



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Facility Inspection

County ItawambaDate 10-1-2020Facility Name Little Indians Learning Center License Number PendingPurpose Follow up/final Capacity _____

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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Room and playground capacity met	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Center capacity met	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
License/complaint visible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Vector control maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Water system approved and functioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Waste water system approved and functioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Food service approved	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Possible Monetary Penalty

	Monetary Penalty
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____

Age/Child/Staff Name

1.	
2.	
3.	
4.	
5.	
6.	
7.	

Other Items - Must be corrected

	In	Out	COS	N/A
Children's belongings separated/stored	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evacuation plans posted	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Menus posted and served	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plan of activities	<input type="checkbox"/>	<input checked="" 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"/>
Heating/cooling approved	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ventilation adequate	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Glass approved and shielded	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Telephone on premises, available, and functioning	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Electrical outlets protected	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Large appliances located properly	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sinks and toilets working properly	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hot water at all sinks, not to exceed 120°	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

First aid kits stocked and easily accessible ☐ ☒ ☐ ☐Playground area clean, shaded, well drained and equipped and fence in good repair ☒ ☐ ☐ ☐Playground equipment meets standards ☒ ☐ ☐ ☐Pool area clean, fenced, and adequately maintained ☐ ☐ ☐ ☒Diaper changing stations adequate in number and each fully supplied (number _____) ☐ ☒ ☐ ☐

Center Director/Individual

Child Care Representative Kim DelGiant



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District IIDate 10-1-2020

Name	<u>Little Indians Learning Center</u>	License No.	<u>Pending</u>
Address	<u>104 James Street Fulton, MS 39843</u>		
<small>Center/Organization/Individual</small>			
Purpose	<u>Follow up/Final</u>	Director	<u>Martha Henderson</u>
Mileage Start		Mileage End	
County	<u>Itawamba</u>	Telephone No.	<u>662-262-3535</u>
Time In	<u>3:54</u>	Time Out	<u>5:40</u>
		Total Time	

Findings/Comments Here for a follow up/final inspection.
The licensing official met with the owner upon arrival.

Form # 281 and Form # 286 has been completed and discussed with the owner.

Anything marked out on Form # 281 and Form # 286 must be in compliance before a license will be issued.

The Child Care Checklist has been discussed and provided to the owner. Everything on the Child Care Checklist must be in compliance before a license is issued.

Technical Assistance:

Rm #1 does not have a diaper handwashing sink in the classroom. The licensing official recommends removing a wall to increase room capacity and access to a diaper handwashing sink.

Rm #5 has added a wall and needs to be re-measured.

Follow up/final inspection scheduled for October 15, 2020 at 4:00 pm.

[Signature]
 Center Director/Designer/Individual

[Signature]
 Child Care Representative

White Copy - Facility File
 Yellow Copy - Operator



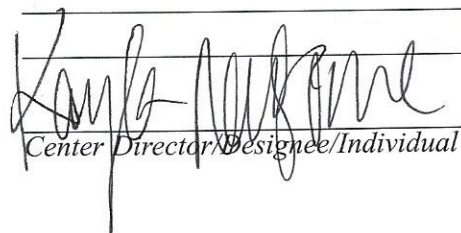
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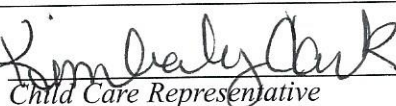
**Child Care Encounter
(Continuation)**Date 10-1-2020Facility Name Little Indians Learning Center License No. Pending

- Hand washing sink must added to the kitchen.
The licensing official recommends a 3 compartment
Sink.

- Facility does not transport. Vehicle insurance
not required.

- Add transportation policy to handbook


Center Director/Designee/Individual


Child Care Representative

White Copy - Facility File
Yellow Copy - Operator