



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Facility Inspection Report

ALPHABEST BEL AIRE ELEMENTARY

License #: 4544

Director: TOMMIESENE BEASLEY

Inspection Date: 03/07/2023

Annual/Mid Inspection

Inspector: Linnie Gray

Program Administration Violations Cited

1. **Out of Compliance:** All required facility records are present and up-to-date: (1) child and employee attendance records, (2) alphabetical roster of children, (3) alphabetical roster of staff and volunteers, (4) current license, (5) records of monthly fire /disaster drills, (6) medication log, (7) volunteer log, (8) notebook of 121 forms for staff members and children w/roster, (9) notebook with Letters of Suitability for all employees w/roster. (Rule 1.6.3 Page 29)

Plan of Correction

1. **POC:** Based on observations and review of staff records the facility failed to have staff records at the facility. Director will ensure staff records are kept on site at all times. Director will review Rule 1.6.1
Person Responsible: TOMMIESENE BEASLEY **Date for Completion:** March 8, 2023

Kitchen Violations Cited

No violations cited.

Nutritional Guidelines Violations Cited

No violations cited.

Playground Violations Cited

No violations cited.

School Age Room Violations Cited

School Age Cafeteria - Classroom Number: 1

No violations cited.

School Age Room - Classroom Number: 1

Legend

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

Child Care Director Signature

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MSDH Licensure Representative Signature

The signature is written in black ink. The first line is a cursive signature that appears to be "J. [unclear]". The second line is a cursive signature that appears to be "Gray".