



## MISSISSIPPI STATE DEPARTMENT OF HEALTH

# Child Care Facility Inspection Report

ALPHABEST- RIVER OAKS

License #: 6762

Director: CHERRI SEYMOUR

Inspection Date: 08/17/2022

Annual/Mid Inspection

Inspector: Linnie Gray

### Program Administration Violations Cited

1. **Out of Compliance:** Facility has a qualified Director or Director Designee onsite. (Rule 1.5.3 Page 22)
2. **Out of Compliance:** At least one staff member with valid CPR/First Aid certification is onsite. (Rule 1.8.1 Page 38)
3. **Out of Compliance:** All required facility records are present and up-to-date: (1) child and employee attendance records, (2) alphabetical roster of children, (3) alphabetical roster of staff and volunteers, (4) current license, (5) records of monthly fire /disaster drills, (6) medication log, (7) volunteer log, (8) notebook of 121 forms for staff members and children w/roster, (9) notebook with Letters of Suitability for all employees w/roster. (Rule 1.6.3 Page 29)

### Plan of Correction

1. **POC:** -app and fee -contact hours -fire form 333 -2 menu's  
**Person Responsible:** Nicole White **Date for Completion:** For Renewal
2. **POC:** Based on observation while touring the facility, the facility failed to have a qualified director or director designee on site during the time of inspection. The after school program starts at 3:00 PM and the qualified director for this facility do not come in until 3:45 PM. I spoke with Mrs Nicole White via phone and she stated that she will have a qualified director or director designee on-site by 3:00 PM at all times. Director will review (Rule 1. 5. 3 Page 22)  
**Person Responsible:** Nicole White **Date for Completion:** Immediately
3. **POC:** Based on observation during records review, the facility failed to have an alphabetical roster for the children. Mrs. Nicole states she will get an alphabetical roster put in the binder for the children. Director will review (Rule 1.6.3 Page 29)  
**Person Responsible:** Nicole White **Date for Completion:** Immediately
4. **POC:** Based on observation during records review, the facility failed to have a staff member with a valid CPR/First AID Certification on site during the time of inspection. The after school program starts at 3:00 PM and the staff member with the valid CPR/First AID Certification for this facility do not come in until 3:45 PM. I spoke with Mrs Nicole White via phone and she stated that she will have a staff member with a valid CPR/First Aid certification on-site by 3:00 PM at all times. Director will review (Rule 1. 8. 1 Page38)  
**Person Responsible:** Nicole White **Date for Completion:** Immediately

### Kitchen Violations Cited

No violations cited.

## Nutritional Guidelines Violations Cited

No violations cited.

## Playground Violations Cited

No violations cited.

## School Age Room Violations Cited

School Age - Classroom Number: 1

1. **Out of Compliance:** Daily schedule is posted in classroom. (Rule 1.4.6(b) Page 18)
2. **Out of Compliance:** Menu is posted in classroom. (Rule 1.4.6(c) Page 18)

School Age Room - Classroom Number: 1

### Legend

- COS: Corrected on Site
- POC: Plan of Correction

## Child Care Director Signature

A handwritten signature in black ink that reads "Sharmel". The signature is written in a cursive style with a horizontal line above the letters.

## MSDH Licensure Representative Signature

A handwritten signature in black ink that reads "Limmie Gray". The signature is written in a cursive style with the first name "Limmie" on the top line and the last name "Gray" on the bottom line.

