



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Facility Inspection

County MadisonDate 02/11/2021Facility Name Assisi Early Learning CenterLicense Number 45CFRF-0815Purpose Renewal Inspection/Technical Asst. Capacity 182

All Items In Red Are Critical

	In	Out	COS	N/A
Qualified director present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper staff to child ratio present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Room and playground capacity met	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Center capacity met	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
License/complaint visible	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Certified food manager	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Sanitation Approved

Garbage and garbage bins maintained	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vector control maintained	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water system approved and functioning	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Waste water system approved and functioning	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food service approved	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Possible Monetary Penalty

Monetary Penalty

- _____ \$ _____
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____

Age/Child/Staff Name

- Infants | 10 | Caregiver #1, #2, #3, #4
- Creepers | 13 | Caregivers #5, #6, #7
4. Toddlers | 8 | Caregiver #8
4. Toddlers | 8 | Caregiver #9
- Older Toddlers | 11 | Caregivers #10, #11
- 2yrs | 11 | Caregiver #12
- 2yrs | 12 | Caregiver #13
- 3yrs | 12 | Caregiver #14
- 3yrs | 12 | Caregiver #15

Center Director/Individual Sister Paula Marie Child Care Representative [Signature]

White Copy - Facility File

Yellow Copy - Facility Operator

Mississippi State Department of Health

12-10-08

Form No. 281

Other Items - Must be corrected

	In	Out	COS	N/A
Children's belongings separated/stored	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evacuation plans posted	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Menus posted and served	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plan of activities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Building and Grounds

Walls, ceilings, floors, toys, equipment clean and in good repair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Lighting approved	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heating/cooling approved	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ventilation adequate	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Glass approved and shielded	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Telephone on premises, available, and functioning	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Electrical outlets protected	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Large appliances located properly	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sinks and toilets working properly	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hot water at all sinks, not to exceed 120°	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Children barred from kitchen	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Vending machine snacks meet nutritional guidelines, if present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Exits, doors and fastening devices single action approved and in good working order	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Exits unobstructed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Required smoke detectors, carbon monoxide monitors, fire extinguishers and thermometers placed properly and in good working order (TA)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

First aid kits stocked and easily accessible	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Playground area clean, shaded, well drained and equipped and fence in good repair (see playground check list)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Playground equipment meets standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Pool area clean, fenced, and adequately maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Diaper changing stations adequate in number and each fully supplied (number <u>6</u>)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District 5Date 02/11/2021

Name Assisi Learning Center License No. 45 CFRF-0815
 Address 4000 W. Tide Water Lane Madison MS 39110
Center/Organization/Individual
 Purpose Renewal Inspection / Technical Asst. Director Sister Paula Marie Blain, LaToya Kelly
 Mileage Start _____ Mileage End _____
 County Madison Telephone No. 601.856.9494
 Time In 2:05pm Time Out 4:55pm Total Time _____

Findings/Comments The purpose of the site visit is to conduct a renewal inspection. The MSDH LO met with Sister Paula Marie Blain — . The purpose of the visit was acknowledge and the following observations were made:

- No critical violations were observed regarding the facility building and grounds.
- No critical violations were observed regarding the facility ~~K~~ Kitchen / meal prep areas.
- Staff records: The facility will have 14 days to provide verification of (1) one staff Form 121 (See Form 189); Due by 02.25.2021
- Children's records: All observed child records were in compliance per MSDH regulatory guidelines.
- Technical assistance was provided to Director #1, as needed.
- The following items were received: staff roster, parent handbook, CPR-First Aid Vert., monthly drills, pest control, water bill, staff contact hmw. vert.

Please provide all request documents, as needed.

REVOCATION OF THE LICENSE

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

Sister Paula Marie Blain CCFI II
 Center Director/Designee/Individual Child Care Representative

White Copy - Facility File
 Yellow Copy - Operator



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Program Review

 Facility Name Assisi Early Learning Ctr. License No. #0815 Date 2/11/2021

- | | Yes | No | N/A | |
|-----|-------------------------------------|-------------------------------------|-------------------------------------|--|
| 1. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policies and procedures (<i>Parent's Handbook</i>) {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 (<i>includes date of birth</i>) {Rule 1.6.3 (2)} |
| 7. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Current staff roster (<i>includes date of birth & date of hire</i>) {Rule 1.6.3 (3)} |
| 8. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Monthly records of fire/disaster drills {Rule 1.6.3 (5)} (<i>Observed 01/29/2021 record</i>) |
| 9. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Medication record with date, time, signature for 90 days {Rule 1.6.3 (6)} |
| 10. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Immunization Records for Children and Staff {Rule 1.6.3 (8)} |
| 11. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Personnel records (<i>attach employee's records form</i>) {Rule 1.6.4} |
| 12. | <input checked="" 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 checked="" type="checkbox"/> | Children records (<i>attach children's records form</i>) {Rule 1.6.7} |
| 14. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input 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 checked="" type="checkbox"/> | Licensed pest control contractor {Rule 1.11.14} |
| 23. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Pets present (<i>proof of immunization as required, signed by veterinarian</i>) {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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Infant feeding schedules posted (<i>Appendix C, VII</i>) |

 Comments/Recommendations The facility will have 14 days to provide
Verification of the following:
- current Form 333 (Uniform Fire Inspection)
- remaining staff contact hours
- (1) staff Form 121
☒ Pass -

Pending

 License to be issued: ☐ Regular ☐ Probational ☐ Restricted

☐ Fail

☐ Follow-up within _____ days

☐ Director ☐ Designee

Sister Paula Marie, DMA
Child Care Representative

Food Service Facility Inspection Results

PIMS ID	Facility Name, Address Assisi Early Learning Center #0815 4000 W. Tidewater LN Madison, MS 39110	Date 2/11/2021
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CRITICAL VIOLATIONS

- No critical violations were observed during the inspection.

- Letter grade "A" rec'd

CORRECTION PLAN AND SCHEDULE

<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 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
Permit Date	Environmental Code TB, DS
Please Remit within 10 days to:	

Samatha Wright
Certified Manager

Turnkey Sale
Licence Number

Exp. 2/23/2020
New 01/21/2021
- 01/21/2026

Facility Signature <u>Sister Paula Marie</u>
Environmental Signature <u>JB</u>

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

1. ☐ ☐ ☐ Playground fence less than 5' 2" from building (Rule 1.11.9 (8), pg 48)
2. ☐ ☐ ☐ 2 entrances/exits, with one being remote from the building? (Rule 1.11.9 (8), pg 48)
3. ☐ ☐ ☐ Is surfacing adequate? If not, where is it inadequate? (CPSC, 2.4.2, pg 8)
Unitary Surfacing
4. ☐ ☐ ☐ AC units, high-voltage cabling/wires inaccessible? (Rule 1.11.9 (5), pg 47)
5. ☐ ☐ ☐ No standing water present on playground or in/on playground equipment or walkways? (CPSC 2.4.2.2-5, pg 10) Standing water present due to inclement weather
6. ☐ ☐ ☐ Toys & equipment in good repair? (none broken/deteriorating) (Rule 1.10.2 (2), pg 36)
7. ☐ ☐ ☐ Sidewalks provide smooth walking surface? (no trip hazards) (CPSC 3.6, pg 15)
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)
9. ☐ ☐ ☐ Tree limbs at least 7ft. above play surfaces? Is fence free of brush/overgrowth? (CPSC 3.4, 3.5, pg 15)
10. ☐ ☐ ☐ Are use zones adequate? If not, where are they inadequate? (CPSC 5.3.9, pg 40)
11. ☐ ☐ ☐ If swings are present, are S-hooks in good repair? If not, state deficiency
(CPSC 3.2, pgt.)
12. ☐ ☐ ☐ If slide is present, is exit height/exit zone adequate? If not, state deficiency
(CPSC 5.3.6.4-5 pgs 34-3)
13. ☐ ☐ ☐ Are spring rockers a minimum of 6 ft. apart? (ASTM 9.5.1.2, pg 15)
14. ☐ ☐ ☐ Is age-appropriate equipment being used? If not, state which pieces are inappropriate
(Rule 1.10.2, pg 3)
15. ☐ ☐ ☐ Is playground area clean & free of hazards? If not, state deficiency.
(Rule 1.11.11 (1), pg 4)
16. ☐ ☐ ☐ Is adequate shade present on the playground? (CPSC 2.1.1, pg 5)
17. ☐ ☐ ☐ Are concrete footings located at least 6" beneath the surface? (Rule 1.10.2 (2), pg 36)
18. ☐ ☐ ☐ Is wood smooth? Documentation provided that wood has been properly treated. (CPSC 2.5.5)

Director Sister Paula Marie, S.M. Licensing Official [Signature]

* No inspection of the playground area was not conducted