

# **Child Care Facility Inspection Report**

NOXUBEE COUNTY HEAD START CENTER

Director: LORETTA WILLIAMS

License #: 2709

**Program Administration Violations Cited** 

Inspection Date: 08/31/2022

Annual/Mid Inspection

Inspector: Paulette Elliott

- 1. Out of Compliance: Current menu is posted. (Rule 1.4.6(C) Page 18)
- 2. Out of Compliance: Valid, up-to-date fire inspection form (#333) is on file. (Rule 1.2.5 Page 10)
- 3. Out of Compliance: All staff members have a valid Letter of Suitability on file. (Rule 1.5.2 Page 21)
- 4. **Out of Compliance:** All staff members have mandatory 15 contact hours on file (no more than five hours of in-house training may be provided by the child care facility. Acceptable topics for training may include: (a) health and safety, (b) child growth and development, (c) nutrition, (d) planning learning activities, (e) discipline, (f) linkages with community services, (g) communications with families, (h) detection of child abuse, (i) advocacy for early childhood programs, (j) professional issues. (Rule 1.5.8 Page 25)
- 5. **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:** Based on review of the facility records, the Two-Week Cycle of Menus Form 444, was completed prior to the renewal inspection. Person responsible for maintaining compliance will be Mrs. Loretta Williams, Director. Compliance due for completion by 09/30/2022.
  - **Person Responsible:** Loretta Williams **Date for Completion:** Due By 09/30/2022
- 2. **POC:** Based on review of the facility records, the Fire Survey Form 333, was completed prior to the renewal inspection. Person responsible for maintaining compliance will be Mrs. Loretta Williams, Director. Compliance due for completion by 09/30/2022.
  - **Person Responsible:** Loretta Williams **Date for Completion:** Due By 09/302022
- 3. **POC:** Based on observation during records review, the facility failed to conduct the required criminal history records check, etc. on two (2) employees every five years. (2 X \$50.00) Caregiver # 3 in classroom # 1, and caregiver # 8 in classroom # 4, did not have a current Letter of Suitability on file at the facility. The director confirmed neither employee was processed for new letters of suitability. Both caregivers left the facility at 11:20 am, for fingerprinting. The provider and caregiver were informed the caregiver could not return to the facility without a current Letter of Suitability. The provider will submit the required documentation to the Fingerprint Unit immediately. The provider will submit the Letter of Suitability to the

licensing official before the caregiver returns to the facility. Both classrooms maintained compliance additional staff on-site assisted in the two separate classrooms. Person responsible for maintaining compliance on record deficiencies is Mrs. Loretta Williams, director. This violation was corrected on site by the employee leaving the facility.

**Person Responsible:** Loretta Williams **Date for Completion:** Immediately

4. **POC:** Based on review of the facility records, the licensing official observed staff in need of contact hours for the current licensure year. Person responsible for maintaining compliance will be Mrs. Loretta Williams, Director. Compliance due for completion by 10/31/2022.

**Person Responsible:** Loretta Williams **Date for Completion:** Due By 10/31/2022

5. **POC:** Base on observations and review of staff and children records, the facility failed to assure that they had a current MSDH 121 on each employee and child. Record review revealed two (2) employee records lacked a MSDH 121 form. Person responsible for maintaining compliance on record deficiencies is Mrs. Loretta Williams, Director. Compliance due for completion by 09/14/2022. (14 days)

**Person Responsible:** Loretta Williams **Date for Completion:** Due By 09/14/2022

## **Kitchen Violations Cited**

No violations cited.

### **Nutritional Guidelines Violations Cited**

No violations cited.

# **Playground Violations Cited**

No violations cited.

### **Infant Classroom Violations Cited**

<u>UNIT 2-EHS 1 - Classroom Number: 2</u>

No violations cited.

<u>Infant Classroom - Classroom Number: 2</u>

<u>UNIT 1-EHS 2 - Classroom Number: 1</u>

No violations cited.

<u>Infant Classroom - Classroom Number: 1</u>

<u>UNIT 3- EHS 3 - Classroom Number: 3</u>

No violations cited.

<u>Infant Classroom - Classroom Number: 3</u>

#### **Preschool Classroom Violations Cited**

<u>UNIT 4- A - Classroom Number: 4</u>

No violations cited.

Preschool Classroom - Classroom Number: 4

<u>UNIT 6- B - Classroom Number: 6</u> No violations cited.

Preschool Classroom - Classroom Number: 6

<u>UNIT 8- C - Classroom Number: 8</u> No violations cited.

Preschool Classroom - Classroom Number: 8

<u>UNIT 7- D - Classroom Number: 7</u>

No violations cited.

Preschool Classroom - Classroom Number: 7

<u>UNIT 9- E - Classroom Number: 9</u> No violations cited.

Preschool Classroom - Classroom Number: 9

### Legend

COS: Corrected on SitePOC: Plan of Correction

# **Child Care Director Signature**

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**MSDH Licensure Representative Signature**