



MISSISSIPPI STATE DEPARTMENT OF HEALTH

## Child Care Facility Inspection

County <u>Hinds</u>	Date <u>4/11/19</u>
Facility Name <u>Jacob's Ladder Center II</u>	License Number <u>#6870</u>
Purpose <u>Mid Year</u>	Capacity <u>74</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 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

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.	Infant / 2 / Caregiver # 1 / 3 Caregiver # 2
2.	1-2 yrs / 7 / Caregiver # 3
3.	3yrs-4yrs / 12 / Caregiver # 4
4.	
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

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

Center Director/Individual [Signature]Child Care Representative [Signature]



MISSISSIPPI STATE DEPARTMENT OF HEALTH

## Child Care Encounter

District \_\_\_\_\_

Date 4/10/19

Name 25CDPFA-6870  
JACOB'S LADDER CENTER FOR LEARNING II  
 Address 5452 N STATE ST  
Jackson, MS 39206

License No. \_\_\_\_\_

on/Individual \_\_\_\_\_

Purpose Mid-year Mid-year Director \_\_\_\_\_

Mileage Start \_\_\_\_\_ Mileage End \_\_\_\_\_

County Hinds Telephone No. \_\_\_\_\_

Time In \_\_\_\_\_ Time Out In 8:00 am Total Time out 9:42 am

## Findings/Comments

Upon arrival licensing official DENISE LOVE AND MARILYNDA BEECH-LEE Branch Director. I met with the director, Mrs Linda Stuckey present. This visit is a mid year and technical assistance will be given where needed.

The observation of the building

Technical assistance given in the infant room for

① labeling the bottles (children are removing the tape)  
 ② all infant bottles must be prepared at home. The mother came in while LO presence and the violation was mention. The mother have a second job and bring extra milk in containers. LO stated that mother must prepare all bottles. SEE Appendix C Nutritional Standards. Regarding bottles should be discard any milk left in the bottle. Breast milk or formula shall be brought to child care facility daily, ready to be warmed and fed.

Subchapter 9 Program & Activities

Rule 1.9.6. Television Viewing, including video tapes and/or electronic media, is not allowed for children under the age of two or for staff in the infant and toddler area. The playing of soothing music in the infant and toddler area is acceptable.

Finding: In the infant room LO observed (2) infants watching T.V.

P.O.C: Ms. Stuckey stated that she will do music only, on the T.V. T.V. must be remove from the infant room per regulations. MSR 4/1/19

Contact DENISE LOVE OR LISA ALLEN AT (601) 364-2827

The green card was give

Class I. And Class II violations may result in a monetary penalty. Repeated violations may result in the doubling of monetary penalties, suspension or revocation.

Linda Stuckey  
 Center Director/Designee/Individual

Denise Love  
 Child Care Representative

White Copy - Facility File  
 Yellow Copy - Operator

# Food Service Facility Inspection Results

PIMS ID	Facility Name	25CDPFA-6870 JACOB'S LADDER CENTER FOR LEARNING II 5452 N STATE ST Jackson, MS 39206	Date 4/14/19
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## CRITICAL VIOLATIONS

## CORRECTION PLAN AND SCHEDULE

<p>No violations found</p> <p>"A"</p> <p>Issued</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 checked="" 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	Environmentalism Code
Please Remit within 10 days to:	

Ashley N. Taylor Tummy Safe  
 Certified Manager Licence Number

Facility Signature <u>Linda Suckley</u>
Environmentalism Signature <u>Wendy Bone</u>

White Copy - Facility  
 Yellow Copy - PIMS  
 Pink Copy - Environmentalism

## Child Care Licensure Playground Checklist

Inspection Date 4/10/19

Center Name \_\_\_\_\_

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)

☒ ☐ ☐ 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)

☒ ☐ ☐ 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 2.5.2, pg 1 & 5.3.8.1, pg 3)

☐ ☐ ☒ 12.

If slide is present, is exit height/exit zone adequate? If not, state deficiency \_\_\_\_\_ (CPSC 5.3.6.4-5 pgs 34-36)

☐ ☐ ☒ 13.

Are spring rockers a minimum of 6 ft. apart? (ASTM 9.5.1.2 & CPSC 5.3.7. pg 36-38)

☐ ☐ ☒ 14.

Is age-appropriate equipment being used? If not, state which pieces are inappropriate \_\_\_\_\_ (Rule 1.10.2, pg 46 & CPSC 2.2.6, pg 8)

☒ ☐ ☐ 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 46)

☒ ☐ ☐ 17.

Are concrete footings located at least 6" beneath the surface? (Rule 1.10.2 (2), pg 46 & CPSC 3.6, pg 16-17)

☐ ☐ ☒ 18.

Is wood smooth? Documentation provided that wood has been properly treated. (CPSC 2.5.5, pg 15)

Director \_\_\_\_\_

Licensing Official \_\_\_\_\_

Denise Prose  
Michelle Lusk