



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Facility Inspection

County Rankin Date 03.25.2019
Facility Name Mid-year/TA License Number 153
Purpose Mid-year/TA Capacity 153

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.	2 year. 12. Caregiver 1
2.	3 year. 12. Caregiver 2
3.	3 year. 12. Caregiver 3
4.	Infants. 14. Caregiver 4, 5, 6
5.	1 year. 4. Caregiver 7
6.	1 year. 8. Caregiver 8
7.	1 year. 9. Caregiver 9
	2 year. 9. Caregiver 10
	4 year. 21. Caregiver 11, 12
	4 year. 15. Caregiver 13, 14

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 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	<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 <u>6</u>)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--	--------------------------	--------------------------	--------------------------	--------------------------

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 5

Date 03.25.19

Name _____	License No. _____
Address _____	Center/Organization/Individual _____
Purpose <u>Mid-Year / TA</u>	Director _____
Mileage Start _____	Mileage End _____
County <u>Rankin</u>	Telephone No. _____
Time In <u>10:15 am</u>	Time Out <u>11:50 am</u>
Total Time _____	

Findings/Comments Upon arrival, the licensing officials met with director Mrs. Christie Copeland.

The purpose of this visit is to conduct a mid-year inspection and provide technical assistance.

Rule 1.11.8(9) - LO observed no thermometers in classrooms. LO provided technical assistance explaining thermometers that do not present a hazard to children shall be placed on interior walls in every activity area at children's height.

Rule 1.6.3(8) - LO observed 2 students expired and 1 staff without a MS DH BI form. Please submit within 14 days.

Rule 1.5.2(3) - LO observed 1 staff with an expired letter of suitability from another licensed child care provider. Staff shall not be left alone until a valid letter is provided. Please submit to LO within 60 days.

customer survey card provided to Mrs. Christie Copeland.

Christie Copeland
Center Director/Designed/Individual

Ameria Davis
Child Care Representative
Azela E. Lewis

"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"

Food Service Facility Inspection Results

PIMS ID	Facility Sunshine Learning Center 5635 Highway 80 East Pearl, MS 39208 Ph.: 601-939-0854 Lic.: 61CFPFA-0617 Director: Christie Copeland	Date 3.25.19
---------	--	-----------------

CRITICAL VIOLATIONS

CORRECTION PLAN AND SCHEDULE

<p>No Critical Violations on today's visit.</p> <p style="text-align: center; font-size: 2em;">A</p>	
--	--

<input checked="" 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 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 JP5
Please Remit within 10 days to:	

Christie Copeland Tummy Safe
 Certified Manager Licence Number
 Exp: 01/14/2021

Facility Signature	<i>[Signature]</i>
Environmental Signature	<i>[Signature]</i>

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

Playground Checklist

Sunshine Learning Center
5635 Highway 80 East
Pearl, MS 39208
Ph.: 601-939-0854
Lic.: 61CFPFA-0617
Director: Christie Copeland

Inspection Date

03.25.2019

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 14; 2.5.2, pg 1 & 5.3.8.1, pg 37)

☒ ☐ ☐

12.

If slide is present, is exit height/exit zone adequate? If not, state deficiency (CPSC 5.3.6.4-5 pgs 34-35)

☒ ☐ ☐

13.

Are spring rockers a minimum of 6 ft. apart? (ASTM 9.5.1.2 & CPSC 5.3.7. pg 36-37)

☒ ☐ ☐

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 6)

☒ ☐ ☐

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 5)

☒ ☐ ☐

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

Demetria Davis
Asst. Dir. Eren