



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Facility Inspection Report

LITTLE DREAMERS CHILD CARE CENTER

License #: 3460

Director: JACKIE SMITH

Inspection Date: 02/18/2022

Annual/Mid Inspection

Inspector: Tonya Broger

Program Administration Violations Cited

1. **Out of Compliance:** All child records are present and up-to-date. (Rule 1.6.7 Page 32)

Kitchen Violations Cited

No violations cited.

Nutritional Guidelines Violations Cited

No violations cited.

Playground Violations Cited

1. **Out of Compliance:** The outdoor playground is free of hazards and not less than 30 feet (measured horizontally parallel to the ground) from electrical transformers, high voltage cabling/wires, electrical substations, railroad tracks, or sources of toxic fumes or gases. Hazards including but not limited to air conditioner units and utility mains, meters, tanks, and/or cabling are inaccessible. (Rule 1.11.9(5) Page 59)
2. **Out of Compliance:** Playground area is clean and free of hazards. (Rule 1.11.11 Page 61)

Infant Classroom Violations Cited

Infants - Classroom Number: 4

No violations cited.

Infant Classroom - Classroom Number: 4

Toddler Classroom Violations Cited

18 Months- One Year Olds - Classroom Number: 5

No violations cited.

Toddler Classroom - Classroom Number: 5

Twos Classroom Violations Cited

Young Two Year Olds - Classroom Number: 1

1. **Out of Compliance:** Proper room capacity maintained. (Rule 1.11.2 Page 53)

Twos Classroom - Classroom Number: 1

Older Two Year Olds - Classroom Number: 2

No violations cited.

Twos Classroom - Classroom Number: 2

Preschool Classroom Violations Cited

Three Year Olds - Classroom Number: 3

No violations cited.

Preschool Classroom - Classroom Number: 3

Pre K Four-Five Year Olds - Classroom Number: 7

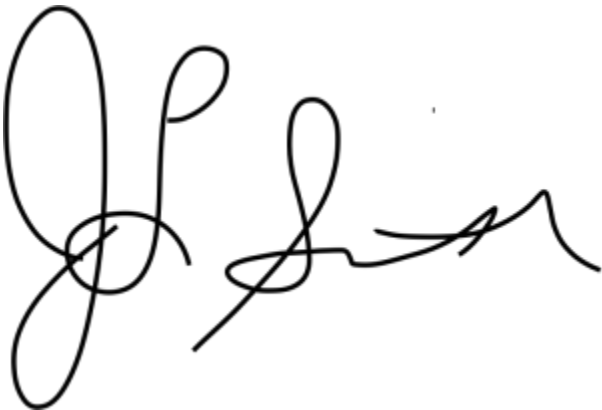
No violations cited.

Preschool Classroom - Classroom Number: 7

Legend

- COS: Corrected on Site
- POC: Plan of Correction

Child Care Director Signature

A handwritten signature in black ink, appearing to be 'J. L. Smith', written in a cursive style.

MSDH Licensure Representative Signature

Dr. A. J.