



## MISSISSIPPI STATE DEPARTMENT OF HEALTH

# Child Care Facility Inspection Report

EUPORA HEAD START CENTER

License #: 7407

Director: VIRGINIA THOMAS

Inspection Date: 04/11/2022

Annual/Mid Inspection

Inspector: Paulette Elliott

### 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 and children records, the facility failed to assure that they had a current MSDH 121 on each employee and child. Record review revealed one (1) employee and five (5) children records lacked a current MSDH 121 form. Person responsible for maintaining compliance will be Virginia Thomas, Director. Compliance due for completion by 04/25/2022.

**Person Responsible:** Virginia Thomas **Date for Completion:** Due By 04/25/2022

### Kitchen Violations Cited

No violations cited.

### Nutritional Guidelines Violations Cited

No violations cited.

### Playground Violations Cited

No violations cited.

### Toddler Classroom Violations Cited

EHS 1 - Classroom Number: 1

No violations cited.

Toddler Classroom - Classroom Number: 1

### **Twos Classroom Violations Cited**

EHS 3 - Classroom Number: 3

No violations cited.

Twos Classroom - Classroom Number: 3

### **Preschool Classroom Violations Cited**

4 - Classroom Number: 4

No violations cited.

Preschool Classroom - Classroom Number: 4

2 - Classroom Number: 2

No violations cited.

Preschool Classroom - Classroom Number: 2

### **Legend**

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

### **Child Care Director Signature**



### **MSDH Licensure Representative Signature**

