

**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.dec.state.ga.us

**(Cover Sheet)****Date:** 9/23/2026 **VisitType:** EX-CAPS-Monitoring**Arrival:** 2:25PM **Departure:** 4:50PM**EX-43878 EXMT-6385 EX-1 - Government  
DeKalb County Schools ASED - Bouie E. L.**5100 Rock Springs Road, Lithonia GA 30038  
DeKalb County**Mailing Address****Exemption Unit Consultant**

Melissa Malone

Phone: (678) 491-9630

Fax:

melissa.malone@dec.state.ga.us

Joint with:

| <b>Compliance Zone Designation</b> |                    |            | <b>Prevention Action Category</b> | <b>Intermediate Action Category</b> | <b>Dismissal Action Category</b> |
|------------------------------------|--------------------|------------|-----------------------------------|-------------------------------------|----------------------------------|
| 9/23/2026                          | EX-CAPS-Monitoring | Prevention | <b>Prevention Level 1 (P1)</b>    | <b>Intermediate Level 1 (I1)</b>    | <b>Dismissal (D)</b>             |
|                                    |                    |            | Technical Assistance              | Corrective Action Plan              | Dismissal                        |
|                                    |                    |            |                                   | Office Conference                   | Disqualification                 |
|                                    |                    |            | <b>Prevention Level 2 (P2)</b>    | <b>Intermediate Level 2 (I2)</b>    |                                  |
|                                    |                    |            | Citation                          | Fine (Level 1 or 2)                 |                                  |
|                                    |                    |            | Plan of Improvement               |                                     |                                  |
|                                    |                    |            | <b>Prevention Level 3 (P3)</b>    | <b>Intermediate Level 3 (I3)</b>    |                                  |

| <b>Staff: Child Ratios</b> |                            |                    |                       |                        |              |
|----------------------------|----------------------------|--------------------|-----------------------|------------------------|--------------|
| <b>Room Description</b>    | <b>Age Groups</b>          | <b>Staff Count</b> | <b>Children Count</b> | <b>State Ratio Met</b> | <b>Notes</b> |
| 160                        |                            | 0                  | 0                     | Y                      |              |
| 160                        |                            | 0                  | 0                     | Y                      |              |
| 167                        |                            | 0                  | 0                     | Y                      |              |
| 169                        |                            | 0                  | 0                     | Y                      |              |
| 181                        |                            | 0                  | 0                     | Y                      |              |
| 191                        |                            | 0                  | 0                     | Y                      |              |
| 193                        |                            | 0                  | 0                     | Y                      |              |
| 215                        |                            | 0                  | 0                     | Y                      |              |
| 216                        |                            | 0                  | 0                     | Y                      |              |
| 238                        |                            | 0                  | 0                     | Y                      |              |
| 254                        |                            | 0                  | 0                     | Y                      |              |
| Cafe                       | PreK, Fives, Six and older | 7                  | 73                    | Y                      |              |
| Green Top                  |                            | 0                  | 0                     | Y                      |              |
| Gym                        |                            | 0                  | 0                     | Y                      |              |
| Playground                 |                            | 0                  | 0                     | Y                      |              |
| Playground                 |                            | 0                  | 0                     | Y                      |              |

Group Sizes Met? Y

Total # Non-Care Staff Present: 0

#Staff Count: 7

#Children Count: 73

Comments:

The child care program is in compliance with the approved exemption category.

Please refer to the Exemption page of the website, <https://www.decal.ga.gov/CCS/Exemptions.aspx> for information regarding 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 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](http://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 standard number(s) that you are refuting, add the reason for disagreement regarding the standard 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.

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**(Summary Report)****Date:** 9/23/2026 **VisitType:** EX-CAPS-Monitoring**Arrival:** 2:25PM**Departure:** 4:50PM**EX-43878 EXMT-6385 EX-1 - Government  
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**The following information is associated with a EX-CAPS-Monitoring:****Activities and Equipment****EX-HS-.A Activities****EX-HS-.A(1) - Activities & Teaching Methods Not Planned/Varied/Appropriate****Met**

A daily planned program of varied and developmentally appropriate activities observed with various teaching methods to accommodate different learning styles.

**EX-HS-.A(2)(a-c) - Individual attention/inadequate response to child's needs****Met**

Individual attention and response to the children's needs were observed on this date.

**EX-HS-.A(3) - Activities that are not detrimental****Met**

Activities observed to be appropriate and safe.

**EX-HS-.F Equipment & Toys****EX-HS-.F(1)(a-b) - Equipment/Furniture/ Materials Not Safe/ Appropriate****Met**

The equipment, materials and furniture observed to be used appropriately.

**EX-HS-.F(2)(a-b) - Indoor Equipment/Furniture-hazardous/not clean****Met**

The indoor equipment observed clean and free of hazards and used by the age-appropriate group on this date.

**EX-HS-.F(2)(c) - Indoor Equipment Placement-Unsafe/Restrict Movement****Met**

Furniture and equipment observed to be placed to minimize risk of incident or injury on this date.

**EX-HS-.F(2)(d) - Unsecured Indoor Equipment/Furniture****Met**

Equipment and furniture observed to be secure on this date.

**EX-HS-.Q Swimming Pools & Water-related Activities(CS)****EX-HS-.Q(1) - Swimming/Wading Pool Accessible To Children (CS)****Not Applicable**

The program does not provide swimming activities.

|                                                                                                      |                       |
|------------------------------------------------------------------------------------------------------|-----------------------|
| <b>EX-HS-Q(2)(a-b) - Inadequate Staff: Child Ratio-Water&gt;2 Ft/No Swim test/ No Lifeguard (CS)</b> | <b>Not Applicable</b> |
| The program does not provide swimming activities.                                                    |                       |
| <b>EX-HS-Q(3) - Inadequate Staff: Child Ratio-Water&lt; 2Ft (CS)</b>                                 | <b>Not Applicable</b> |
| The program does not provide swimming activities.                                                    |                       |
| <b>EX-HS-Q(4)(a-d) - No Additional Adult As Required</b>                                             | <b>Not Applicable</b> |
| The program does not provide swimming activities.                                                    |                       |
| <b>EX-HS-Q(5) - No Local Pool Approvals</b>                                                          | <b>Not Applicable</b> |
| The program does not provide swimming activities.                                                    |                       |
| <b>EX-HS-Q(6) - No Parental Permission for Swimming</b>                                              | <b>Not Applicable</b> |
| The program does not provide swimming activities.                                                    |                       |

## Children's Records

### EX-HS-.C Children's Records

|                                                                                    |            |
|------------------------------------------------------------------------------------|------------|
| <b>EX-HS-.C(3) - Documentation Of Incident-Incomplete</b>                          | <b>Met</b> |
| Discussed requirements for incident reports.                                       |            |
| <b>EX-HS-.C(4) - Transportation Records Not Available, Complete, or Maintained</b> | <b>Met</b> |
| Program does not provide transportation.                                           |            |
| <b>EX-HS-.C(5) - Attendance Records Not Available, Complete, or Maintained</b>     | <b>Met</b> |
| Observed documentation of attendance records as required on this date.             |            |

## Exemptions

### EX-HS-.W Exemption Requirements

|                                                                                                             |            |
|-------------------------------------------------------------------------------------------------------------|------------|
| <b>EX-HS-.W(1) - Exemption Notice Not Posted</b>                                                            | <b>Met</b> |
| Observed exemption approval letter and notice to be posted in a prominent place at the program as required. |            |
| <b>EX-HS-.W(2) - No Parent Agreement</b>                                                                    | <b>Met</b> |
| Observed signed parent agreements notifying of program's exempt status.                                     |            |
| <b>EX-HS-.W(3) - Operating outside conditions</b>                                                           | <b>Met</b> |
| Program observed to be operating as approved.                                                               |            |

|                                                        |            |
|--------------------------------------------------------|------------|
| <b>EX-HS-.W(4) - Required Information Not Provided</b> | <b>Met</b> |
|--------------------------------------------------------|------------|

Discussed requirements with program on this date.

|                 |
|-----------------|
| <b>Facility</b> |
|-----------------|

**EX-HS-.B Bathrooms**

|                                                         |            |
|---------------------------------------------------------|------------|
| <b>EX-HS-.B(1) - Inadequate Number of Toilets/Sinks</b> | <b>Met</b> |
|---------------------------------------------------------|------------|

Adequate number of flush Flush toilets and hand washing sinks with running water observed.

|                                                           |            |
|-----------------------------------------------------------|------------|
| <b>EX-HS-.B(2) - No Bathroom On Floor/Child Care Area</b> | <b>Met</b> |
|-----------------------------------------------------------|------------|

Bathrooms located on each floor in or adjacent to child care areas and rooms.

|                                                                 |            |
|-----------------------------------------------------------------|------------|
| <b>EX-HS-.B(3) - School Age Program-Inadequate # Facilities</b> | <b>Met</b> |
|-----------------------------------------------------------------|------------|

Bathrooms for school age children observed adequate.

|                                                                                       |            |
|---------------------------------------------------------------------------------------|------------|
| <b>EX-HS-.B(4) - Bathroom Supplies Missing/Cloth Towels Reused Between Laundering</b> | <b>Met</b> |
|---------------------------------------------------------------------------------------|------------|

Observed access to bathroom supplies.

|                                                  |            |
|--------------------------------------------------|------------|
| <b>EX-HS-.B(5) - Bathrooms Not Cleaned Daily</b> | <b>Met</b> |
|--------------------------------------------------|------------|

Observed bathrooms cleaned and disinfected.

**EX-HS-.L Physical Plant(CS)**

|                                                                   |            |
|-------------------------------------------------------------------|------------|
| <b>EX-HS-.L(1) - No Approval for Construction/Work Accessible</b> | <b>Met</b> |
|-------------------------------------------------------------------|------------|

Discussed obtaining local approvals prior to construction.

|                                                            |            |
|------------------------------------------------------------|------------|
| <b>EX-HS-.L(4) - Clean, free of debris, free of repair</b> | <b>Met</b> |
|------------------------------------------------------------|------------|

The program appears clean and well maintained.

|                                                     |            |
|-----------------------------------------------------|------------|
| <b>EX-HS-.L(5) - Electrical Outlets not Covered</b> | <b>Met</b> |
|-----------------------------------------------------|------------|

Discussed to ensure that all electrical outlets are covered and inaccessible to children.

|                                                               |            |
|---------------------------------------------------------------|------------|
| <b>EX-HS-.L(6) - Heating and Cooling Equipment Accessible</b> | <b>Met</b> |
|---------------------------------------------------------------|------------|

Heating and cooling equipment observed inaccessible.

|                                            |            |
|--------------------------------------------|------------|
| <b>EX-HS-.L(7) - No Operable Telephone</b> | <b>Met</b> |
|--------------------------------------------|------------|

Please ensure that all required numbers are posted.

**EX-HS-.M Playgrounds(CS)**

|                                                                                     |            |
|-------------------------------------------------------------------------------------|------------|
| <b>EX-HS-.M(1) - Not Adequately Fenced/Enclosed/ Hazardous/Gate Not Closed (CS)</b> | <b>Met</b> |
|-------------------------------------------------------------------------------------|------------|

Discussed written supervision plan for playground requirements.

|                                                                                                    |            |
|----------------------------------------------------------------------------------------------------|------------|
| <b>EX-HS-.M(2) - Equipment -Lacks Variety/Age Appropriate/Obstructs Supervision/Hazardous (CS)</b> | <b>Met</b> |
|----------------------------------------------------------------------------------------------------|------------|

The program equipment, furniture, and materials was clean and free of hazards.

|                                                               |            |
|---------------------------------------------------------------|------------|
| <b>EX-HS-.M(3) - Inadequate Fall zones and surfacing (CS)</b> | <b>Met</b> |
|---------------------------------------------------------------|------------|

Resilient surfacing and fall zones observed to be adequate on this date.

|                                                               |            |
|---------------------------------------------------------------|------------|
| <b>EX-HS-.M(4) - Unclean/Litter/Hazards On Play Area (CS)</b> | <b>Met</b> |
|---------------------------------------------------------------|------------|

Playground was observed to be clean and free of hazards on this date.

## Health and Hygiene

### EX-HS-.U Diapering Areas & Practices(CS)

|                                                                         |                       |
|-------------------------------------------------------------------------|-----------------------|
| <b>EX-HS-.U(1) - No Hand Washing Sink Adjacent/Flush Sink Used (CS)</b> | <b>Not Applicable</b> |
|-------------------------------------------------------------------------|-----------------------|

Children enrolled in the program do not require diapering.

|                                                                                            |                       |
|--------------------------------------------------------------------------------------------|-----------------------|
| <b>EX-HS-.U(2) - Changing Surface Porous/No Guard or Rails/Not Smooth/Not Cleaned (CS)</b> | <b>Not Applicable</b> |
|--------------------------------------------------------------------------------------------|-----------------------|

Children enrolled in the program do not require diapering.

|                                                         |                       |
|---------------------------------------------------------|-----------------------|
| <b>EX-HS-.U(3) - Child Unattended on Diapering Area</b> | <b>Not Applicable</b> |
|---------------------------------------------------------|-----------------------|

Children enrolled in the program do not require diapering.

|                                                               |                       |
|---------------------------------------------------------------|-----------------------|
| <b>EX-HS-.U(4) - Diapering/Food Service In Same Area (CS)</b> | <b>Not Applicable</b> |
|---------------------------------------------------------------|-----------------------|

Children enrolled in the program do not require diapering.

|                                                |                       |
|------------------------------------------------|-----------------------|
| <b>EX-HS-.U(5) - Hazards Within Reach (CS)</b> | <b>Not Applicable</b> |
|------------------------------------------------|-----------------------|

Children enrolled in the program do not require diapering.

|                                                |                       |
|------------------------------------------------|-----------------------|
| <b>EX-HS-.U(6) - Soiled Diapers Accessible</b> | <b>Not Applicable</b> |
|------------------------------------------------|-----------------------|

Children enrolled in the program do not require diapering.

### EX-HS-.H Hygiene

|                                              |            |
|----------------------------------------------|------------|
| <b>EX-HS-.H(1) - Children-No Handwashing</b> | <b>Met</b> |
|----------------------------------------------|------------|

Discussed proper handwashing procedures with staff on this date.

|                                           |            |
|-------------------------------------------|------------|
| <b>EX-HS-.H(2) - Staff-No Handwashing</b> | <b>Met</b> |
|-------------------------------------------|------------|

Discussed proper handwashing procedures with staff on this date.

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**EX-HS-.I Medications(CS)**

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|                                                                                       |                       |
|---------------------------------------------------------------------------------------|-----------------------|
| <b>EX-HS-.I(1) - No/Incomplete Parental Authorization; Incorrectly Dispensed (CS)</b> | <b>Not Applicable</b> |
|---------------------------------------------------------------------------------------|-----------------------|

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The program does not dispense medication.

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|--------------------------------------------------------|-----------------------|
| <b>EX-HS-.I(2) - Incomplete Dispensing Record (CS)</b> | <b>Not Applicable</b> |
|--------------------------------------------------------|-----------------------|

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The program does not dispense medication.

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|                                                                              |                       |
|------------------------------------------------------------------------------|-----------------------|
| <b>EX-HS-.I(3) - Medication Accessible To Children/Not Refrigerated (CS)</b> | <b>Not Applicable</b> |
|------------------------------------------------------------------------------|-----------------------|

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The program does not dispense medication.

|                                |
|--------------------------------|
| <b>Policies and Procedures</b> |
|--------------------------------|

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**EX-HS-.J Operational Policies & Procedures**

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|                                                              |            |
|--------------------------------------------------------------|------------|
| <b>EX-HS-.J(1)(a-m) - Incomplete Policies and Procedures</b> | <b>Met</b> |
|--------------------------------------------------------------|------------|

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Observed evidence of complete written policies and procedures on this date.

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|                                                      |                             |
|------------------------------------------------------|-----------------------------|
| <b>EX-HS-.J(2) - Not Conducting Emergency Drills</b> | <b>Technical Assistance</b> |
|------------------------------------------------------|-----------------------------|

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Observed evidence of emergency drills on this date. Discussed conducting drills during after-school.

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|                                                        |            |
|--------------------------------------------------------|------------|
| <b>EX-HS-.J(3) - P &amp; P Not Provided To Parents</b> | <b>Met</b> |
|--------------------------------------------------------|------------|

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Parents are provided a copy of the program's policies and procedures as required.

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**EX-HS-.T Required Reporting**

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|-----------------------------------------------|------------|
| <b>EX-HS-.T(1) - Child Abuse Not Reported</b> | <b>Met</b> |
|-----------------------------------------------|------------|

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The program has not had any incidents that required reporting.

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|--------------------------------------------------------|------------|
| <b>EX-HS-.T(2) - Communicable Disease Not Reported</b> | <b>Met</b> |
|--------------------------------------------------------|------------|

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The program has not had any incidents that required reporting.

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|------------------------------------------------------------------|------------|
| <b>EX-HS-.T(3) - Serious Incident Not Reported To Department</b> | <b>Met</b> |
|------------------------------------------------------------------|------------|

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There were no incidents or injuries that required reporting.

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|-----------------------------------------------|------------|
| <b>EX-HS-.T(3)(a) - Records Not Available</b> | <b>Met</b> |
|-----------------------------------------------|------------|

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Records made available to the Department as required.

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|                                                   |            |
|---------------------------------------------------|------------|
| <b>EX-HS-.T(4) - Criminal Record Not Reported</b> | <b>Met</b> |
|---------------------------------------------------|------------|

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There were no changes in criminal record information that were required to be reported.

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| <b>Safety</b> |
|---------------|

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**EX-HS-.E Discipline(CS)****EX-HS-.E(1) - Discipline Detrimental (CS)****Met**

Appropriate disciplinary methods observed on this date.

**EX-HS-.E(2)(a-m) - Inappropriate Disciplinary Actions (CS)****Met**

Observed appropriate discipline on this date.

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**EX-HS-.S Field Trips****EX-HS-.S(1) - No/Incomplete Parental Permission****Not Applicable**

The program does not provide transportation.

**EX-HS-.S(2) - Participant List Not Complete/Taken****Not Applicable**

The program does not provide transportation.

**EX-HS-.S(3) - Emergency Med Info Forms Missing Info /Not At Program/Not On Trip****Not Applicable**

The program does not provide transportation.

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**EX-HS-.R Transportation(CS)****EX-HS-.R(1)(a) - No Annual Vehicle Safety Check****Not Applicable**

The program does not provide transportation.

**EX-HS-.R(1)(b) - Vehicle Interior Not Clean****Not Applicable**

The program does not provide transportation.

**EX-HS-.R(1)(c) - Child Passenger Restraints (CS)****Not Applicable**

The program does not provide transportation.

**EX-HS-.R(1)(d) - Vehicle Exceeds Seating Capacity****Not Applicable**

The program does not provide transportation.

**EX-HS-.R(1)(e) - Vehicle Seats Not Secured****Not Applicable**

The program does not provide transportation.

**EX-HS-.R(1)(f) - No Fire Extinguisher on Vehicle****Not Applicable**

The program does not provide transportation.

**EX-HS-.R(2) - Driver not 18 or no valid license****Not Applicable**

The program does not provide transportation.

|                                                                                                                         |                       |
|-------------------------------------------------------------------------------------------------------------------------|-----------------------|
| <b>EX-HS-.R(3) - Additional Staff Requirements (CS)</b>                                                                 | <b>Not Applicable</b> |
| The program does not provide transportation.                                                                            |                       |
| <b>EX-HS-.R(4)(a) - Staffing Requirements - more than 36 children &lt;5 years not met</b>                               | <b>Not Applicable</b> |
| The program does not provide transportation.                                                                            |                       |
| <b>EX-HS-.R(4)(b) - Staffing Requirements - more than 36 children &gt;5 years not met (CS)</b>                          | <b>Not Applicable</b> |
| The program does not provide transportation.                                                                            |                       |
| <b>EX-HS-.R(5) - No Parental authorization</b>                                                                          | <b>Not Applicable</b> |
| The program does not provide transportation.                                                                            |                       |
| <b>EX-HS-.R(6)(a) - No Program and Passenger Information (CS)</b>                                                       | <b>Not Applicable</b> |
| The program does not provide transportation.                                                                            |                       |
| <b>EX-HS-.R(6)(b) - No Emergency Medical Information (CS)</b>                                                           | <b>Not Applicable</b> |
| The program does not provide transportation.                                                                            |                       |
| <b>EX-HS-.R(6)(c) - Passenger Transportation Checklist not Department approved or None (CS)</b>                         | <b>Not Applicable</b> |
| The program does not provide transportation.                                                                            |                       |
| <b>EX-HS-.R(6)(c)1. - Transportation Checklist Names Not Included (CS)</b>                                              | <b>Not Applicable</b> |
| The program does not provide transportation.                                                                            |                       |
| <b>EX-HS-.R(6)(c)2. - Load/Unload Not Accounted For (CS)</b>                                                            | <b>Not Applicable</b> |
| The program does not provide transportation.                                                                            |                       |
| <b>EX-HS-.R(6)(c)3.(i-ii) - No Departure/Arrival Time (CS)</b>                                                          | <b>Not Applicable</b> |
| The program does not provide transportation.                                                                            |                       |
| <b>EX-HS-.R(6)(c)4.(i-ii) - Did Not Give Completed Transportation Checklist to Director or Director's Designee (CS)</b> | <b>Not Applicable</b> |
| The program does not provide transportation.                                                                            |                       |
| <b>EX-HS-.R(6)(c)5. - Transportation Checklist Not Maintained 3 Years</b>                                               | <b>Not Applicable</b> |
| The program does not provide transportation.                                                                            |                       |
| <b>EX-HS-.R(6)(c)6. - Not Checking the Vehicle as Required (CS)</b>                                                     | <b>Not Applicable</b> |

The program does not provide transportation.

|                                                                                         |                       |
|-----------------------------------------------------------------------------------------|-----------------------|
| <b>EX-HS-.R(6)(c)7.(i-iii) - No Responsible Person checked vehicle - 1st Check (CS)</b> | <b>Not Applicable</b> |
|-----------------------------------------------------------------------------------------|-----------------------|

The program does not provide transportation.

|                                                                                      |                       |
|--------------------------------------------------------------------------------------|-----------------------|
| <b>EX-HS-.R(6)(c)7.(iv) - No Responsible Person checked vehicle - 2nd Check (CS)</b> | <b>Not Applicable</b> |
|--------------------------------------------------------------------------------------|-----------------------|

The program does not provide transportation.

|                                                                                              |                       |
|----------------------------------------------------------------------------------------------|-----------------------|
| <b>EX-HS-.R(6)(c)7.(v) - No Documentation of Check When Second Person Not Available (CS)</b> | <b>Not Applicable</b> |
|----------------------------------------------------------------------------------------------|-----------------------|

The program does not provide transportation.

|                                                       |                       |
|-------------------------------------------------------|-----------------------|
| <b>EX-HS-.R(7) - Child Unattended on Vehicle (CS)</b> | <b>Not Applicable</b> |
|-------------------------------------------------------|-----------------------|

The program does not provide transportation.

|                                                            |                       |
|------------------------------------------------------------|-----------------------|
| <b>EX-HS-.R(9) - No Emergency Transportation Available</b> | <b>Not Applicable</b> |
|------------------------------------------------------------|-----------------------|

The program does not provide transportation.

## **Sleeping & Resting Equipment**

### **EX-HS-.V Safe Sleeping and Resting Requirements(CS)**

|                                                               |                       |
|---------------------------------------------------------------|-----------------------|
| <b>EX-HS-.V(1) - Crib does not meet safety standards (CS)</b> | <b>Not Applicable</b> |
|---------------------------------------------------------------|-----------------------|

No infants are enrolled in the program.

|                                                     |                       |
|-----------------------------------------------------|-----------------------|
| <b>EX-HS-.V(2) - Crib mattress not firm/2" (CS)</b> | <b>Not Applicable</b> |
|-----------------------------------------------------|-----------------------|

No infants are enrolled in the program.

|                                                                |                       |
|----------------------------------------------------------------|-----------------------|
| <b>EX-HS-.V(3) - Crib Sheet not tight-fitting/changed (CS)</b> | <b>Not Applicable</b> |
|----------------------------------------------------------------|-----------------------|

No infants are enrolled in the program.

|                                                      |                       |
|------------------------------------------------------|-----------------------|
| <b>EX-HS-.V(4) - Crib Construction not safe (CS)</b> | <b>Not Applicable</b> |
|------------------------------------------------------|-----------------------|

No infants are enrolled in the program.

|                                                                               |                       |
|-------------------------------------------------------------------------------|-----------------------|
| <b>EX-HS-.V(5) - Infant not placed on back to sleep / Swaddling used (CS)</b> | <b>Not Applicable</b> |
|-------------------------------------------------------------------------------|-----------------------|

No infants are enrolled in the program.

|                                               |                       |
|-----------------------------------------------|-----------------------|
| <b>EX-HS-.V(6) - Objects in/on Cribs (CS)</b> | <b>Not Applicable</b> |
|-----------------------------------------------|-----------------------|

No infants are enrolled in the program.

|                                                         |                       |
|---------------------------------------------------------|-----------------------|
| <b>EX-HS-.V(7) - Wedge/Positioning Device Used (CS)</b> | <b>Not Applicable</b> |
|---------------------------------------------------------|-----------------------|

No infants are enrolled in the program.

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**EX-HS-.V(8) - Infant Sleeping Not in Crib (CS)****Not Applicable**

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No infants are enrolled in the program.

|                      |
|----------------------|
| <b>Staff Records</b> |
|----------------------|

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**EX-HS-.D Criminal Records and Comprehensive Background Checks(CS)**

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**EX-HS-.D(1)(a)1. - No Application/ Fingerprints Submitted****Met**

Fingerprints and Criminal Records Check Application submitted as required.

**EX-HS-.D(10) - Recheck Not Obtained as Required****Met**

Program observed to obtain criminal record rechecks as required.

**EX-HS-.D(2) - Director/Employee No CRC (CS)****Met**

Observed evidence of satisfactory Comprehensive Records Check Determination letters on this date.

**EX-HS-.D(3)(a) - Provisional Employee No CRC (CS)****Met**

Program maintained evidence of satisfactory Fingerprint Records Check Determination letters on this date.

**EX-HS-.D(4) - Person with Unsat Present (CS)****Met**

All staff on premises have satisfactory records check determinations.

**EX-HS-.D(5) - Valid Evidence Fingerprint Check Not Maintained****Met**

Valid evidence of fingerprint checks maintained on file and observed this date.

**EX-HS-.D(6) - Valid Evidence Comprehensive Check Not Maintained****Met**

Valid evidence of comprehensive checks maintained on file and observed this date.

**EX-HS-.D(7) - Failure to Request Out of State Information****Met**

Program observed to obtain records checks as required and documentation of records checks observed on file this date.

**EX-HS-.D(8) - Employee - Satisfactory Comprehensive Records Check Determination  
Not Ported****Met**

Program ported staff Comprehensive Records Checks as required.

**EX-HS-.D(9) - Student-in-Training Records Check Not Ported****Not Applicable**

No students in training on this date.

**EX-HS-.G(1)(a-b) - CPR/First Aid Training Not Obtained****Not Met**

EX-HS.G(1)(a-b) requires (a) 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 program's premises. The hours obtained completing this certification will not count towards the required annual training hours; (b) 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 records that the program could not provide evidence of Pediatric CPR and First Aid for the staff members on this date. Hire dates were unavailable on this date.

**POI (Plan of Improvement)**

The program will ensure all staff that provide direct care to children obtain appropriate pediatric CPR and pediatric first aid training within the first 45 days of employment and maintain documentation of such training on file at the program. The program will develop a plan for reviewing staff training credentials for expiration and recertification. All files including staff files will be reviewed during the follow up visit.

**Correction Deadline:** 9/23/2026**EX-HS-.G(2)(a) - Staffing Requirements - 50% Not Certified in FA/CPR****Not Met**

EX-HS.G(2)(a) requires when any child is present on the premises, at least fifty percent (50%) of the caregiver staff present shall be trained in pediatric cardiopulmonary resuscitation (CPR) and pediatric first aid. It was determined based on a review of records that the program could not provide evidence of Pediatric CPR and First Aid for the staff members on this date. Hire dates were unavailable on this date.

**POI (Plan of Improvement)**

The program will have additional staff trained and ensure that at least (50%) of staff are trained in pediatric cardiopulmonary resuscitation (CPR) and pediatric first aid at all times. All files including staff files will be reviewed during the follow up visit.

**Correction Deadline:** 9/23/2026**EX-HS-.G(2)(a-d) - Staff certification****Not Met**

EX-HS.G(2)(a-d), requires (a) when any child is present on the premises, at least fifty percent (50%) of the caregiver staff present shall be trained in pediatric cardiopulmonary resuscitation (CPR) and pediatric first aid. (b) 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. (c) During any field trip or transportation of children, there must always be a staff member present who has current evidence of the successful completion of pediatric cardiopulmonary resuscitation (CPR) and pediatric first aid. (d) the Program Director must have current evidence of successful completion of pediatric cardiopulmonary resuscitation (CPR) and pediatric first aid at all times. It was determined based on a review of records that the program could not provide evidence of Pediatric CPR and First Aid for the staff members on this date. Hire dates were unavailable on this date.

**POI (Plan of Improvement)**

The Program will ensure that at least (50%) of staff are trained in pediatric cardiopulmonary resuscitation (CPR) and pediatric first aid. The Program will ensure that during any field trip or transportation of children, there must always be a staff member who is present with current evidence of pediatric cardiopulmonary resuscitation (CPR) and pediatric first aid. All files including staff files will be reviewed during the follow up visit.

**Correction Deadline:** 9/23/2026**EX-HS-.G(2)(b) - Staffing Requirements - No one in classroom FA/CPR trained (CS)****Not Met**

EX-HS-.G(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 program could not provide evidence of Pediatric CPR and First Aid for the staff members on this date. Hire dates were unavailable on this date.

**POI (Plan of Improvement)**

The program will ensure that at least one person in each classroom has current and valid evidence of pediatric CPR and first aid training. All files including staff files will be reviewed during the follow up visit.

**Correction Deadline:** 9/23/2026**EX-HS-.G(2)(c) - Staffing Requirements - No Person FA/CPR Trained for Transportation/Field Trip****Not Applicable**

The program does not provide transportation.

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| <b>EX-HS-.G(2)(d) - Staffing Requirements - Director Not Trained FA/CPR</b> | <b>Not Met</b> |
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EX-HS-.G(2)(d) requires the program Director to have current evidence of successful completion of pediatric cardiopulmonary resuscitation (CPR) and pediatric first aid at all times. It was determined based on a review of records that the program could not provide evidence of Pediatric CPR and First Aid for the staff members on this date. Hire dates were unavailable on this date.

**POI (Plan of Improvement)**

The program will ensure that the Director has current evidence of pediatric CPR and first aid training at all times. All files including staff files will be reviewed during the follow up visit.

**Correction Deadline:** 9/23/2026

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| <b>EX-HS-.G(3) - Missing First Aid Supplies</b> | <b>Met</b> |
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Discussed first aid kit requirements with program on this date.

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**EX-HS-.K Personnel Records**

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| <b>EX-HS-.K(1)(a-c) - Personnel Records Not Complete</b> | <b>Met</b> |
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Discussed to ensure that all personnel files are complete and maintained.

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**EX-HS-.N Staff Requirements(CS)**

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| <b>EX-HS-.N(1) - No Program Director/Person in Charge</b> | <b>Met</b> |
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Observed a director or person responsible for overall supervision of the program present on this date.

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| <b>EX-HS-.N(2) - Not Compliant with Applicable Laws (CS)</b> | <b>Met</b> |
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Program observed to be in compliance with all applicable laws and regulations.

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| <b>EX-HS-.N(3) - Not Able to Adequately Perform Job Duties</b> | <b>Met</b> |
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Staff were observed to be able to provide adequate care and supervision to children in accordance with standards on this date.

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**EX-HS-.P Staff Training**

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| <b>EX-HS-.P(1) - Employee Orientation-None</b> | <b>Not Met</b> |
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EX-HS.P(1) requires prior to assignment to children or task, all Employees (i.e., volunteers, students-in-training, independent contractors, etc.) and Provisional Employees must receive initial program orientation. It was determined based on a review of records that the program could not provide evidence of Initial Orientation as required. Hire dates were not available on this date.

**POI (Plan of Improvement)**

The Program will develop and provide orientation for all new Staff prior to their assignment to children or task. All files including staff files will be reviewed during the follow up visit.

**Correction Deadline:** 9/23/2026

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| <b>EX-HS-.P(2)(a-n) - Employee Orientation-Incomplete</b> | <b>Not Met</b> |
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EX-HS-.P(2)(a-n) requires the initial program orientation to include the following subjects: (a) the program's policies and procedures; (b) the portions of these standards 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; and (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 the program could not provide evidence of Initial Orientation as required. Hire dates were unavailable on this date.

#### **POI (Plan of Improvement)**

The program will provide orientation in all missing subjects to staff and will take steps to provide a complete orientation to new staff person's in the future. All files including staff files will be reviewed at the follow up visit.

**Correction Deadline:** 9/23/2026

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#### **EX-HS-.P(3)(a-k) - Staff Health/Safety Training-none/not timely/incomplete**

**Not Met**

EX-HS-.P(3)(a-k) requires each staff person 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 (if applicable);
- (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 the program could not provide evidence of Health and Safety Orientation as required. Hire dates were unavailable on this date.

#### **POI (Plan of Improvement)**

The program will develop and implement a plan to schedule and track Health and Safety orientation training for all staff based on their hire dates. All files including staff files will be reviewed at the follow up visit.

**Correction Deadline:** 9/23/2026

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#### **EX-HS-.P(4)(a)-(b)1.-3. - Annual Ongoing Training - Incomplete**

**Not Met**

EX-HS-.P(4)(a)-(b)1.-3. requires (a) Every calendar year after the first year of employment, the Director, Provisional Employees and Employees 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.

(b) The annual ten (10) clock hours of training shall include the following:

1. At least two (2) hours in evidence based, developmentally appropriate language and literacy practices;
2. At least two (2) hours in on-going child development and health and safety related topics, which could include, but not be limited to:
  - (i) Child development (e.g., developmental domains (cognitive; social and emotional; physical development and motor skills; communication, language, and literacy; approaches to play and learning), discipline and guidance techniques, children with special needs);
  - (ii) Health (e.g., nutrition and the support of breast feeding, physical activity, prevention and control of illnesses and infectious diseases, immunizations, prevention of and response to emergencies due to food and allergic reactions, cleanliness, sanitation, and the appropriate disposal of bio contaminants);
  - (iii) Safety (e.g., prevention of Sudden Unexpected Infant Death (SUID) which includes Sudden Infant Death Syndrome (SIDS) and the use of safe sleeping practices, medication administration, injury control and prevention, transportation, handling and storage of hazardous materials, identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic, and emergency preparedness planning and response);
  - (iv) Child abuse and neglect (e.g., identification and reporting, meeting the needs of abused and/or neglected children, prevention of shaken baby syndrome, abusive head trauma and child maltreatment).
3. No more than two (2) of the required ten (10) hours in business-related topics (e.g., parental communication, recordkeeping, management, business planning). It was determined based on a review of records that the program could not provide evidence of annual training as required. Hire dates were unavailable on this date.

**POI (Plan of Improvement)**

The program will plan and schedule the required 10 hours of annual training each year and follow up to ensure the training is completed. All files including staff files will be reviewed during the follow up visit.

**Correction Deadline:** 9/23/2026

**EX-HS-.P(5) - Documentation of Training****Not Met**

EX-HS-.P(5) requires evidence of orientation and training to be documented and maintained in the Personnel file and/or Georgia's workforce registry and professional development system of each staff member which shall be available to the Department for inspection. Documentation shall include the title of the training courses, the dates, and the number of hours of the courses, and the names of the trainers or sponsoring organizations. It was determined based on a review of records that staff could not provide evidence of completion of the required trainings. Hire dates were unavailable on this date.

**POI (Plan of Improvement)**

The program will ensure documentation of training is on file for review. All files including staff files will be reviewed during the follow up visit.

**Correction Deadline:** 9/23/2026

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| <b>Staffing and Supervision</b> |
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**EX-HS-.O Staff:Child Ratios and Supervision(CS)****EX-HS-.O(1) - Inadequate Ratios/Maximum Group Size Exceeded (CS)****Met**

Appropriate staff child ratios observed on this date.

**EX-HS-.O(2) - Inadequate Ratio-Mixed Age Grouping (CS)****Met**

Ratios maintained in mixed age groups on this date.

**EX-HS-.O(3) - Lack Of Supervision (CS)****Met**

Adequate supervision observed on this date.