

MISSISSIPPI STATE DEPARTMENT OF HEALTH

	Cindy Day Care 345 West Congress St.		ection				
County Lincoln	Brookhaven, MS 601-990-7351 License #	1000	5/8	1/8	3		
Facility Name	Director: Cindy Cannon	- 0020	.se Number				
Purpose Renewal		Capacity	26				
All Items In Red Are Critical Qualified director present Proper staff to child ratio present Room and playground capacity met	In Out COS N/A		d and served	= केकेकेक	Out	cos	N/A
Center capacity met License/complaint visible Certified food manager			nd Grounds gs, floors, toys, equipment good repair	-			
Sanitation Approved Garbage and garbage bins maintained Vector control maintained Water system approved and functioning			ing approved	中中中中			
Waste water system approved and functioning Food service approved	7 8 8 8	and function		4			
Possible Monetary Penalty	Monetary Penalty	Large appliant Sinks and to	tlets protected nces located properly ilets working properly all sinks, not to	中中中			
1	- \$	exceed 120° Children ban	red from kitchen	中中			
3	\$	nutritional gr Exits, doors	chine snacks meet uidelines, if present and fastening devices approved and in good				
4.		working orde		1			
1. Qurs 5	taff Name	monoxide m	onke detectors, carbon onitors, fire extinguishers neters placed properly and	4		П	
2.	1.0		stocked and easily accessil	ole [• 🗆		
3. 4/5 yrs 3	cg. 2		area clean, shaded, well equipped and fence in good				
5.			equipment meets standards	-			
6. 7.		Pool area cle maintained	ean, fenced, and adequately				
Center Director/Individual_	iadelanaon	number and (number	ging stations adequate in each fully supplied are Representative	7.5	a	y -	

White Copy - Facility File Yellow Copy - Facility Operator Mississippi State Department of Health

12-10-08

Form No. 281



Child Care Encounter

$\boldsymbol{\eta}$	Cilia Care Lincounter	10 1.00
District	—— Cindy Day Care	Date <u>5/8//8</u>
Name	345 West Congress St. Brookhaven, MS	
***	601-990-7351 License # 0828	
Address	— Director: Cindy Cannon	1 2
Purpose Renewal	DirectorDirector	y Cannon
		7
Mileage Start	Mileage End	
County Lincoln	Telephone No	
Time In 2130	Time Out 3:45 Total	Time
	1 -1 11 0 1	· /·· and male
Findings/Comments		ty and met
with directo	r Cindy Connon, a	HAT a tour
of the fac	cility, the tacility	wasin
compliance r	10 critical violation	ns found
during This	inspection.	in V
A and To	L 11/	
Great Jos	21,1	
7.5-10.2		
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	4115	
		
	"Class I and II violations may	
	result in a monetary penalty. Repeated violations may result	in .
	the doubling of a monetary pen suspension, or revocation of the	ally
1 1		White Come English Ed
Undy Lander	- Vislan	White Copy - Facility File Yellow Copy - Operator
Center Director/Designee/Individu	ual Child Care Representative	

Mississippi State Department of Health

Center Director/Designee/Individual

Revised 6-24-09



Cindy Day Care 345 West Congress St. Brookhaven, MS

MENT OF HEALTH

ram Review

Yes No N/A					
1	Policies and procedures (Parent's Handbook) {Rule 1.4.1}				
2.	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.	Approved arrival and departure procedures {Rule 1.4.1 (2)}				
4.	Letter of suitability for staff {Rule 1.5.2 & Rule 1.6.4 (1) (f)}				
5 0	Attendance records for children and staff {Rule 1.6.3 (1)}				
6.	Current alphabetical roster of children (includes date of birth) {Rule 1.6.3 (2)}				
7.	Current staff roster (includes date of birth & date of hire) {Rule 1.6.3 (3)}				
8.	Monthly records of fire/disaster drills {Rule 1.6.3 (5)}				
9.	Medication record with date, time, signature for 90 days {Rule 1.6.3 (6)}				
10.4	Immunization Records for Children and Staff {Rule 1.6.3 (8)}				
	Personnel records (attach employee's records form) {Rule 1.6.4}				
12.	Volunteer records {Rule 1.6.5 & Rule 1.6.6}				
14.	Children records (attach children's records form) {Rule 1.6.7}				
15.	Reports of serious occurences made as required (Rule 1.7.1)				
100	Communicable diseases reported as required {Rule 1.7.3}				
17.	Daily written reports provided to parents for infants and toddlers {Rule 1.7.4} Staff present who hold valid CPR and First Aid Certification {Rule 1.8.1 (4) & (5)}				
18.	Age appropriate program of activities posted in each room {Subchapter 9}				
	Required toys present in infant room {Rule 1.10.1 (2)}				
20.	Required toys present in infant from {Rule 1.10.1 (2)}				
21.	Required toys present in total room {Rule 1.10.1 (3)}				
22. 🔎 🗆	Licensed pest control contractor {Rule 1.11.14} Positive Rest				
	Pets present (proof of immunization as required, signed by veterinarian) {Rule 1.12.6}				
24. 😅 🔲 🔲	Appropriate discipline policy followed {Subchapter 14}				
25. 🖵 🔲	Appropriate transportation policy followed {Subchapter 15}				
26. 🗖 🗖 🚘	Infant feeding schedules posted (Appendix C, VII)				
Comments/Recommendations Pass Duding fire Safety form					
322	non us Cand Anntant hour & Pin				
900)	men us (SHOK), COITAGT TOURS FOR				
STAFE					
3					
□ Pass -Pen	droa				
License to be	School Description Description Description				
License to be issued. Regular Probational Restricted Fail					
Follow-up within days \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\					
	Director Designee Child Care Representative				

Food Sercindy Day Care ection Results

345 West Congress St.

PIMS ID	Facili Brookhaven, MS 601-990-7351 License # 0828 Director: Cindy Cannon	5/8/18
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CRITICAL VIOLATIONS		CORRECTION PLAN AND SCHEDULE		
All in Com,		Aissued		
☐ 92020 Scheduled ☐ 92030 Followup ☐ 92040 Complaint ☐ 92050 Consultation ☐ 92070 Plan Review/Const. ☐ 92080 No Inspection ☐ 92090 Restaurant Training	92010 Permit No Charge 92015 Permit 1 \$30.00 92011 Permit 2 \$100.00 92012 Permit 3 \$150.00 92013 Permit 4 \$200.00	Certified Manager Licence Number Facility Signature		
Permit Date Please Remit within 10 days to:	Environmentalist Code	White Copy - Facility Yellow Copy - PIMS Pink Copy- Environmentalist		