



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District 3 Date 6/26/2019

Name Matthel Goose Learning Center I License No. 06CDPFA-6647

Address 1001 S. DR. MURKIN DR. Cleveland MS 38932

Center/Organization/Individual

Purpose Renewal / TA Director DeLoris MC Wright

Mileage Start _____ Mileage End _____

County Bolivar Telephone No. (662) 843-9825

Time In 1:34 pm Time Out _____ Total Time _____

Findings/Comments The purpose for visit is for a renewal inspection.

Subchapter 11: Buildings & Grounds

Rule 1.11.5 (5) states in part Toilets shall be clean and operational.

Findings: Licensing observed one (1) toilet not in proper working order.
Facility is asked to repair toilet within 10 working days.

Plan of correction: Director will contact appropriate person to repair toilet within the allotted time frame. Facility toilet will be checked on next visit.

Rule 1.11.1 (16) states in part, "unused electrical outlets shall be protected by a safety plug cover"

Findings: Licensing observed several classrooms with unused electrical outlets uncovered.

Plan of correction: Director will cover all unused electrical outlets beginning today 6/26/2019.

Licensing observed student roster not in alphabetical order.
Facility is recommended to place student roster in alphabetical order by next facility visit.

DeLoris MC Wright
 Center Director/Designee/Individual

Dana Jones
 Child Care Representative

White Copy - Facility File
 Yellow Copy - Operator



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter
(Continuation)Date 6/26/19Facility Name Mathew Chase Learning Center License No. 06CDFA-6697

Subchapter 6: Records

Rule 1.6.3 (8) STATES IN PART EACH FACILITY SHALL MAINTAIN A NOTEBOOK CONTAINING COPIES OF THE MSDH 121 FORM FOR BOTH STAFF AND CHILDREN AT THE FACILITY. THE NOTEBOOK SHALL CONTAIN SEPARATE CURRENT ALPHABETICAL ROSTER FOR CHILDREN. THE CERTIFICATES SHALL BE FILED IN ALPHABETICAL ORDER TO MATCH THE CURRENT CHILD ROSTER.

Findings: Licensing observed 19 children with missing MSDH 121 forms. Children were also observed on the sign-in and out roster. The roster was observed not in alphabetical order. Facility is asked to submit missing MSDH 121 forms within 14 working days.

Plan of Correction: Director will submit MSDH 121 forms within the allotted time frame and also update roster beginning 6/26/19.

Technical Assistance was provided on all deficiencies noted.

For all questions contact DANA JONES @ (662) 887 4951.

A survey was left with Deloris McWright, director

CLASS I and II violations MAY result in a monetary penalty. Repeated violations may result in the doubling of a monetary penalty, suspension, revocation of the facility license.

Deloris McWright
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

Mother Goose Learning Center

License No.

6697

Date

6/26/2019

	Yes	No	N/A	
1.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policies and procedures (Parent's Handbook) {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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Attendance records for children and staff {Rule 1.6.3 (1)}
6.	<input type="checkbox"/>	<input checked="" 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 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 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 (attach employee's records form) {Rule 1.6.4}
12.	<input 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 (attach children's records form) {Rule 1.6.7}
14.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reports of serious occurrences made as required {Rule 1.7.1}
15.	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Licensed pest control contractor {Rule 1.11.14}
23.	<input checked="" type="checkbox"/>	<input 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"/>	Appropriate discipline policy followed {Subchapter 14}
25.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Appropriate transportation policy followed {Subchapter 15} DO NOT TRANSPORT
26.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infant feeding schedules posted (Appendix C, VII)

Comments/Recommendations FAX MSDH 121 form to 662 887 4999
ATTN DANA JONES or dana.jones@health.ms.gov

<input checked="" type="checkbox"/>	Pass -	
	License to be issued:	<input checked="" type="checkbox"/> Regular <input type="checkbox"/> Probational <input type="checkbox"/> Restricted
<input type="checkbox"/>	Fail	
<input type="checkbox"/>	Follow-up within _____ days	
		<input checked="" type="checkbox"/> Director <input type="checkbox"/> Designee
		<i>Delonis McWright</i>
		<i>Dana Jones</i> Child Care Representative

Food Service Facility Inspection Results

PIMS ID 00697	Facility Name, Address 1001 S. DE MUESE DR Mother Goose Learning Center I	Date 6/26/2019
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CRITICAL VIOLATIONS

CORRECTION PLAN AND SCHEDULE

<p>Critical violations</p> <p>Potentially Hazardous Food (TSTed)</p> <p>22. Proper date marking and disposition</p> <p>Observed food items stored in zip lock bag without labeling.</p>	<p>Kitchen staff will date/label all food items removed from original container.</p> <p>This will be corrected by June 26, 2019</p> <p>Critical violations</p> <p>Kitchen received "B"</p>
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<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 D13

Vontisha Freeman Tummy Sate
 Certified Manager Licence Number

Facility Signature <i>Deloris McWright</i>
Environmental Signature <i>Dana Green Shu</i>

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

Please Remit within 10 days to:

Child Care Licensure Playground Checklist

Center Name Matthew Chase Learning Center I Inspection Date 6/26/19

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)
No playground equipment
- ☒ ☐ ☐ 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
No playground equipment (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 Deloris McWright Licensing Official Dana Jones Shug