



MISSISSIPPI STATE DEPARTMENT OF HEALTH

## Child Care Encounter

District

II

Date

9-10-21

Name First Baptist Day School License No. 4961  
 Address 300 N. Church St. Tupelo, MS 38804  
Center/Organization/Individual  
 Purpose T.A. Director Christine Allred  
 Mileage Start \_\_\_\_\_ Mileage End \_\_\_\_\_  
 County Lee Telephone No. 662-718-0018  
 Time In 9:30 Time Out 11:15 Total Time \_\_\_\_\_

Findings/Comments Here to conduct a Technical Assistance visit to measure additional classrooms (Pre K building) per facility request.

The licensings measure additional classrooms. All classrooms met requirements and are now ready for use.

Facility's Max Capacity will remain at 150 per ~~facility~~ request to self limit.

Updated Capacity Worksheet and Floor Plan was discussed and signed by Director and Licensing Officials.

- LO rec'd a new fire form #333 for Preschool building.
- LO completed a 281 Form and 286 for additional building (Preschool building).

Facility director will submit to the licensing a copy of the Construction Permit / Agreement stating building age or year the building was constructed.

\*LO rec'd a copy of Building Plans / Construction. Building was constructed in 2020.

Facility can now operate additional preschool building for Child Care Use.  
Christine Allred  
Center Director/Designee/Individual

Sara Pratt  
Child Care Representative  
Kristen Taylor

White Copy - Facility File  
 Yellow Copy - Operator

\*Preschool Building



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## Child Care Facility Data Sheet

|   |   |                                     |                                     |
|---|---|-------------------------------------|-------------------------------------|
| Facility Name   | <u>First Baptist</u>                        | Date                                | <u>9-10-21</u>                      |
| Physical Address  | <u>300 N. Church St.</u>                    |                                     |                                     |
| Operator  | <u>Christine Allred</u>                     | Daytime Telephone Number            | <u>662-718-0018</u>                 |
| <input checked="" type="checkbox"/> Commercial Facility | <input type="checkbox"/> Occupied Residence | Year Building was constructed _____ |                                     |
| Total # of Floors                                       | <u>2</u>                                    | # of Floors Used for Child Care     | <u>1</u>                            |
|   |   | # of Rooms                          | <u>7</u>                            |
|   |   | # of Rooms Used for Child Care      | <u>7</u>                            |
| Construction: Masonry                                   | <input type="checkbox"/>                    | Brick                               | <input checked="" type="checkbox"/> |
|   |   | Frame                               | <input checked="" type="checkbox"/> |
|   |   | Metal                               | <input type="checkbox"/>            |
|   |   | Other                               | _____                               |

### I. Building/Grounds

Mark: In = Incompliance with Regulations    Out = Out of compliance with regulations    NA = Does not apply

#### A. General

- | In                                  | Out                      | NA                                  |   |
|-------------------------------------|--------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 1. Two (2) easily opened outward opening doors (minimum 32 inches wide) equipped with single action opening hardware.   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 2. Walls – <input type="checkbox"/> clean <input type="checkbox"/> repair <input type="checkbox"/> paint <input type="checkbox"/> replace   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 3. Floors – <input type="checkbox"/> clean <input type="checkbox"/> repair <input type="checkbox"/> paint <input type="checkbox"/> replace  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 4. Ceiling – <input type="checkbox"/> clean <input type="checkbox"/> repair <input type="checkbox"/> paint <input type="checkbox"/> replace   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 5. Plug covers on all outlets.  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 6. Barriers installed as needed – <input type="checkbox"/> kitchen <input type="checkbox"/> stairways <input type="checkbox"/> windows <input type="checkbox"/> porches <input type="checkbox"/> other _____  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 7. Handrails – <input type="checkbox"/> steps <input type="checkbox"/> landings <input type="checkbox"/> toilets <input type="checkbox"/> other _____   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 8. Heating/cooling – <input type="checkbox"/> gas <input checked="" type="checkbox"/> electric <input type="checkbox"/> other _____<br>Note – Non-electric heat/cool systems or appliances require carbon monoxide monitors to be installed as well as smoke detectors. All gas heaters must be vented to outdoors. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 9. Unapproved heaters (must be removed).  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 10. Adequate, proper heating and/or cooling systems.  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 11. Child safe thermometers at child level in every room utilized by children.  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 12. Adequate lighting. Note – All lights must be shielded.  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 13. Telephone accessible to caregivers.   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 14. Individual compartments or hooks for each child.  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 15. Diaper changing stations in all rooms housing children who are not toilet trained.<br>Note – Diaper changing stations must have hot and cold water and may not be used for any purpose except diapering. Number of diaper changing stations _____.  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 16. Approved – <input type="checkbox"/> waste water <input type="checkbox"/> water supply   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 17. Emergency evacuation plan posted.   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 18. Hot and cold running water at all handwashing sinks.  |
| <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 19. Building constructed prior to 1965 has been tested for lead.  |



**B. Kitchen/Food Preparation Area**

In Out NA

- ☒ ☒ ☒ 1. Adequate refrigeration with thermometer.
- ☒ ☒ ☐ 2. Adequate cooking appliances (stoves/microwaves/ovens)  
Note - Number and Type must be based on menu evaluation and number of meals to be prepared.
- ☐ ☐ ☒ 3. Approved stove hood, vented to outside per fire codes.
- ☐ ☐ ☒ 4. Separate freezer when 50+ children are served.
- ☒ ☒ ☐ 5. Approved dishwasher. \_\_\_\_\_
- ☐ ☐ ☒ 6. Three (3) compartment sink.
- ☒ ☒ ☐ 7. Food preparation sink.
- ☐ ☐ ☒ 8. Mop sink.
- ☒ ☒ ☐ 9. Handwashing sink. Note - All sinks must have hot and cold water.

**C. Grounds**

In Out NA

- ☒ ☒ ☐ 1. Approved play area with fence.
- ☒ ☒ ☐ 2. All hazards including non-approved playground equipment removed.
- ☒ ☒ ☐ 3. Playground equipment approved before installation.
- ☒ ☒ ☐ 4. Playground completed before opening for business.
- ☒ ☒ ☐ 5. Safe arrival/departure areas.
- ☒ ☒ ☐ 6. Soil tested for lead.
- ☒ ☒ ☐ 7. Other \_\_\_\_\_

**II. Furniture And Equipment****A. Furniture**

In Out NA

- ☒ ☒ ☐ 1. Appropriate
- ☒ ☒ ☐ 2. Child size
- ☒ ☒ ☐ 3. Adequate number

**B. Equipment**

In Out NA

- ☐ ☐ ☒ 1. Approved location of laundry equipment
- ☒ ☒ ☐ 2. Recommended toys appropriate for ages of children are available.
- ☒ ☒ ☐ 3. Approved bedding - ☐ cribs ☐ cots ☒ pads

Note - 24 hour and night time care require bedding with minimum 3 inch mattresses.

**III. Other**

In Out NA

- ☒ ☒ ☐ Complies with local zoning, building and fire safety codes.

**IV. Recommendations**

*Christine Allred*  
Operator/Center/Date

*San Prust*  
Licensing Officer