

# **Child Care Facility Inspection Report**

DEKALB HEAD START CENTER License #: 3764 Director: DEBORAH SPENCER Inspection Date: 02/02/2022 Annual/Mid Inspection Inspector: Miski Brown

## **Program Administration Violations Cited**

1. **Out of Compliance:** Facility has appropriate number of operational toilets and handwashing lavatories. A ratio of 1:15 is required. Each sink is supplied with hot and cold running water, soap, and individual towers for drying. Each toilet is supplied with toilet paper. (Rule 1.11.5 Page 56)

Plan of Correction

POC: The director will be responsible for ensuring that the sink in classroom C is repaired. The director will put a maintenance check list in place to ensure completion for complaince. The director will review Rule 1.11.5. A follow-up inspection will be conducted with-in- 14 days.
Person Responsible: Deborah Spencer Date for Completion: 14

### **Kitchen Violations Cited**

1. **Out of Compliance:** Plumbing is properly installed including proper backflow devices. (Rule 1.11.5 Page 56)

#### Plan of Correction

 POC: The director/ owner will be responsible for ensuring that the three compartment sink does not leak. During the facility review the three carpartment sink had a leak in the kitchen. The director will develop a maintence check list to ensure complaince with rule rule 1.11.5. A follow-up will be conducted in 14 days. Person Responsible: Deborah Spencer Date for Completion: 14

# **Nutritional Guidelines Violations Cited**

No violations cited.

# **Playground Violations Cited**

No violations cited.

#### **Toddler Classroom Violations Cited**

Early heastart D - Classroom Number: 8 No violations cited.

Toddler Classroom - Classroom Number: 8

#### **Preschool Classroom Violations Cited**

Class room B - Classroom Number: 0

1. **Out of Compliance:** Walls are kept clean and free of torn wall covering, chipped paint, broken plaster, and holes. (Rule 1.11.1(12) Page 52)

Preschool Classroom - Classroom Number: 0

#### Legend

- COS: Corrected on Site
- POC: Plan of Correction

### **Child Care Director Signature**

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### **MSDH Licensure Representative Signature**

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