



## MISSISSIPPI STATE DEPARTMENT OF HEALTH

# Child Care Facility Inspection Report

BERTHA BLACKBURN HEAD START CENTER

License #: 0055

Director: SHELIA HENDERSON

Inspection Date: 09/07/2023

Annual/Mid Inspection

Inspector: Thelma Shegog

### Program Administration Violations Cited

1. **Out of Compliance:** All staff members have mandatory 15 contact hours on file (no more than five hours of in-house training may be provided by the child care facility. Acceptable topics for training may include: (a) health and safety, (b) child growth and development, (c) nutrition, (d) planning learning activities, (e) discipline, (f) linkages with community services, (g) communications with families, (h) detection of child abuse, (i) advocacy for early childhood programs, (j) professional issues. (Rule 1.5.8 Page 25)
2. **COS:** All required facility records are present and up-to-date: (1) child and employee attendance records, (2) alphabetical roster of children, (3) alphabetical roster of staff and volunteers, (4) current license, (5) records of monthly fire /disaster drills, (6) medication log, (7) volunteer log, (8) notebook of 121 forms for staff members and children w/roster, (9) notebook with Letters of Suitability for all employees w/roster. (Rule 1.6.3 Page 29)
3. **Out of Compliance:** All personnel records are present and up-to-date (employment application may be acceptable). (Rule 1.6.4 Page 30)
4. **Out of Compliance:** All child records are present and up-to-date. (Rule 1.6.7 Page 32)

### Plan of Correction

1. **POC:** POC: Each employee's personnel record shall contain documentation of education, training and experience necessary for employment. The licensing official observed missing staff documentation of education POC : All Children Record shall date of acceptance at the facility, parent's business phone number, and other contact informs required to be maintained in accordance with facility's policy. Children missing date of acceptance and parent business phone number.

**Person Responsible:** Director    **Date for Completion:** 14 Days

### Kitchen Violations Cited

No violations cited.

### Nutritional Guidelines Violations Cited

No violations cited.

## Playground Violations Cited

No violations cited.

### Plan of Correction

#### 1. POC:

**Person Responsible:**    **Date for Completion:**

## Preschool Classroom Violations Cited

Three/four - Classroom Number: 2

No violations cited.

Preschool Classroom - Classroom Number: 2

Three/four - Classroom Number: 3

No violations cited.

Preschool Classroom - Classroom Number: 3

Three/four - Classroom Number: 1

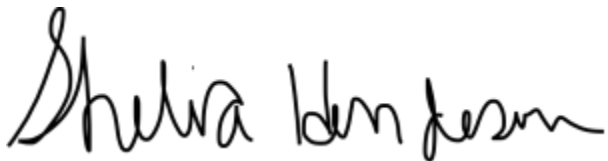
No violations cited.

Preschool Classroom - Classroom Number: 1

### Legend

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

### Child Care Director Signature



### MSDH Licensure Representative Signature

