zero of ten required annual hours of training 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: 10/9/2025

Technical Assistance

591-1-1-.33(5)(b)1. - New - Discussed 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: 10/9/2025

Finding

591-1-1-.33(6) requires that evidence of orientation and training shall be documented and maintained in the Personnel file and/or Georgia's workforce registry and professional development system of each Staff member and shall be available to the Department for inspection. It was determined based on review of records that staff #1,4,5, and 7 were missing their initial staff orientation as it was not in the staff files.

POI (Plan of Improvement)

The Center will develop and implement procedures to review staff records for documentation of training and orientation, to obtain and place missing documentation in staff records, and to file such documents in staff records or through Georgia's workforce registry and professional development system on an ongoing basis.

Correction Deadline: 9/19/2025

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

Met

Correction Deadline: 7/9/2024

Corrected on 9/9/2025

.31(2)(b)3.(iii) - Previous citation of staff #3 and staff #4 who were listed as lead teachers having a professional development plan on file that was not filled out was observed to be corrected. Consultant discussed with the director to ensure that all professional learning plans are filled out entirely.

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.

