



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Facility Inspection

County	<u>Osage</u>	Date	<u>01-13-20</u>
Facility Name	<u>Osage Upper Elem</u>	License Number	<u>7370</u>
Purpose	<u>Mid-year</u>	Capacity	<u>120</u>

All Items In Red Are Critical

	In	Out	COS	N/A
Qualified director present	☒	☐	☐	☐
Proper staff to child ratio present	☒	☐	☐	☐
Room and playground capacity met	☒	☐	☐	☐
Center capacity met	☒	☐	☐	☐
License/complaint visible	☐	☒	☐	☐
Certified food manager	☐	☐	☐	☒

Sanitation Approved

Garbage and garbage bins maintained	☒	☐	☐	☐
Vector control maintained	☒	☐	☐	☐
Water system approved and functioning	☒	☐	☐	☐
Waste water system approved and functioning	☒	☐	☐	☐
Food service approved	☒	☐	☐	☐

Possible Monetary Penalty

	Monetary Penalty
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____

	Age/Child/Staff Name
1.	<u>8-13 year old / 56 / Caregivers</u>
2.	<u>1-5</u>
3.	
4.	
5.	
6.	
7.	

Other Items - Must be corrected

	In	Out	COS	N/A
Children's belongings separated/stored	☒	☐	☐	☐
Evacuation plans posted	☐	☒	☐	☐
Menus posted and served	☐	☒	☐	☐
Plan of activities	☐	☒	☐	☐

Building and Grounds

Walls, ceilings, floors, toys, equipment clean and in good repair	☒	☐	☐	☐
Lighting approved	☒	☐	☐	☐
Heating/cooling approved	☒	☐	☐	☐
Ventilation adequate	☒	☐	☐	☐
Glass approved and shielded	☒	☐	☐	☐
Telephone on premises, available, and functioning	☒	☐	☐	☐
Electrical outlets protected	☒	☐	☐	☐
Large appliances located properly	☒	☐	☐	☐
Sinks and toilets working properly	☒	☐	☐	☐
Hot water at all sinks, not to exceed 120°	☒	☐	☐	☐
Children barred from kitchen	☒	☐	☐	☐
Vending machine snacks meet nutritional guidelines, if present	☐	☐	☐	☒
Exits, doors and fastening devices single action approved and in good working order	☒	☐	☐	☐
Exits unobstructed	☒	☐	☐	☐
Required smoke detectors, carbon monoxide monitors, fire extinguishers and thermometers placed properly and in good working order	☒	☐	☐	☐
First aid kits stocked and easily accessible	☒	☐	☐	☐
Playground area clean, shaded, well drained and equipped and fence in good repair	☒	☐	☐	☐
Playground equipment meets standards	☒	☐	☐	☐
Pool area clean, fenced, and adequately maintained	☐	☐	☐	☒
Diaper changing stations adequate in number and each fully supplied (number _____)	☐	☐	☐	☐

Center Director/Individual

Child Care Representative

White Copy - Facility File

Yellow Copy - Facility Operator

Mississippi State Department of Health

12-10-08

Form No. 281



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District II Date 01-13-20

Name Ima Lafayette Upper Elem License No. 7370

Address 120 Commodore Drive Oxford, MS 38655
Center/Organization/Individual

Purpose mid-year Director _____

Mileage Start _____ Mileage End _____

County Lafayette Telephone No. 662-371-1500

Time In 3:07 Time Out 4:07 Total Time _____

Findings/Comments Here to conduct a mid-year inspection.

Upon arrival the licensing official met with:
Mr. Franklin.
The following were in compliance on today's visit.
Current CPR & First Aid
Current DOS for Staff
Current MSDH 101 Form
Providing technical assistance on the following:
Subchapter 4 Policies & Procedures: Rule 1.4.6.1 Rule
a. License
b. Daily activity schedule posted in each classroom
c. menus and Food Service Permit, if applicable
d. evacuation route.
e. The facility operator shall also post next to the
license in plain view a notice provided by MSDH
that informs the public of where and how
they may report a complaint

Findings: Facility failed to have posting
in Cafeteria.

Subchapter 6
Rule 1.6.3(8) states in part, Each facility shall
maintain a notebook containing copies
of MSDH Certificate of Immunization

Class I and II violations may result in a monetary penalty repeated violations may result in a doubling of a monetary penalty, suspension or revocation of the license.

Charlotte Franklin
Center Director/Designee/Individual

Kimika Thatcher
Child Care Representative

White Copy - Facility File
Yellow Copy - Operator



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter (Continuation)

Date 01-13-20

Facility Name

II Union Lafayette Upper

License No.

7376

~~Compliance (MSD4121 Form) for both stages Union Children at the facility 2 stages lack current MSDH 121 form~~
 What measures as a facility will be put into place to correct the immediate violation and how will you prevent recurrence of the violation? Mr. Franklin states that he would check for posting weekly to assure posting are present.

② Who will be responsible for monitoring to prevent recurrence of violation? Mr. Franklin

③ What is the date of expected completion for compliance? 01-16-20

Fire Form 333 is still due on today's inspection. CHF

[Signature]
Center Director/Designee/Individual

Tamara Pratcher
Child Care Representative

White Copy - Facility File
Yellow Copy - Operator