



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District IIDate 12-17-21

Name	<u>Mini Miracles</u>	License No.	<u>6699</u>
Address	<u>399 Milford St. Tupelo, MS 38801</u>		
Purpose	<u>Follow up/Renewal/TA</u>	Director	<u>Eunisha Price</u>
Mileage Start		Mileage End	
County	<u>Lee</u>	Telephone No.	<u>662-844-0450</u>
Time In	<u>9:17</u>	Time Out	<u>11:49</u>
		Total Time	

Findings/Comments Here for a follow up/renewal/technical assistance inspection.

BDD and CCFI met with the owner/director upon arrival.

- Kitchen rec'd an A, NO Critical violations
- Staff and Children records were in compliance
- Staff LOS's in compliance
- Staff-to-Child ratio in compliance

Subchapter 11: Building and Grounds

Deficiency: Rule 1.11.9 (8) The ceiling, floor and/or floor covering shall be properly installed, kept clean and in good condition.

Findings: Based on observations the licensing observed ceiling tiles that will need to be replaced due to water damage in room 2 in the corner.

PoC: The director will have until Jan. 17th to repair ceiling tiles in Room 2. She will be responsible for correcting the deficiency. A Follow up will be conducted. To prevent from future reoccurrences the facility will have all repairs completed in a timely manner to assure compliance.

X [Signature]

Eunisha Price
Center Director/Designee/Individual

Gang Matt
Child Care Representative
Kimberly Clark

White Copy - Facility File
Yellow Copy - Operator



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter (Continuation)

Date 12-17-21

Facility Name Mini Miracles

License No. 6699

Deficiency Rule 1.11.1(12) Walls shall be kept clean and free of torn wall covering, chipped paint, broken plaster, and holes.

Findings: Based on observations while touring the building, the licensing observed trimming on door that will need to be repaired in Rm 3. Also Holes in wall in Room 2 corner and door knob hole in Rm 1 that will need to be repaired as well.

POC

The director/owner Eunisha will have all holes and door trimming repaired within the next 30 days. She will be responsible for assuring it gets completed by the requested due date. To prevent from future reoccurrence the repairs needing to be made will be completed in a timely manner to assure MSDH Compliance. X Eunisha Price

* Repairs made by Jan. 17th

Deficiency: Rule 1.11.1(2) All child care facility buildings shall meet all fire safety standards listed on MSDH Form #333.

Findings: Based on observations made while touring the facility, the licensing observed smoke detector beeping in Room 3.

POC:

The director will replace batteries and assure it is working properly meeting fire code standards. The licensing will conduct a follow within 30 days to assure compliance. The director will be responsible for ensuring all repairs required are made. X Eunisha Price

Eunisha Price
Center Director/Designee/Individual

Sarah Pratt
Child Care Representative
Kimberly Clark

White Copy - Facility File
Yellow Copy - Operator



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter (Continuation)

Date 12-17-21

Facility Name Mini Miracles

License No. 6099

Subchapter 6: Records

Deficiency: Rule 1.6.3(8) states in part, "MSDH Form #121 for both staff and children at the facility"

Findings: Based on observation while reviewing records, two children and 1 employee's MSDH Form #121 are not up-to-date or not complete.

Plan of Corrections:

The owner/director will request an updated MSDH Form #121 from each person and submit to the CCFI by December 30, 2021.

A staff member will review and check children/staff MSDH Form #121 monthly to ensure all MSDH Form #121 are up-to-date.

Subchapter 11: Buildings and Grounds

Deficiency: Rule 1.11.9 Outdoor Playground Area, "All licensed Child Care facilities are required to have an adequate outdoor playground area."

Findings: Based on observations made while touring the building, the licensing observed tree limbs that will need to be cut to at least 7ft.

POC: The director will be responsible for cutting tree limbs to 7ft. She will have tree limbs cut within next 30 days by Dec-Jan. 17th. A Follow Up will be conducted to assure compliance. X *EP*

T.A. Was provided on Rule 1.11.8(9) Thermometers that do not present a hazard and placed at child's height. Broken thermometer was observed and new one was placed on wall. This deficiency was corrected on site. X *EP*

Eunisha Price
Center Director/Designee/Individual

Kimberly Clark
Child Care Representative

White Copy - Facility File
Yellow Copy - Operator



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter (Continuation)

Date 12-17-21

Facility Name Mini Miracles

License No. 6696

Subchapter 7: Reports

Deficiency: Rule 47.1 states in part, "Oral reports and/or emailed/faxed reports shall be confirmed in writing and mailed within two days of the occurrence."

Findings: Based on information, an incident occurred on December 13, 2021 and the provider did not report the incident to the Child Care Licensure Division within 2 days of occurrence.

Plan of Correction

Provider will report all serious occurrences involving children to the Child Care Licensure Division within 2 days of occurrence. First step will be a phone call and second step will be written. Report as soon as possible. CP Email will be the best way of contact if the CCFI cannot be contacted verbally.

Theresa Price
Center Director/Designee/Individual

Kimberly Clark
Child Care Representative
Gary Pratt

White Copy - Facility File
Yellow Copy - Operator

Food Service Facility Inspection Results

PIMS ID 6699	Facility Name, Address Mini Miracles 399 Milford St. Tupelo, MS 38801	Date 12-17-21
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CRITICAL VIOLATIONS

CORRECTION PLAN AND SCHEDULE

<p>- NO Critical violations on today's visit.</p> <p>"A"</p> <p>Pass</p>	
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<input type="checkbox"/> 92020 Scheduled <input type="checkbox"/> 92030 Followup <input type="checkbox"/> 92040 Complaint <input type="checkbox"/> 92050 Consultation <input type="checkbox"/> 92070 Plan Review/Const. <input type="checkbox"/> 92080 No Inspection <input type="checkbox"/> 92090 Restaurant Training	<input checked="" type="checkbox"/> 92010 Permit No Charge <input type="checkbox"/> 92015 Permit 1 \$30.00 <input type="checkbox"/> 92011 Permit 2 \$100.00 <input type="checkbox"/> 92012 Permit 3 \$150.00 <input type="checkbox"/> 92013 Permit 4 \$200.00
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Permit Date	Environmental Code SP2
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Please Remit within 10 days to:

E. Price
 Certified Manager
Tummy Safe

6699
 Licence Number

Facility Signature <i>Eunisha Price</i>
Environmental Signature <i>Kimberly Clark</i>

White Copy - Facility
 Yellow Copy - PIMS
 Pink Copy - Environmentalist



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Program Review

 Facility Name Mini Miracles License No. 6699 Date 12-17-21

- | | Yes | No | N/A | |
|-----|-------------------------------------|-------------------------------------|-------------------------------------|--|
| 1. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policies and procedures (Parent's Handbook) {Rule 1.4.1} |
| 2. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proof of Accident/Liability Insurance or documentation that parent has been notified that no insurance is in effect {Rule 1.4.1 (i) & (j)} |
| 3. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Approved arrival and departure procedures {Rule 1.4.1 (2)} |
| 4. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Letter of suitability for staff {Rule 1.5.2 & Rule 1.6.4 (1) (f)} |
| 5. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Attendance records for children and staff {Rule 1.6.3 (1)} |
| 6. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Current alphabetical roster of children (includes date of birth) {Rule 1.6.3 (2)} |
| 7. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Current staff roster (includes date of birth & date of hire) {Rule 1.6.3 (3)} |
| 8. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Monthly records of fire/disaster drills {Rule 1.6.3 (5)} |
| 9. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Medication record with date, time, signature for 90 days {Rule 1.6.3 (6)} |
| 10. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Immunization Records for <u>Children and Staff</u> {Rule 1.6.3 (8)} |
| 11. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Personnel records (attach employee's records form) {Rule 1.6.4} |
| 12. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Volunteer records {Rule 1.6.5 & Rule 1.6.6} |
| 13. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Children records (attach children's records form) {Rule 1.6.7} |
| 14. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Reports of serious occurrences made as required {Rule 1.7.1} |
| 15. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Communicable diseases reported as required {Rule 1.7.3} |
| 16. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Daily written reports provided to parents for infants and toddlers {Rule 1.7.4} |
| 17. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff present who hold valid CPR and First Aid Certification {Rule 1.8.1 (4) & (5)} |
| 18. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Age appropriate program of activities posted in each room {Subchapter 9} |
| 19. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Required toys present in infant room {Rule 1.10.1 (2)} |
| 20. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Required toys present in toddler room {Rule 1.10.1 (3)} |
| 21. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Required toys present preschool room {Rule 1.10.1 (4)} |
| 22. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Licensed pest control contractor {Rule 1.11.14} |
| 23. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Pets present (proof of immunization as required, signed by veterinarian) {Rule 1.12.6} |
| 24. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Appropriate discipline policy followed {Subchapter 14} |
| 25. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Appropriate transportation policy followed {Subchapter 15} |
| 26. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Infant feeding schedules posted (Appendix C, VII) |

 Comments/Recommendations _____

- ☐ Pass –
 License to be issued: ☐ Regular ☐ Probational ☐ Restricted

☐ Fail

☒ Follow-up within 30 days

☐ Director ☐ Designee

Funisha Price
Kimberly Clark
 Child Care Representative

Child Care Licensure Playground Checklist

Center Name Mini Miracles

Inspection Date 12-17-21

- | YES | NO | N/A | |
|-------------------------------------|-------------------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Playground fence less than 3 1/2" from surface. (Rule 1.11.9 (8), pg 48) In good repair, with no gaps? (Rule 1.11.9 (8), pg 48) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. 2 entrances/exits, with one being remote from the building? (Rule 1.11.9 (8), pg 48) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 3. Is surfacing adequate? If not, where is it inadequate? (CPSC, 2.4.2, pg8) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. AC units, high-voltage cabling/wires inaccessible? (Rule 1.11.9 (5), pg 47) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. No standing water present on playground or in/on playground equipment or walkways? (CPSC 2.4.2.2-5, pg 10) * Due to rain water was observed |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Toys & equipment in good repair? (none broken/deteriorating) (Rule 1.10.2 (2), pg 36) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Sidewalks provide smooth walking surface? (no trip hazards) (CPSC 3.6, pg 15) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. All bolts on equipment & fence <2 threads beyond the nut? Are all bolts and fencing twists/wires facing away from the playground area? (Rule 1.11.9 (5), pg 47) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 9. Tree limbs at least 7ft. above play surfaces? Is fence free of brush/overgrowth? (CPSC 3.4, 3.5, pg 15) Tree limbs must be cut to at least 7ft. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 10. Are use zones adequate? If not, where are they inadequate? (CPSC 5.3.9, pg 40) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 11. If swings are present, are S-hooks in good repair? If not, state deficiency
_____ (CPSC 3.2, pg13) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 12. If slide is present, is exit height/exit zone adequate? If not, state deficiency
_____ (CPSC 5.3.6.4-5 pgs 34-35) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 13. Are spring rockers a minimum of 6 ft. apart? (ASTM 9.5.1.2, pg 15) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 14. Is age-appropriate equipment being used? If not, state which pieces are inappropriate
_____ (Rule 1.10.2, pg 36) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 15. Is playground area clean & free of hazards? If not, state deficiency.
_____ (Rule 1.11.11 (1), pg 49) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 16. Is adequate shade present on the playground? (CPSC 2.1.1, pg 5) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 17. Are concrete footings located at least 6" beneath the surface? (Rule 1.10.2 (2), pg 36) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 18. Is wood smooth? Documentation provided that wood has been properly treated. (CPSC 2.5.5) |

Director Therese Price

Licensing Official Kimberly Clark, BDD

Gary Pratt