



MISSISSIPPI STATE DEPARTMENT OF HEALTH

## Child Care Facility Inspection

County CalhounDate 7/24/2020Facility Name Kreative Kicks Learning CtrLicense Number 07CBPFA-5627Purpose Virtual RenewalCapacity 30

## All Items In Red Are Critical

Qualified director present  
 Proper staff to child ratio present  
 Room and playground capacity met  
 Center capacity met  
 License/complaint visible  
 Certified food manager

In Out COS N/A

In	Out	COS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Sanitation Approved

Garbage and garbage bins maintained  
 Vector control maintained  
 Water system approved and functioning  
 Waste water system approved and functioning  
 Food service approved

In	Out	COS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Possible Monetary Penalty

1. \_\_\_\_\_ Monetary Penalty \$ \_\_\_\_\_  
 2. \_\_\_\_\_ \$ \_\_\_\_\_  
 3. \_\_\_\_\_ \$ \_\_\_\_\_  
 4. \_\_\_\_\_ \$ \_\_\_\_\_  
 5. \_\_\_\_\_ \$ \_\_\_\_\_

	Age/Child/Staff Name				
1.	1-2 yrs	7	1		(Capacity)
2.	Infant 1 yr	5	2 & 3		(15)
3.	1-5	11	4		(24)
4.					
5.					
6.					
7.					

## Other Items - Must be corrected

Children's belongings separated/stored ☒ In ☐ Out ☐ COS ☐ N/A  
 Evacuation plans posted ☒ In ☐ Out ☐ COS ☐ N/A  
 Menus posted and served ☒ In ☐ Out ☐ COS ☐ N/A  
 Plan of activities ☒ In ☐ Out ☐ COS ☐ N/A

## Building and Grounds

Walls, ceilings, floors, toys, equipment clean and in good repair ☒ In ☐ Out ☐ COS ☐ N/A  
 Lighting approved ☒ In ☐ Out ☐ COS ☐ N/A  
 Heating/cooling approved ☒ In ☐ Out ☐ COS ☐ N/A  
 Ventilation adequate ☒ In ☐ Out ☐ COS ☐ N/A  
 Glass approved and shielded ☒ In ☐ Out ☐ COS ☐ N/A  
 Telephone on premises, available, and functioning ☒ In ☐ Out ☐ COS ☐ N/A  
 Electrical outlets protected ☒ In ☐ Out ☐ COS ☐ N/A  
 Large appliances located properly ☒ In ☐ Out ☐ COS ☐ N/A  
 Sinks and toilets working properly ☒ In ☐ Out ☐ COS ☐ N/A  
 Hot water at all sinks, not to exceed 120° YPR ☒ In ☐ Out ☐ COS ☐ N/A  
 Children barred from kitchen ☒ In ☐ Out ☐ COS ☐ N/A  
 Vending machine snacks meet nutritional guidelines, if present ☐ In ☐ Out ☐ COS ☒ N/A  
 Exits, doors and fastening devices single action approved and in good working order ☒ In ☐ Out ☐ COS ☐ N/A  
 Exits unobstructed ☒ In ☐ Out ☐ COS ☐ N/A  
 Required smoke detectors, carbon monoxide monitors, fire extinguishers and thermometers placed properly and in good working order ☒ In ☐ Out ☐ COS ☐ N/A  
 First aid kits stocked and easily accessible ☒ In ☐ Out ☐ COS ☐ N/A  
 Playground area clean, shaded, well drained and equipped and fence in good repair ☒ In ☐ Out ☐ COS ☐ N/A  
 Playground equipment meets standards ☒ In ☐ Out ☐ COS ☒ N/A  
 Pool area clean, fenced, and adequately maintained ☐ In ☐ Out ☐ COS ☒ N/A  
 Diaper changing stations adequate in number and each fully supplied (number \_\_\_\_\_) ☐ In ☐ Out ☐ COS ☐ N/A

Center Director/Individual [Signature]Child Care Representative [Signature]

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

12-10-08

Form No. 281





MISSISSIPPI STATE DEPARTMENT OF HEALTH

# Child Care Encounter

District IV Date 7/14/20

Name Creative Kids Learning Center License No. 07C00FA-5627

Address 427 E. Cantiss Street, Bruce, MS 38915 Center/Organization/Individual

Purpose Virtual Renewal Inspection Director Gayla Pennell

Mileage Start \_\_\_\_\_ Mileage End \_\_\_\_\_

County Calhoun Telephone No. 662-414-6432

Time In 9:00 Time Out 9:20 Total Time \_\_\_\_\_

Findings/Comments Conducted a virtual program renewal inspection. The virtual inspection acknowledgement was signed on 07/08/2020.

Violations: N/A (No class I or II violations were verified during the virtual inspection)

Received the following requested documents: Staff roster, child roster, attendance sign-In today's virtual inspection and CPR/1st aid.

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

[Signature]  
Center Director/Designee/Individual  
(VPR)  
Mississippi State Department of Health

[Signature]  
Child Care Representative

White Copy - Facility File  
Yellow Copy - Operator





## MISSISSIPPI STATE DEPARTMENT OF HEALTH

## Child Care Program Review

Facility Name

Kreative Kids Lm. Cr.

License No.

5027

Date

7/14/20

- |     | Yes                                 | No                                  | N/A                                 |  |
|-----|-------------------------------------|-------------------------------------|-------------------------------------|--|
| 1.  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <b>Policies and procedures (Parent's Handbook)</b> {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 checked="" type="checkbox"/> | Letter of suitability for staff {Rule 1.5.2 & Rule 1.6.4 (1) (f)} YPR Memo Signed  |
| 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 checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Monthly records of fire/disaster drills {Rule 1.6.3 (5)}   |
| 9.  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <b>Medication record with date, time, signature for 90 days</b> {Rule 1.6.3 (6)}   |
| 10. | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Immunization Records for Children and Staff {Rule 1.6.3 (8)} YPR Memo Signed   |
| 11. | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <b>Personnel records</b> (attach employee's records form) {Rule 1.6.4} " "   |
| 12. | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Volunteer records {Rule 1.6.5 & Rule 1.6.6} " "  |
| 13. | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <b>Children records</b> (attach children's records form) {Rule 1.6.7} " "  |
| 14. | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <b>Reports of serious occurrences made as required</b> {Rule 1.7.1} " "  |
| 15. | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <b>Communicable diseases reported as required</b> {Rule 1.7.3}   |
| 16. | <input 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"/>            | <b>Staff present who hold valid CPR and First Aid Certification</b> {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 type="checkbox"/>            | Licensed pest control contractor {Rule 1.11.14}  |
| 23. | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input 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"/>            | <b>Appropriate discipline policy followed</b> {Subchapter 14}  |
| 25. | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <b>Appropriate transportation policy followed</b> {Subchapter 15}  |
| 26. | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Infant feeding schedules posted (Appendix C, VII)  |

Comments/Recommendations

- ☒ Pass –  
 License to be issued: ☒ Regular ☐ Probational ☐ Restricted  
☐ Fail  
☐ Follow-up within \_\_\_\_\_ days

☒ Director ☐ Designee

Child Care Representative

Virtual Inspection

# Food Service Facility Inspection Results

PIMS ID <b>5621</b>	Facility Name, Address <b>Kreative Kids Learning Center</b>	Date <b>7/14/20</b>
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## CRITICAL VIOLATIONS

## CORRECTION PLAN AND SCHEDULE

<p><b>Pass</b></p>	<p><b>Am Snack - (9:00)</b></p> <p><b>Orange Wedges</b></p> <p><b>Crackers</b></p> <p><b>Water</b></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
Permit Date	Environmental Code <b>(PC2)</b>
Please Remit within 10 days to:	

**Gayla Bennett** **Turnmy Site**  
 Certified Manager Licence Number

Facility Signature <b>X</b>
Environmental Signature <b>Paula Bennett</b>

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

**(Virtual Inspection)**



# Child Care Licensure Playground Checklist

Center Name Kreative Kids Learning Ctr. Inspection Date 7/13/20

YES NO N/A

- ☒ ☐ ☐ 1. Playground fence less than 3 1/2" from surface. (Rule 1.11.9 (8), pg 60) In good repair, with no gaps? (Rule 1.11.9 (8), pg 60)
- ☒ ☐ ☐ 2. 2 entrances/exits, with one being remote from the building? (Rule 1.11.9 (8), pg 60)
- ☐ ☐ ☒ 3. Is surfacing adequate? If not, where is it inadequate? (CPSC, 2.4.2, pg 9-10 & 4.3)
- ☒ ☐ ☐ 4. AC units, high-voltage cabling/wires inaccessible? (Rule 1.11.9 (5), pg 59)
- ☒ ☐ ☐ 5. No standing water present on playground or in/on playground equipment or walkways? (CPSC 2.4.2.2(5), pg 10 & Rule 1.11.11 (4), pg 61)
- ☒ ☐ ☐ 6. Toys & equipment in good repair? (none broken/deteriorating) (Rule 1.10.2 (2), pg 46)
- ☐ ☐ ☒ 7. Sidewalks provide smooth walking surface? (no trip hazards) (CPSC 3.6, pg 16-17)
- ☒ ☐ ☐ 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 59)
- ☒ ☐ ☐ 9. Tree limbs at least 7ft. above play surfaces? Is fence free of brush/overgrowth? (CPSC 3.4, 3.5, pg 16)
- ☐ ☐ ☒ 10. Are use zones adequate? If not, where are they inadequate? (CPSC 5.3.9, pg 41)
- ☐ ☐ ☒ 11. If swings are present, are S-hooks in good repair? If not, state deficiency  
(CPSC 3.2, pg 14; 2.5.2, pg 1 & 5.3.8.1, pg 37)
- ☐ ☐ ☒ 12. If slide is present, is exit height/exit zone adequate? If not, state deficiency  
(CPSC 5.3.6.4-5 pgs 34-35)
- ☐ ☐ ☒ 13. Are spring rockers a minimum of 6 ft. apart? (ASTM 9.5.1.2 & CPSC 5.3.7, pg 36-37)
- ☒ ☐ ☐ 14. Is age-appropriate equipment being used? If not, state which pieces are inappropriate  
(Rule 1.10.2, pg 46 & CPSC 2.2.6, pg 6)
- ☒ ☐ ☐ 15. Is playground area clean & free of hazards? If not, state deficiency.  
(Rule 1.11.11 (1), pg 61)
- ☒ ☐ ☐ 16. Is adequate shade present on the playground? (Rule 1.11.9 (7), pg 60 & CPSC 2.1.1, pg 5) (Trees)
- ☒ ☐ ☐ 17. Are concrete footings located at least 6" beneath the surface? (Rule 1.10.2 (2), pg 46 & CPSC 3.6, pg 16-17)
- ☒ ☐ ☐ 18. Is wood smooth? Documentation provided that wood has been properly treated. (CPSC 2.5.5, pg 15)

Director [Signature]

Licensing Official PAULETTE ELLIOTT, CCFI II

Virtual Renewal Inspection