



MISSISSIPPI STATE DEPARTMENT OF HEALTH

# Child Care Facility Inspection

County Sunflower Date 2/8/18  
 Facility Name Buck-A-Roo Learning Center License Number 67C4PF-7149  
 Purpose Renewal ITA Capacity 60

### 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 / 6 / Caregiver #1
2.	" " " " #2
3.	12-24 months / 7 / Caregiver #1
4.	" " " " #2
5.	1 years / 6 / Caregiver #1
6.	" " " " #2
7.	2-3 year / 7 / Caregiver #1
	" " " " #2

### 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 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 <i>see playground checklist</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Playground equipment meets standards <i>see playground checklist</i>	<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 readily supplied (number <u>04</u> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Center Director/Individual Helen Buckner

Child Care Representative Nana Jones



MISSISSIPPI STATE DEPARTMENT OF HEALTH

# Child Care Encounter

District 3

Date 2/8/18

Name BUCK-A-RID LEARNING CENTER License No. 67C4PF-7149  
 Address 805 HOOPER ST. INDIANOLA MS 38751  
Center/Organization/Individual  
 Purpose RENEWAL / TA Director HELEN BUCKNER  
 Mileage Start \_\_\_\_\_ Mileage End \_\_\_\_\_  
 County SUNFLOWER Telephone No. (662) 445-2503  
 Time In 9:17 AM Time Out 11:20 AM Total Time \_\_\_\_\_

Findings/Comments THE PURPOSE FOR VISIT IS FOR A RENEWAL INSPECTION. LICENSING MET WITH NATALIE BLOCK, DIRECTOR DESIGNEE WHO ASSISTED W/ THE WALKTHROUGH.

THERE WERE NO DEFICIENCIES OBSERVED ON TODAY'S VISIT. FACILITY PASSED TO A REGULAR LICENSE.

IF THERE ARE ANY QUESTIONS OR CONCERNS, CONTACT DANA JONES @ (662) 887-4951.

TECHNICAL ASSISTANCE WAS PROVIDED ON ORGANIZING RECORDS.

A CHILDCARE SURVEY WAS LEFT W/ HELEN BUCKNER, DIRECTOR.

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 a license.

Helen Buckner  
Center Director/Designee/Individual

Dana Jones  
Child Care Representative

White Copy - Facility File  
Yellow Copy - Operator



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Program Review

Facility Name Buck-A-Loo Learning Center License No. 7149 Date 2/8/18

- |     | Yes                                 | No                                  | N/A                                 |  |
|-----|-------------------------------------|-------------------------------------|-------------------------------------|--|
| 1.  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <b>Policies and procedures (Parent's Handbook)</b> {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 checked="" type="checkbox"/> | <input 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 (includes date of birth) {Rule 1.6.3 (2)}  |
| 7.  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Current staff roster (includes date of birth & date of hire) {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 checked="" type="checkbox"/> | <input type="checkbox"/>            | <b>Medication record with date, time, signature for 90 days</b> {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"/>            | <b>Personnel records (attach employee's records form)</b> {Rule 1.6.4}   |
| 12. | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Volunteer records {Rule 1.6.5 & Rule 1.6.6}  |
| 13. | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <b>Children records (attach children's records form)</b> {Rule 1.6.7}  |
| 14. | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <b>Reports of serious occurrences made as required</b> {Rule 1.7.1}  |
| 15. | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <b>Communicable diseases reported as required</b> {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"/>            | <b>Staff present who hold valid CPR and First Aid Certification</b> {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 type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Licensed pest control contractor {Rule 1.11.14}  |
| 23. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Pets present (proof of immunization as required, signed by veterinarian) {Rule 1.12.6}   |
| 24. | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <b>Appropriate discipline policy followed</b> {Subchapter 14}  |
| 25. | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <b>Appropriate transportation policy followed</b> {Subchapter 15}  |
| 26. | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Infant feeding schedules posted (Appendix C, VII)  |

DO NOT TRANSPORT

Comments/Recommendations \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Pass -  
License to be issued:  Regular  Probational  Restricted  
 Fail  
 Follow-up within \_\_\_\_\_ days  
 Director  Designee

Helen Buchner  
Director

Dana Jones  
Child Care Representative

# Food Service Facility Inspection Results

PIMS ID 7149	Facility Name, Address 805 HOVELS L. INDIANLAND MS BUCK-A-ROO LEARNING CENTER SW/ST	Date 2/8/2018
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## CRITICAL VIOLATIONS

## CORRECTION PLAN AND SCHEDULE

<p>NO CRITICAL VIOLATIONS OBSERVED</p>	<p>met compliance</p> <p>Facility rec'd A "A"</p>
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<input type="checkbox"/> 92020 Scheduled	<input checked="" type="checkbox"/> 92010 Permit No Charge
<input type="checkbox"/> 92030 Followup	<input type="checkbox"/> 92015 Permit 1 \$30.00
<input type="checkbox"/> 92040 Complaint	<input type="checkbox"/> 92011 Permit 2 \$100.00
<input type="checkbox"/> 92050 Consultation	<input type="checkbox"/> 92012 Permit 3 \$150.00
<input type="checkbox"/> 92070 Plan Review/Const.	<input type="checkbox"/> 92013 Permit 4 \$200.00
<input type="checkbox"/> 92080 No Inspection	
<input type="checkbox"/> 92090 Restaurant Training	

Permit Date	Environmental Code D53
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Please Remit within 10 days to:

Helen Buckner  
Certified Manager

Tummy Sate  
Licence Number  
exp: 7/2018

Facility Signature Helen Buckner
Environmental Signature Diana Jones

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

# Child Care Licensure Playground Checklist

Center Name Buck-A-Boo Learning Center Inspection Date 2/8/18

- | YES                                 | NO                       | N/A                                 |  |
|-------------------------------------|--------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 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)   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 2. 2 entrances/exits, with one being remote from the building? (Rule 1.11.9 (8), pg 60)  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 3. Is surfacing adequate? If not, where is it inadequate? (CPSC, 2.4.2, pg 9-10 & 4.3)   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 4. AC units, high-voltage cabling/wires inaccessible? (Rule 1.11.9 (5), pg 59)   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 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)   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 6. Toys & equipment in good repair? (none broken/deteriorating) (Rule 1.10.2 (2), pg 46)   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 7. Sidewalks provide smooth walking surface? (no trip hazards) (CPSC 3.6, pg 16-17)  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 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)                                 |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 9. Tree limbs at least 7ft. above play surfaces? Is fence free of brush/overgrowth? (CPSC 3.4, 3.5, pg 16)   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 10. Are use zones adequate? If not, where are they inadequate? (CPSC 5.3.9, pg 41)   |
| <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 11. If swings are present, are S-hooks in good repair? If not, state deficiency<br><div style="text-align: right; margin-left: 200px;">(CPSC 3.2, pg 14; 2.5.2, pg 1 &amp; 5.3.8.1, pg 37)</div>   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 12. If slide is present, is exit height/exit zone adequate? If not, state deficiency<br><div style="text-align: right; margin-left: 200px;">(CPSC 5.3.6.4-5 pgs 34-35)</div>                       |
| <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 13. Are spring rockers a minimum of 6 ft. apart? (ASTM 9.5.1.2 & CPSC 5.3.7. pg 36-37)   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 14. Is age-appropriate equipment being used? If not, state which pieces are inappropriate<br><div style="text-align: right; margin-left: 200px;">(Rule 1.10.2, pg 46 &amp; CPSC 2.2.6, pg 6)</div> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 15. Is playground area clean & free of hazards? If not, state deficiency.<br><div style="text-align: right; margin-left: 200px;">(Rule 1.11.11 (1), pg 61)</div>                                   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 16. Is adequate shade present on the playground? (Rule 1.11.9 (7), pg 60 & CPSC 2.1.1, pg 5)   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | 17. Are concrete footings located at least 6" beneath the surface? (Rule 1.10.2 (2), pg 46 & CPSC 3.6, pg 16-17)   |
| <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 18. Is wood smooth? Documentation provided that wood has been properly treated. (CPSC 2.5.5, pg 15)  |

Director Helen Buchner Licensing Official Dana Jones