



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Facility Inspection

County Adams Date 6.8.21

Facility Name Little Blessing Daycare License Number 6469

Purpose Renewal Capacity 43

All Items In Red Are Critical

| | In | Out | COS | N/A |
|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| Qualified director present | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Proper staff to child ratio present | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" 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. | 2yr/8/M. Caregiver | 1 |
| 2. | Infant/10/1 | 2 |
| 3. | 1yr/4/G | 3 |
| 4. | 2-3yr/5/1 | 4 |
| 5. | 3yr/10/1 | 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 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 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 Donna L. Lewis Child Care Representative Leahtha SanderWhite Copy - Facility File Yellow Copy - Facility Operator
Mississippi State Department of Health

12-10-08

Form No. 281

Little Blessing Daycare
Director: Rhonda McElroy
19 Ridgeway Road
Natchez MS, 39120
601-445-5300 License #6469



Page 1 of

Child Care Encounter

District 7

Date 10.8.21

| | |
|------------------------|--------------------------------|
| Name | License No. |
| Address | Center/Organization/Individual |
| Purpose <u>Renewal</u> | Director |
| Mileage Start <u>—</u> | Mileage End <u>—</u> |
| County <u>Adams</u> | Telephone No. |
| Time In <u>10:25</u> | Time Out <u>2:15</u> |
| Total Time | |

Findings/Comments Arrived at the facility and met with J. Clay stated purpose for visit "renewal" inspection.

Subchapter 8
Deficiency 1.8.1 (3) states "During all hours of operation, including arrival & departure of children, a child care facility employee shall be present to whom administrative and supervisory responsibilities have been assigned. This child care facility employee shall meet the minimum qualifications of a director designee."

Findings: Based on observations while touring the facility, the facility failed to have a qualified director or designee on site.

P.O.C The owner will be responsible for ensuring that a qualified director/designee is present at all times. In a situation when a qualified staff is not available, the facility will be closed until a qualified staff is placed in this position. This was corrected on 10.8.21 when the owner arrived.

Donna Lomus
Center Director/Designee/Individual

LeKisha Sordifu
Child Care Representative

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MISSISSIPPI STATE DEPARTMENT OF HEALTH

**Child Care Encounter
(Continuation)**Date 0.8.21Facility Name Little Blessing Daycare License No. 0469Subchapter 0

Deficiency: Rule 1.5.2 states "All operators, employees and prospective employees of a child care facility and any individual residing in a residence licensed as a child care facility shall have a criminal history record check, a child abuse registry check and a sex offender registry check."

Findings: Based on observation during records review, the facility failed to conduct the required criminal history records check, etc on 3 employees. These 3 employees were alone in separate classrooms providing unsupervised care to the children.

P.O.C.: The director/owner will develop a policy that will ensure that all new employees either have a valid L.O.S from another facility or that within 10 days from date of employment the proper documents will be submitted to MS DH and MDHS. This will be monitored by the director/owner daily. This was corrected today Classroom #4 Caregiver was placed in room # 5^{2yr} and the children were combined with room # 3 (1 yr) and (2-3 yr). Room # 1 The Owner D. Loomis replaced caregiver with no (LOS) and Room # 2 the infant Kitchen staff with LOS was placed in room with a caregiver with no LOS. Call was made to finger print and no letters or finger prints have been received from facility.

Donna Loomis
Center Director/Designee/Individual

Le Kuoha Sandif
Child Care Representative

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MISSISSIPPI STATE DEPARTMENT OF HEALTH

**Child Care Encounter
(Continuation)**Date 4.8.21

Facility Name Little Blessing DayCare License No. 6469
owner Stated prints were mailed on "5.25.21"
Worker # 1 start date 4.7.21
Worker # 2 start date 5.18.21
Worker # 3 start date 5.24.21

Subchapter B

Deficiency Rule 1.8.1(1) The staff to child ratio shall be maintained at all times, to include when children are arriving and departing the facility.

Findings: Based on observations while touring the facility, the facility failed to maintain the minimum staff to child ratio in classroom #2. There was 1 staff with 6 children, ages 0 - 12 months, in the classroom. Per regulations, the min. staff-to-child ratio for Infants is (1) one staff to 5 children. This resulted in the facility being 1 child over ratio.

owner /
P.O.C: The director will hire a floater or substitute teacher with a valid letter of suitability to utilize when a care giver is absent. This was corrected on site. The Kitchen staff was placed in room with the care giver.

Donna Loomis LeKrohn Sandy
Center Director/Designee/Individual Child Care Representative

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MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter (Continuation)

Date 6.8.21.

Facility Name Little Blessing Daycare License No. 6469

TA was provided on the following:

Rule 1.9.4 (d) Items such as but not limited to pillows, blankets, sheepskins, bumpers, soft objects, stuffed toys, loose bedding, etc. shall NOT be in the crib.

Findings: L.O observed blankets, bumpers, bouncers and stuffed toys in (4) cribs with infants. Items were removed immediately by caregiver and TA was provided. The owner will be responsible for monitoring daily to ensure compliance. P.O.C 6.8.21.

Rule 1.9.6 (b) Providers should limit the use of equipment such as strollers, swings and bouncer seats/chair for holding infants while they are awake.

Findings: L.O observed (1) infant asleep in swing and (1) infant in bouncer asleep. Caregiver removed both children and placed them in cribs. The owner/director will be responsible for ensuring compliance at all times.

Rule 1.11.7 (6) Any latch or other fastening device on an exit door shall be provided with a knob, handle, panic bar, or other simple type of releasing device. Dual action door fasteners are not permitted.

Danna Lomus Lekeona Sandifer
Center Director/Designee/Individual Child Care Representative

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MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter (Continuation)

Date 6.8.21

Facility Name Little Blessing DayCare License No. 6469
L.O observed back exit door in need of single action
door knob. Owner agreed to purchase new
Knob D.O.C 6.11.21.

Appendix C page 15 Processed, pre-fried meats are
not allowed due to the sodium / salt and fat
content. Meats not allowed: hot dogs, corn dogs,
bologna, bacon, sausage, pancake sticks, small
chicken nuggets, fish sticks, and steak fingers.

Rule: 1.4.4 L.O. observed (1) school Age child in
facility. The student is the grandchild of
Kitchen / caregiver. The owner agreed that the
(1) child will not return to the facility. The facility
is not licensed for Afterschool. D.O.C 6.8.21.
The student was taken home.

License expires 8.31.21 please provide L.O
a copy of Fire Survey Form #333, Updated
menus, and contact hours.

*Please visit www.healthhymnms.com to sign
staff members up for the 3 state courses.

A green survey card was given to owner.

A follow-up
visit will be
done.

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

Donna Loomis DeKisha Sanderfer
Center Director/Designee/Individual Child Care Representative

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MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Program Review

Facility Name

Little Blessing
Daycare

License No.

L4409

Date

6.8.21

| | Yes | No | N/A | |
|-----|-------------------------------------|-------------------------------------|-------------------------------------|--|
| 1. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Policies and procedures (<i>Parent's Handbook</i>) {Rule 1.4.1} |
| 2. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proof of Accident/Liability Insurance or documentation that parent has been notified that no insurance is in effect {Rule 1.4.1 (i) & (j)} |
| 3. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Approved arrival and departure procedures {Rule 1.4.1 (2)} |
| 4. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Letter of suitability for staff {Rule 1.5.2 & Rule 1.6.4 (1) (f)} |
| 5. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Attendance records for children and staff {Rule 1.6.3 (1)} |
| 6. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Current alphabetical roster of children (<i>includes date of birth</i>) {Rule 1.6.3 (2)} |
| 7. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Current staff roster (<i>includes date of birth & date of hire</i>) {Rule 1.6.3 (3)} |
| 8. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Monthly records of fire/disaster drills {Rule 1.6.3 (5)} |
| 9. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Medication record with date, time, signature for 90 days {Rule 1.6.3 (6)} |
| 10. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Immunization Records for Children and Staff {Rule 1.6.3 (8)} |
| 11. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Personnel records (<i>attach employee's records form</i>) {Rule 1.6.4} |
| 12. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Volunteer records {Rule 1.6.5 & Rule 1.6.6} |
| 13. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Children records (<i>attach children's records form</i>) {Rule 1.6.7} |
| 14. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Reports of serious occurrences made as required {Rule 1.7.1} |
| 15. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Communicable diseases reported as required {Rule 1.7.3} |
| 16. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Daily written reports provided to parents for infants and toddlers {Rule 1.7.4} |
| 17. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Staff present who hold valid CPR and First Aid Certification {Rule 1.8.1 (4) & (5)} |
| 18. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Age appropriate program of activities posted in each room {Subchapter 9} |
| 19. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Required toys present in infant room {Rule 1.10.1 (2)} |
| 20. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Required toys present in toddler room {Rule 1.10.1 (3)} |
| 21. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Required toys present preschool room {Rule 1.10.1 (4)} |
| 22. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Licensed pest control contractor {Rule 1.11.14} |
| 23. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Pets present (<i>proof of immunization as required, signed by veterinarian</i>) {Rule 1.12.6} |
| 24. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Appropriate discipline policy followed {Subchapter 14} |
| 25. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Appropriate transportation policy followed {Subchapter 15} |
| 26. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Infant feeding schedules posted (<i>Appendix C, VII</i>) |

Comments/Recommendations

☐ Pass –License to be issued: ☐ Regular ☐ Probational ☐ Restricted☐ Fail☐ Follow-up within _____ days☒ Director☐ Designee

Danna Loomis *Lekisha Sndife*
Child Care Representative

Food Service Facility Inspection Results

| | | |
|-------------------------|---|-----------------------|
| PIMS ID U4U09 | Facility Name, Address Little Blessing Daycare 19 Ridgeway Rd, Natchez MS 39120 | Date 4.8.21 |
|-------------------------|---|-----------------------|

CRITICAL VIOLATIONS

CORRECTION PLAN AND SCHEDULE

| | |
|---|--------------------------|
| <p>NO critical violations @ the time of visit.</p> | <p>"A" Issued</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 |

Donna Loomis TS 12.13.24
 Certified Manager Licence Number

| |
|---|
| Facility Signature <i>Donna Loomis</i> |
| Environmental Signature <i>DeKisha Smither</i> |

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

Please Remit within 10 days to:

Child Care Licensure Playground Checklist

Center Name Little Blessing DayCare Inspection Date 6.8.21

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 Donna Loomis

Licensing Official Lekecha Shidifu