



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Facility Inspection

County <u>Chickasaw</u>	Date <u>4-8-21</u>
Facility Name <u>Q3A</u>	License Number <u>7391</u>
Purpose <u>Midyear</u>	Capacity <u>45</u>

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 type="checkbox"/>	<input checked="" 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

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. <u>Rule 1.9.1(1) x 12</u>	\$ <u> </u>
2. <u>Rule 1.11.2 x 19</u>	\$ <u> </u>
3. <u> </u>	\$ <u> </u>
4. <u> </u>	\$ <u> </u>
5. <u> </u>	\$ <u> </u>

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

Walls, ceilings, floors, toys, equipment clean and in good repair	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hot water at all sinks, not to exceed 120°	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Playground equipment meets standards	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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> </u>)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

	Age/Child/Staff Name
<u>Rm1</u> 1.	<u>1, 30, Caregiver 1-2</u>
<u>Rm3</u> 2.	<u>Infants, 4, Caregiver 3</u>
<u>Rm4</u> 3.	<u>No children</u>
<u>Rm2</u> 4.	<u>No children</u>
5.	
6.	
7.	

Center Director/Individual

Child Care Representative

White Copy - Facility File

Yellow Copy - Facility Operator

Mississippi State Department of Health

12-10-08

Form No. 281



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District

II

Date

4-8-21

Name

Q3 A Learning Center

License No.

7391

Address

495 Parish St. Houston, MS 38851

Center/Organization/Individual

Purpose

Midyear

Director

Nevenka Gamble

Mileage Start

Mileage End

County

Chickasaw

Telephone No.

662-631-5088

Time In

11:35

Time Out

2:40

Total Time

Findings/Comments

Here to conduct a Midyear inspection. Upon arrival the LO met with the director, Nevenka Gamble.

- Staff 121's and LOS's in Compliance
- Kitchen rec'd an A, No critical violations

Subchapter 8: Staffing

Deficiency: Rule 1.8.1 (1) The Staff-to-child ratio shall be maintained at all times.

Findings: Based upon observations made while touring the facility, the facility failed to maintain Staff-to-child ratio in Rm 1. There were 30 children ages ranging from 1-3yrs with two caregivers, Rm 1 was over 12 children.

POC:

The director understands that Staff-to-child ratio shall be maintained at all times. The director called Caregiver 4 to come back in to help correct the deficiency Staff-to-child ratio. Caregiver 4 along with another caregiver went into Rm 1 leaving ratio 2:21 during nap time. For future references the director will assure that all rooms have adequate staffing and children to assure compliance.

VAG

Center Director/Designee/Individual

Child Care Representative

 White Copy - Facility File
 Yellow Copy - Operator



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter (Continuation)

Date 4-8-21

Facility Name Q3 A Learning License No. 7391

Subchapter II: Buildings and Grounds

Deficiency: Rule 1.11.2, "Every license shall set forth the licensed facility's maximum licensed capacity, which shall be based upon a minimum of thirty-five (35) square feet of usable indoor space per child."

Findings: Based upon observations made while touring the facility, ~~the~~ facility failed to maintain room capacity in Rm 1, which is 11 children. LO observed a total of thirty children in Rm 1 during nap time. Rm 1 was over by 19 children.

POC:

The director, Neneke Gamble understands that Room Capacity for Infants and One years of age shall be maintained at all times. The violation was corrected when caregiver 4 arrived and went into Rm 1 with another caregiver. The one year olds moved to a different classroom with caregiver 1. To prevent from future reoccurrence the director will ~~not~~ maintain adequate staffing and will document number of children for each room on Evacuation floor plan.

LO will follow up at the facility to assure compliance within the next 14 days.

Neneke Gamble
Center Director/Designee/Individual

Ja Pratt
Child Care Representative

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Yellow Copy - Operator



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter (Continuation)

Date 4-8-21

Facility Name Q's A Learning

License No. 7391

T.A. Provided on Rule 1.11.1 (8) The Ceiling, floor, and/or floor covering shall be properly installed, kept clean in good condition, and maintained in good repair. LO observed the facility classroom floor needing to be swept and cleaned thoroughly throughout the facility. LO will follow up and check upon visit. Please have deficiency corrected within next 14 days. XNB

T.A. Provided on Rule 1.11.5 (4) All hand washing lavatories shall have both hot and cold running water. Hot water temperature shall not exceed 120 degrees Fahrenheit. LO observed no hot running water in Room 3. Director called the plumber and piece was ordered to repair deficiency. LO will give facility 14 days to correct by April 22nd. XNB

T.A. Provided on Rule 1.6.3 (8) Each facility shall maintain a notebook with current MSDH 121's on both staff and children. LO observed two children needing updated 121's. LO will give 14 days for the facility to submit or have present upon LO follow up visit. XNB

"Class I and II violations may result in a monetary penalty. Repeated violations may result in the doubling of a monetary penalty, suspension, or revocation of the license."

Nevada Gandy
Center Director/Designee/Individual

[Signature]
Child Care Representative

White Copy - Facility File
Yellow Copy - Operator

Food Service Facility Inspection Results

PIMS ID 7391	Facility Name, Address Q-A Learning Center 415 Parish St. Houston, MS	Date 4-8-21
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CRITICAL VIOLATIONS	CORRECTION PLAN AND SCHEDULE
<p>- No Critical Violations on today's visit</p> <p>"A"</p>	

<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	Environmental Code SP2
Please Reimburse within 10 days to:	

Neville Gandy **7391**
 Certified Manager Licence Number

Facility Signature Neville Gandy
Environmental Signature [Signature]

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

Playground Checklist

Center Name Q's A Learning Inspection Date 4-8-21
 Name of Licensing Official Shenika Pratt License # 7391

- | Yes | No | N/a | |
|-------------------------------------|-------------------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Playground fence less than 3 1/4" from surface. (Rule 1.11.9 (8), p 60)
In good repair, with no gaps. (Rule 1.11.9 (8), p 60) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Two entrances/exits, with one being remote from the building. (Rule 1.11.9 (8), p 60) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 3. Surfacing adequate. If not, where is it inadequate? (CPSC, 2.4.2, pp 9-10) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 4. AC units, high-voltage cabling/wires inaccessible. (Rule 1.11.9 (5), p 59) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. No standing water present on playground or in/on playground equipment or Walkways. (CPSC 2.4.2.2, p5, p 10) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Toys & equipment in good repair. (None broken/deteriorating) (Rule 1.10.2 (2), p 46) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. Sidewalks provide smooth walking surface. (No trip hazards) (CPSC 3.6, pp 16-17) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 9. Bolts on equipment and fence <2 threads beyond the nut? (Rule 1.11.9 (5), p 59)
All bolts and fencing twists/wires facing away from the playground area |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 10. Tree limbs at least 7ft. above play surfaces? Is fence free of brush/overgrowth? (CPSC 3.4, 3.5, p 16) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 11. Use zones adequate? If not, where are they inadequate? (CPSC 5.3.9, p 41) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 12. If swings are present, are S-hooks in good repair? If not, state deficiency.
(CPSC 3.2, p 14; 2.5.2, p 11; 5.3.8.1, p 37) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 13. If slide is present, is exit height/exit zone adequate? If not, state deficiency.
(CPSC 5.3.6.4-5 pp 34-36) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 14. Spring rockers a minimum of 6 ft. apart? (CPSC 5.3.7, pp 36-37) (ASTM 9.5.1.2) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 15. Age-appropriate equipment being used?
If not, state which pieces are inappropriate. (CPSC 2.2.6, p 6) (Rule 1.10.2, p 46) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 16. Playground area clean & free of hazards? (Rule 1.11.11 (1), p 61)
If not, state deficiency. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 17. Adequate shade is present on the playground. (CPSC 2.1.1, p 5) (Rule 1.11.9 (7), p 60) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 18. Concrete footings located a minimum of 6" beneath the surface.
(CPSC 3.6, pp16-17) (Rule 1.10.2 (3), p 46) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 19. Is wood smooth? Documentation providing wood has been properly treated.
(CPSC 2.5.5, p 12) |

Director

Shenika Pratt

Licensing Official

[Signature]