



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Facility Inspection

| | | | |
|---------------|----------------------------|----------------|----------------|
| County | <u>Chickasaw</u> | Date | <u>5-26-21</u> |
| Facility Name | <u>McIntosh Head Start</u> | License Number | <u>2740</u> |
| Purpose | <u>Midyear</u> | Capacity | <u>78</u> |

All Items In Red Are Critical
desiree Kautin Armstrong

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

Sanitation Approved

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

Possible Monetary Penalty

| | Monetary Penalty |
|----------|------------------|
| 1. _____ | \$ _____ |
| 2. _____ | \$ _____ |
| 3. _____ | \$ _____ |
| 4. _____ | \$ _____ |
| 5. _____ | \$ _____ |

| | Age/Child/Staff Name |
|------|-------------------------|
| Rm 3 | 1. 4, 6, Caregivers 1-2 |
| Rm 4 | 2. NO Children |
| Rm 2 | 3. 3, 5, Caregivers 3-4 |
| Rm 1 | 4. 2, 4, Caregivers 5-6 |
| 5. | |
| 6. | |
| 7. | |

Other Items - Must be corrected

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

Building and Grounds

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

Center Director/Individual

Kautin Armstrong

Child Care Representative

Gary Pharr



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District IVDate 5-26-21

| | | | |
|---------------|---|---------------|----------------------|
| Name | <u>McIntosh Head Start</u> | License No. | <u>2740</u> |
| Address | <u>450 Third Ave. Houston, MS 38851</u> | | |
| Purpose | <u>Midyear</u> | Director | <u>Deborah Grace</u> |
| Mileage Start | | Mileage End | |
| County | <u>Chickasaw</u> | Telephone No. | <u>662-456-3871</u> |
| Time In | <u>11:55</u> | Time Out | <u>12:55</u> |
| | | Total Time | |

Findings/Comments Here to conduct a Midyear Inspection.
Upon arrival the licensing met with the director designee
Kautina Armstrong.

- Staff-to-Child Ratio in Compliance
- Staff LOS's and 121's in Compliance
- Children 121's in Compliance
- Kitchen rec'd an A, No critical violations
- Playground in Compliance

LO rec'd updated CPR/First Aid for Dora Georgia
LO rec'd director designee Dora Georgia qualifications for review

Questionnaire provided to the facility director designee,
Kautina Armstrong.

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.

Kautina Armstrong
 Center Director/Designee/Individual

[Signature]
 Child Care Representative

White Copy - Facility File
 Yellow Copy - Operator

Food Service Facility Inspection Results

| | | |
|---------|--|------------------------|
| PIMS ID | Facility Name, Address <u>McIntosh HS</u> <u>450 Third Ave. Houston, MS 38851</u> | Date <u>5-26-21</u> |
|---------|--|------------------------|

CRITICAL VIOLATIONS

CORRECTION PLAN AND SCHEDULE

| | |
|---|--|
| <p>- No Critical violations On today's visit</p> <p>"A"</p> <p>Pass</p> | |
|---|--|

| | |
|---|---|
| <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 <u>SP2</u> |
| Please Remit within 10 days to: | |

Norma Mitchell 2740
 Certified Manager Licence Number

X Sen. Sale
19830738

| |
|--|
| Facility Signature <u>Kristina Armstrong</u> |
| Environmental Signature <u>Kristen Taylor</u> |

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

Playground Checklist

Center Name McIntosh HS Inspection Date 5-20-21
 Name of Licensing Official Shenika Pratt License # 2740

- | 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), p 60) In good repair, with no gaps. (Rule 1.11.9 (8), p 60) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Two entrances/exits, with one being remote from the building. (Rule 1.11.9 (8), p 60) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Surfacing adequate. If not, where is it inadequate? (CPSC, 2.4.2, pp 9-10) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. AC units, high-voltage cabling/wires inaccessible. (Rule 1.11.9 (5), p 59) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. No standing water present on playground or in/on playground equipment or Walkways. (CPSC 2.4.2.2, p 5, p 10) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Toys & equipment in good repair. (None broken/deteriorating) (Rule 1.10.2 (2), p 46) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. Sidewalks provide smooth walking surface. (No trip hazards) (CPSC 3.6, pp 16-17) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 9. Bolts on equipment and fence <2 threads beyond the nut? (Rule 1.11.9 (5), p 59) All bolts and fencing twists/wires facing away from the playground area |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 10. Tree limbs at least 7ft. above play surfaces? Is fence free of brush/overgrowth? (CPSC 3.4, 3.5, p 16) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 11. Use zones adequate? If not, where are they inadequate? (CPSC 5.3.9, p 41) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 12. If swings are present, are S-hooks in good repair? If not, state deficiency. (CPSC 3.2, p 14; 2.5.2, p 11; 5.3.8.1, p 37) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13. If slide is present, is exit height/exit zone adequate? If not, state deficiency. (CPSC 5.3.6.4-5 pp 34-36) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 14. Spring rockers a minimum of 6 ft. apart? (CPSC 5.3.7, pp 36-37) (ASTM 9.5.1.2) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 15. Age-appropriate equipment being used? If not, state which pieces are inappropriate. (CPSC 2.2.6, p 6) (Rule 1.10.2, p 46) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 16. Playground area clean & free of hazards? (Rule 1.11.11 (1), p 61) If not, state deficiency. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 17. Adequate shade is present on the playground. (CPSC 2.1.1, p 5) (Rule 1.11.9 (7), p 60) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 18. Concrete footings located a minimum of 6" beneath the surface. (CPSC 3.6, pp 16-17) (Rule 1.10.2 (3), p 46) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 19. Is wood smooth? Documentation providing wood has been properly treated. (CPSC 2.5.5, p 12) |

Director Kristina Armstrong Licensing Official Shenika Pratt
Kristina Armstrong