



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Facility Inspection Report

LITTLE ANGELS LEARNING AND CHILD CARE CENTER #2

License #: 5528

Director: SUE HARRIS

Inspection Date: 07/14/2021

Annual/Mid Inspection

Inspector: Shenika Pratt

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)
2. **Out of Compliance:** All volunteer records are present and up-to-date. (Rule 1.6.5 Page 31)
3. **COS:** If facility doesn't provide liability insurance, a statement is in the child's record signed by the parent. (Rule 1.4.1 Page 15)
4. **COS:** Insurance adequately covers transportation of children. (Rule 1.15.2 Page 75)
5. **Out of Compliance:** Transportation policy which ensures the (1) proper loading and unloading of children is present, (2) proper occupant restraint in vehicles is present, (3) proper staff-to-child ratios are maintained at all times during transportation is present. (Rule 1.15.2 Page 75)

Plan of Correction

1. **POC:** The director Sue will submit a copy of volunteer record sheet. She will be responsible for assuring it is properly being managed at all times and doesn't exceed the 120 hours.
Person Responsible: Sue Harris **Date for Completion:** July 27th
2. **POC:** The director will update the transportation policy with procedures on how they load and unloading children upon arrival and departure. She will assure that all health and safety practices are being followed and documented to assure safety.
Person Responsible: Sue Harris **Date for Completion:** July 27th
3. **POC:** The Licensing received a copy of the current auto and liability insurance. The deficiency was corrected on site.
Person Responsible: Sue Harris **Date for Completion:** July 13th

Kitchen Violations Cited

No violations cited.

Nutritional Guidelines Violations Cited

No violations cited.

Playground Violations Cited

No violations cited.

School Age Room Violations Cited

Gym - Classroom Number: 1

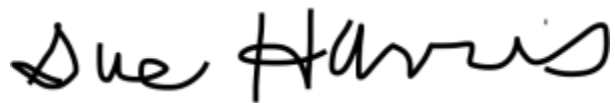
No violations cited.

School Age Room - Classroom Number: 1

Legend

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

Child Care Director Signature

A handwritten signature in black ink that reads "Sue Harris". The script is cursive and fluid.

MSDH Licensure Representative Signature

A handwritten signature in black ink that reads "John Pater". The script is cursive and fluid.