

MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Facility Inspection

| County Lauderda | le | Date2/24/ | 2021 | | |
|---|---------------------|---|--------|-----|-----|
| Facility Name Afferso | hool | License Number 38 | CDRA | 7-2 | 13/ |
| Purpose Mid-Yea | | Capacity97 | | | |
| All Items In Red Are Critical | In Out COS N/A | Other Items - Must be corrected Children's belongings separated/stored Evacuation plans posted Menus posted and served Plan of activities | 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 | | Building and Grounds Walls, ceilings, floors, toys, equipment clean and in good repair | | | |
| Certified food manager Sanitation Approved Garbage and garbage bins maintained Vector control maintained Water system approved and functioning Waste water system approved | | Lighting approved Heating/cooling approved Ventilation adequate Glass approved and shielded | | | |
| | | Telephone on premises, available, and functioning | | | |
| and functioning Food service approved | | Electrical outlets protected Large appliances located properly Sinks and toilets working properly Hot water at all sinks, not to | | | |
| Possible Monetary Penalty 1 | Monetary Penalty \$ | exceed 120° Children barred from kitchen Vending machine snacks meet | | | |
| 2 | \$ | nutritional guidelines, if present Exits, doors and fastening devices single action approved and in good | | | U V |
| 3 | \$ | working order Exits unobstructed | | | |
| 4. 5. | \$ \$ | Required smoke detectors, carbon monoxide monitors, fire extinguishers and thermometers placed properly and | | | |
| Age/Child/Staf | f Name | in good working order | | | |
| 1. | | First aid kits stocked and easily accessible | e . | | |
| 2.3. | | Playground area clean, shaded, well drained and equipped and fence in good repair | | | |
| 4. | | Playground equipment meets standards | | | |
| 5.6. | | Pool area clean, fenced, and adequately maintained | | | |
| 7 | airai. Il. | Diaper changing stations adequate in number and each fully supplied (number) | | | |
| Center Director/Individual Velley Co | man Mal | Child Care Representative | EV. | ere | tt |

White Copy - Facility File Yellow Copy - Facility Operator
Mississippi State Department of Health

12-10-08

Form No. 281



Child Care Encounter

| District | Date/ |
|--|---|
| Name After School 2027 Dooler Sorine | License No. 38 CDRA - 23/8 Meridian, Ms 39303 ganization/Individual Director Mariorie Hall |
| Address 999 Popular Spirite Center/Or | ganization/Individual |
| Purpose Mid-Year | Director Marjorie Hall |
| Mileage Start | Mileage End |
| County Landerdale | Telephone No. 601 485 5598 |
| Time In Time Out | Total Time |
| Findings/Comments | |
| The licensing official | came to conduct a Mid-Yea |
| Inspection. The licens | |
| by Marjorie Hall, Dire | ctor. |
| | |
| No violations observ | ed |
| Great Job! | |
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| Center Director/Designee/Individual Child Can | White Copy - Facility File Yellow Copy - Operator re Representative |

Mississippi State Department of Health

Revised 6-24-09

Form No. 287

Food Service Facility Inspection Results

| PIMS ID 38 CDRA - A | cility Name, Address Filer & hool | 2. The second se | | Date 2/24/2021 |
|---------------------------------------|---|--|-----------------------------------|----------------|
| 23/8 3 | 937 Poplar Spi | ings | Meridian, M | 5 7 94/2021 |
| CRITICAL VIO | LATIONS | | CORRECTION PLAN | AND SCHEDULE |
| No violation | | | | |
| during insp | ection | | | |
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| | | | | |
| | | | arjorie Hall | Tummy Safe |
| ☐ 92020 Scheduled ☐ 92030 Followup | ☐ 92010 Permit No Charge ☐ 92015 Permit 1 \$30.00 | Certifi | ied Manager | Licence Number |
| 92040 Complaint | ☐ 92011 Permit 2 \$100.00 | EXP | res | |
| ☐ 92050 Consultation | ☐ 92012 Permit 3 \$150.00 | 1 | 5/10/2023 | |
| ☐ 92070 Plan Review/Const. | ☐ 92013 Permit 4 \$200.00 | | 1.0/000 | |
| ☐ 92080 No Inspection | | F ''' | | 11 . 0 |
| ☐ 92090 Restaurant Training | | Facili | ty Signature | uttall |
| Permit Date | Environmentalist Code | Envir | onmentalist Signature | FILEROH |
| Please Remit within 10 days to: | | White (| Copy - Facility | |
| Trease recitit within 10 days to. | | | Copy - PIMS opy- Environmentalist | |
| | | | | |

| Center Name | Afferschool inspection Date 2/24/2001 |
|--------------|--|
| YES NO NA | The state of the s |
| | 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) |
| | 2 entrances/exits, with one being remote from the building? Rule 1 (19 18) pg 48, |
| Z = 3 | Is surfacing adequate? If not, where is it inadequate? (CPSC 2 4 2 pg8) |
| | AC units, high-voltage cabling/wires inaccessible? (Rule 1.11.9 (i) pg 47) |
| | No standing water present on playground or in/on playground equipment or walkways? (CPSC 2 4 2 2-5, pg 10) |
| d | Toys & equipment in good repair? (none broken/deteriorating) (Rule [10 2 (2) pg 36) |
| | sidewalks provide smooth walking surface? (no trip hazards) (CPSC 3.6 no 15) |
| - | All bolts on equipment & fence <2 threads beyond the nut? Are all bolts and fencing twists/wires facing away from the playground area? (Rule 1 119 (5), pg 47) |
| 7/ 7 7 15 | Tree limbs at least 7ft, above play surfaces? Is fence free of brush/overgrowth? (CPSC 3.4, 3.5, pg 15) |
| H 1 10. | Are use zones adequate? If not, where are they inadequate? (CPSC 5 3 9 pg 40) |
| | If swings are present, are S-hooks in good repair? If not, state deficiency |
| 1 | If slide is present, is exit height/exit zone adequate? If not, state deficiency (CPSC 3 2 pg 13) (CPSC 3 2 pg 13) |
| 0 0 13 4 | tre spring rockers a minimum of 6 ft. apart? (ASTM 9 5.12 pg 15) |
| | s age-appropriate equipment being used? If not, state which pieces are inappropriate |
| 7 1 1 15 [s | playground area clean & free of hazards? If not, state deficiency |
| Z = 16 Is | adequate shade present on the playground? (CPSC 2 [pg 5) |
|]] [] A | re concrete footings located at least 6" beneath the surface? (Rule 1 10 2 (2) pg 36) |
| I I I Is (s | wood smooth? Documentation provided that wood has been properly treated (CPSC) |
| rector May(C | W Hell Licensing Official Severett |
| / | |