

Facility closed 03/12/2020, 03/13/2020



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Facility Inspection

County <u>TOTS & TODDLERS PRE-K TEEN</u> <u>CENTER</u> <u>45CDRFA-7403</u> Facility <u>251 KEARNEY PARK RD</u> <u>FLORA MS 39071</u> Purpose <u>601-897-3999</u>	Date <u>03/11/2020</u> License Number <u>45CDRFA-7403</u> Capacity <u>61</u>
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All Items In Red Are Critical

	In	Out	COS	N/A
Qualified director present <i>arrived at 9:30A</i>	<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
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Menus posted and served	<input checked="" type="checkbox"/>	<input checked="" 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"/>
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 <i>(TA Hallway room per Dirctn #1)</i>	<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"/>
Playground area clean, shaded, well drained and equipped and fence in good repair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Playground equipment meets standards	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pool area clean, fenced, and adequately maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Diaper changing stations adequate in number and each fully supplied (number <u>1</u>)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Classroom	Age/Child/Staff Name
#1	1. Infants 2 Caregiver #1
	2. 1yrs 2
	3. 3-4yrs 7 Caregiver #2
upstairs	4. 4-Schoolage 9 Caregiver #3 (8)
class-room #2	5. 3-4yrs 3 Caregiver #4 (4)
Room #4	6. *Please note, a correction on site was made. The 4yrs old in the school-age room was place in Room #4 following TA provided to Dirctn #1
	7. _____

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 _____ Date 03/11/2020

Name TOTS & TODDLERS PRE-K TEEN CENTER License No. 45CDRFA-7403

Address: 45CDRFA-7403
251 KEARNEY PARK RD
FLORA MS 39071

Purpose 601-897-3999 Center/Organization/Individual _____

Director Stephanie Cavett, Stanley Cavett

Mileage Start _____ Mileage End _____

County Madison Telephone No. 601-897-3999

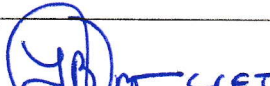
Time In 9:27 pm Time Out 11:00 am Total Time _____

Findings/Comments Upon arrival, MSDH licensing official met with Emily Brown, authority staff. The purpose of the visit was acknowledge and the following observations were made: Please note, Stanley Cavett, Owner/Director arrived at approximately 9:39 am. Per Dr. Cavett, Mrs. Stephanie Cavett is not due to an injury to her leg. She may return to the facility on 03/16/2020 based on medical evaluation.

- No critical violations were observed regarding the facility buildings and grounds.
- Technical assistance was provided regarding the placement of soap and hand towels in upstairs/downstairs restrooms utilized by children.
- Technical assistance provided regarding the placement of smoke detectors (upstairs) (Subchapter 11) and Safe Food Practices (See Form 301), per the MS Food Code.
- No critical violations were observed regarding the facility Kitchen/meal prep area.
- Technical assistance was provided regarding the posting of the current approved menus and the MSDH Menu Approval Letter.
- Staff records: All observed staff records, including FBI LOS and Form 121's, were compliant with MSDH regulatory guidelines.
- Child records: The facility will have 14 days to provide verification of a valid Form 121 for 1 child.

- A green survey card and MSDH contact card was provided.


Center Director/Designee/Individual


Child Care Representative

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

White Copy - Facility File
Yellow Copy - Operator

Food Service Facility Inspection Results

TOTS & TODDLERS PRE-K TEEN
CENTER

PIMS ID	Facility Name	Date
	45CDRFA-7403 251 KEARNEY PARK RD FLORA MS 39071 601-897-3999	3/11/2020

CRITICAL VIOLATIONS

CORRECTION PLAN AND SCHEDULE


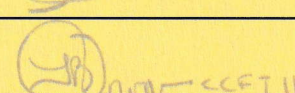
- No critical violations were observed during the inspection.
- Technical assistance was provided regarding the posting of the current, approved menus and the approval letters. Also, technical assistance provided on throwing cold holding of foods.
- Letter grade "A", with technical assistance was provided.

- The facility is required to post the current approved menus and menu letter.

<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:	

Stanley Carvett
Certified Manager

Trinity Sate
Licence Number
Exp. 8/15/2020

Facility Signature	
Environmentalist Signature	

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

Child Care Licensure Playground Checklist

TOTS & TODDLERS PRE-K TEEN
CENTER
45CDRFA-7403
251 KEARNEY PARK RD
FLORA MS 39071
601.897.3900

Inspection Date 03/11/2020

Center Name _____

YES NO N/A

- ☒ ☐ ☐ 1. Playground surface less than 5/8" from surface. (Rule 1.11.9 (8), pg 48) In good repair, with no gaps? (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, pg8)
- ☒ ☐ ☐ 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)
- ☒ ☐ ☐ 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, pg13)
- ☒ ☐ ☐ 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, pg 15)
- ☒ ☐ ☐ 14. Is age-appropriate equipment being used? If not, state which pieces are inappropriate _____ (Rule 1.10.2, pg 36)
- ☒ ☐ ☐ 15. Is playground area clean & free of hazards? If not, state deficiency. _____ (Rule 1.11.11 (1), pg 49)
- ☒ ☐ ☐ 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 _____

Licensing Official _____

YB my CCAI

Additional shading may be required as the season progresses.