



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Facility Inspection

County Hinds Date 1/9/2019
 Facility Name Little Explorers, LLC License Number 6137
 Purpose Mid-Year Inspection/TA Capacity 43

All Items In Red Are Critical

	In	Out	COS	N/A
Qualified director present	<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

	In	Out	COS	N/A
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. _____	\$ _____

	Age/Child/Staff Name
1.	one/7/one caregiver
2.	infant/3/one caregiver
3.	4/10/one caregiver
4.	2/7/two caregivers
5.	
6.	
7.	

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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Menus posted and served	<input checked="" type="checkbox"/>	<input 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

	In	Out	COS	N/A
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	<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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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>2</u>)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Center Director/Individual

Child Care Representative

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Yellow Copy - Facility Operator

Mississippi State Department of Health

12-10-08

Form No. 281



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District IVDate 1/9/2019

Name	<u>Little Explorers, LLC</u>	License No.	<u>25CCPFA-6137</u>
Address	<u>4854 N. State Street, Jackson, MS 39206</u>		
	Center/Organization/Individual		
Purpose	<u>Mid-Year Inspection / TA</u>	Director	<u>Samika Wells</u>
Mileage Start	<u>—</u>	Mileage End	<u>—</u>
County	<u>Hinds</u>	Telephone No.	<u>601-368-1758</u>
Time In	<u>12:15 p.m.</u>	Time Out	<u>1:12</u>
		Total Time	<u>—</u>

Findings/Comments This visit is for six-month inspection.Subchapter 10: Equipment, Toys, and MaterialsRule 1-10.9(7) states in part "Children are not allowed to sleep in shared places, such as infant seats, strollers, swings, cozy areas, or on tables.Findings: The licensing official observed infant sleeping in swing rocker in the infant room.Technical Assistance was provided by informing staff child should be removed immediately once asleep. Staff removed child.Plan of Correction: The staff will always remove children from shared spaces when sleeping.Subchapter 6: RecordsRule 1.6.3-1 Current alphabetical roster of children enrolled in the child care facility, to include the child's full name and date of birth.Findings: The licensing official observed student roster ~~not~~ not current, 9 children had dropped on roster that was provided to licensing official.Technical Assistance provided on keeping a current roster.Plan of Correction: Owner/Director will update roster by 01/11/19.Subchapter 13 Nutrition & Meals.Rule 1.13.2 - Meals shall meet the nutritional standards as prescribed in Appendix "C" Minimum Standards for Nutritional Care in Child Care Facilities.Findings: The licensing official observed several packages of hot dogs in freezer. Technical Assistance was provided on the ~~choking~~ choking hazards of hot dogs. (see Appendix C pg. 6).Plan of Correction: Director will remove hot dogs today.

Samika Wells
Center Director/Designee/Individual

Shirley
Child Care Representative
Nana Gino Jessie Riggins

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Yellow Copy - Operator



MISSISSIPPI STATE DEPARTMENT OF HEALTH

**Child Care Encounter
(Continuation)**Date 01/9/19Facility Name Little Explorers, LLC License No. 6137A Customer Service Card was provided to Director.If any questions or concerns please contact the child care
licensing agency at 601-364-2827."Class I and Class II violations may result in a monetary penalty.
Repeated violations may result in the doubling of a monetary penalty
~~or~~ suspension or revocation of the license."
Center Director/Designee/Individual
Child Care Representative
Dana AmosWhite Copy - Facility File
Yellow Copy - Operator

Food Service Facility Inspection Results

PIMS ID 6137	Facility Name, Address Little Explorers, LLC 4854 N. State Street, Jackson, MS	Date 1/9/2019
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CRITICAL VIOLATIONS



CORRECTION PLAN AND SCHEDULE

<p>NO CRITICAL VIOLATIONS OBSERVED.</p>	<p>Met compliance</p> <p>Facility Rec'd a "Y"</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	Environmentalist Code SG73
Please Remit within 10 days to:	

Sami Kae C. Wells
Certified Manager

Tummy Safe
Licence Number
Exp. 7/24/2023

Facility Signature	
Environmentalist Signature	

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

Child Care Licensure Playground Checklist

Center Name Little Explorers, LLC

Inspection Date 1/9/2019

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)
No equipment present
- ☒ ☐ ☐ 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)
No toys + equipment present
- ☒ ☐ ☐ 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
No equipment present (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)
- ☐ ☐ ☒ 17. Are concrete footings located at least 6" beneath the surface? (Rule 1.10.2 (2), pg 46 & CPSC 3.6, pg 16-17)
Observed spray painted concrete blocks on play area
- ☐ ☐ ☒ 18. Is wood smooth? Documentation provided that wood has been properly treated. (CPSC 2.5.5, pg 15)

Director [Signature]

Licensing Official [Signature]

[Signature]
[Signature]