

MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Facili	ty Inspection			
County Aum May	Date 8 1 WW			
Facility Name UPPS & BUWW LALKING	License Number 2701	OPFA-	lat 1	9_
Purpose NEWAL Cap	acity <u>J D</u>			
All Items In Red Are Critical Qualified director present Proper staff to child ratio present	Other Items - Must be corrected Children's belongings separated/stored Evacuation plans posted Menus posted and served Plan of activities	In Out	COS	N/A
Room and playground capacity met Center capacity met License/complaint visible Certified food manager	Building and Grounds Walls, ceilings, floors, toys, equipment clean and in good repair			
Sanitation Approved Garbage and garbage bins maintained Vector control maintained	Lighting approved Heating/cooling approved Ventilation adequate Glass approved and shielded Telephone on premises, available,			
Water system approved and functioning Waste water system approved and functioning Food service approved	and functioning Electrical outlets protected Large appliances located properly			
Possible Monetary Penalty Monetary Penalty	Sinks and toilets working properly Hot water at all sinks, not to exceed 120°			
1\$	Children barred from kitchen Vending machine snacks meet			
2	nutritional guidelines, if present Exits, doors and fastening devices			Z
3 \$	single action approved and in good working order			
5	Exits unobstructed Required smoke detectors, carbon monoxide monitors, fire extinguishers			
Age/Child/Staff Name	and thermometers placed properly and in good working order	/ 0		
2.	First aid kits stocked and easily accessil	ole 🛮 🗆		
3. 4 41 000 (5) CAREGOVER	Playground area clean, shaded, well drained and equipped and fence in good repair to pure the control of the co			
5. 5 yr old (1) I chlygrer	Playground equipment meets standards			P
6. 7.	Pool area clean, fenced, and adequately maintained			X
Center Director/Individual	Diaper changing stations adequate in number and each fully supplied (number) Child Care Representative	Mina	Om	5

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

12-10-08

Form No. 281

Form No. 287



MISSISSIPPI STATE DEPARTMENT OF HEALTH

2	Child Care	Encounter	
District	=		Date WWW
Name CORS & Brunds	LEALNING ACADIA	100.00	OPTA- COLIG
Address U3 Mulen S	t. Belwin MS	1340318 ation/Individual	
Purpose VICTUAL PUNC	not suspection	Director CALUSA HAN	les/Charcles watter
Mileage Start	M	ileage End	J
County TUMNEY	Te	lephone No	
Time In 105 PM	Time Out	∑ Total Time	×
Findings/Comments Little	mg concluded A	Victoral Revenue	mspectron.
Angelde in Aberes	20 CO. 0 M/2		1 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 /
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Dan Mondales Ob	5 . All d. Ala I A		
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time talanain	WHY TOO WHATE	a wo come out	10 New Jiteming.
The FACILITY WAS E	beared W/ Mopes	s mumber of wo	ung toiles.
A Pollowy MI be	conducted At A	later date. The	bup Restroom was
Observed INVAI HI	Vyfruc piwperu	A WARRY TOTHET &	
TA WAS given on	the impliance	207 PROPERLY V	ropling futherms.
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Repealed Walaston	I may funct for	the license.	
tid softway or	MAN OF HIGH	ALL LICENSE.	***************************************
	A		
Center Director/Designee/Individ	ual Child Care Re	M-Confesentative	White Copy - Facility File Yellow Copy - Operator

Revised 6-24-09

Mississippi State Department of Health



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Facility Name LEAS Y	Child Care	Program Review License No. (1919)	Date _	8/21/2000
	(1 1

Yes No 1.	Policies and proce Proof of Accident/ insurance is in effet Approved arrival at Letter of suitability Attendance records Current alphabetica Current staff roster Monthly records of Medication records Immunization Records Volunteer records Children records Reports of serious Communicable di Daily written report Staff present who Age appropriate pr Required toys press Appropriate disci	Liability Insurance or documentation that parent have test {Rule 1.4.1 (i) & (j)} and departure procedures {Rule 1.4.1 (2)} by for staff {Rule 1.5.2 & Rule 1.6.4 (1) (f)} as for children and staff {Rule 1.6.3 (1)} and roster of children (includes date of birth) {Rule or (includes date of birth & date of hire) {Rule 1.6.3 (5)} and with date, time, signature for 90 days {Rule 1.6.3 (6)} and staff {Rule 1.6.3 (8)} and staff {Rule 1.6.4 (1) (1)} and Staff {Rule 1.6.3 (8)} and staff {Rule 1.6.5 & Rule 1.6.6} (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	1.6.3 (2)} 3 (3)} 6.3 (6)} ale 1.7.4} ale 1.8.1 (4) & (5)} ter 9}
Comment	s/Recommendations		
16 16			
Pass – License to be issued: Regular Probational Restricted Fail Follow-up within days Director Designee Child Care Representative			

Food Service Facility Inspection Results

PIMS ID Fac	ility Name, Address	Will St. Behan M. Date
6419 P	Aps Hounds beal	1 IN ACADOMY 39038 08/1/2020
CRITICAL VIOI	1	CORRECTION PLAN AND SCHEDULE
M Chitical Vito		Met Complaince
		Freility LECID "A"
☐ 92020 Scheduled ☐ 92030 Followup ☐ 92040 Complaint ☐ 92050 Consultation ☐ 92070 Plan Review/Const. ☐ 92080 No Inspection	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 Rep. 8/11/1004
☐ 92090 Restaurant Training Permit Date	Environmentalist Code	Environmentalist Signature One Signature
Please Remit within 10 days to:		White Copy - Facility Yellow Copy - PIMS Pink Copy- Environmentalist

Child Care Licensure Playground Checklist

Cer	iter N	lame	Lea	S & Burns CALLENG Arodom/Inspection Date 8/11/2020
YES	NO	N/A		
A			1.	Playground fence less than 3 ½" from surface. (Rule 1.11.9 (8), pg 60) In good repair, with no gaps? (Rule 1.11.9 (8), pg 60)
6			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)
£			4.	AC units, high-voltage cabling/wires inaccessible? (Rule 1.11.9 (5), pg 59)
P			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)
7			6.	Toys & equipment in good repair? (none broken/deteriorating) (Rule 1.10.2 (2), pg 46)
		7	7.	Sidewalks provide smooth walking surface? (no trip hazards) (CPSC 3.6, pg 16-17)
F			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)
1			9.	Tree limbs at least 7ft. above play surfaces? Is fence free of brush/overgrowth? (CPSC 3.4, 3.5, pg 16)
		Z	10.	Are use zones adequate? If not, where are they inadequate? (CPSC 5.3.9, pg 41)
		6	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)
		Z	12.	If slide is present, is exit height/exit zone adequate? If not, state deficiency (CPSC5.3.6.4-5 pgs 34-35)
		1	13.	Are spring rockers a minimum of 6 ft. apart? (ASTM 9.5.1.2 & CPSC 5.3.7. pg 36-37)
		Z	$\frac{1}{4}$.	Is age-appropriate equipment being used? If not, state which pieces are inappropriate (Rule 1.10.2, pg 46)
- 4				& CPSC 2.2.6, pg 6)
7			15.	Is playground area clean & free of hazards? If not, state deficiency. (Rule 1.11.11 (1), pg 61)
Z,			16.	Is adequate shade present on the playground? (Rule 1.11.9 (7), pg 60 & CPSC 2.1.1, pg 5)
1			17.	Are concrete footings located at least 6" beneath the surface? (Rule 1.10.2 (2), pg 46 & CPSC 3.6, pg 16-17)
		f	18.	Is wood smooth? Documentation provided that wood has been properly treated. (CPSC
Direc	tor 1	NB	wal	2.5.5, pg 15) Licensing Official Licensing Official