



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Facility Inspection

County Madison Date 9/23/2020

Facility Name Little School Learning Ctr. License Number 45CPFA- 6409

Purpose Virtual Renewal Inspection Capacity 168

All Items In Red Are Critical

	In	Out	COS	N/A
Qualified director present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper staff to child ratio present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Room and playground capacity met	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Center capacity met	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
License/complaint visible	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Certified food manager	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Sanitation Approved

Garbage and garbage bins maintained	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vector control maintained	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water system approved and functioning	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Waste water system approved and functioning	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food service approved	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Possible Monetary Penalty

	Monetary Penalty
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____

	Age/Child/Staff Name
1.	Toddler / 71 Caregiver #1
2.	Toddler / 81 Caregiver #2
3.	2yolds / 91 Caregiver #3
4.	2yolds / 91 Caregiver #4
5.	2yolds / 101 Caregiver #5
6.	3yolds / 101 Caregiver #6
7.	3yolds / 91 Caregiver #7
8.	4yolds / 119 Caregiver #8, #9
9.	Infants / 101 Caregivers #10, #11
10.	Infants / 51 Caregiver #12

Center Director/Individual See the MSDH Renewal Letter

Other Items - Must be corrected

	In	Out	COS	N/A
Children's belongings separated/stored	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evacuation plans posted	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Menus posted and served	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plan of activities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Building and Grounds

Walls, ceilings, floors, toys, equipment clean and in good repair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lighting approved	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Heating/cooling approved	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ventilation adequate	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Glass approved and shielded	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Telephone on premises, available, and functioning	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical outlets protected	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Large appliances located properly	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sinks and toilets working properly	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hot water at all sinks, not to exceed 120°	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Children barred from kitchen	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vending machine snacks meet nutritional guidelines, if present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exits, doors and fastening devices single action approved and in good working order	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exits unobstructed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Required smoke detectors, carbon monoxide monitors, fire extinguishers and thermometers placed properly and in good working order	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
First aid kits stocked and easily accessible	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Playground area clean, shaded, well drained and equipped and fence in good repair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Playground equipment meets standards	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pool area clean, fenced, and adequately maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Diaper changing stations adequate in number and each fully supplied (number <u>5</u>)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Child Care Representative HRB



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District 5Date 9/23/2020

Name	<u>Little School Learning Center</u>	License No.	<u>45 CFPFA - 6409</u>
Address	<u>202 Visconti Pl Madison, MS 39110</u>		
	Center/Organization/Individual		
Purpose	<u>Virtual Learning School</u>	Director	<u>Bhonda Kuriger</u>
Mileage Start	<u>1</u>	Mileage End	<u>1</u>
County	<u>Madison</u>	Telephone No.	<u>601-898-3441</u>
Time In	<u>Zoom</u>	Time Out	
		Total Time	

Findings/Comments The purpose of this meeting is to conduct a virtual renewal inspection. The facility director Bhonda Kuriger is present. The following observations were made:

- No critical violations were observed regarding the facility building and grounds.
- No critical violations were observed regarding the facility kitchen areas.
- Technical assistance was provided, as needed.
- Renewal pending the receipt of the required documentation.
- All facility records are in compliance per the MSOH Records Checklist, per the facility director.

Class I and II violations may result in a monetary penalty. Repeated violations may result in the doubling of a monetary penalty, suspension, or revocation of the license.

See the MSOH Renewal Letter
Center Director/Designee/Individual

[Signature]
Child Care Representative

White Copy - Facility File
Yellow Copy - Operator



Food Establishment Inspection Report

Establishment Little School Learning Center		Time in Zoom	
Address 262 Visconti PL		City/State Madison, MS	Telephone 601-898-3441
License/Permit# 45CF PFA-6409		Permit Holder Sherri Buggett/Kheihans	Risk Level 2

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item
IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Mark "X" in appropriate box for COS and R
COS = corrected on-site during inspection R = repeat violation

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks.

Public health interventions are control measures to prevent foodborne illness or injury.

Compliance Status	COS	R
Supervision		
1 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
Person in charge present, demonstrates knowledge, and performs duties		
2 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A		
Manager certification		
Employee Health		
3 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
Management awareness; policy present		
4 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
Proper use of reporting, restriction & exclusion		
Good Hygienic Practices		
5 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/O		
Proper eating, tasting, drinking, or tobacco use		
6 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/O		
No discharge from eyes, nose, and mouth		
Preventing Contamination by Hands		
7 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/O		
Hands clean and properly washed		
8 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A N/O		
No bare hand contact with ready-to-eat foods		
9 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
Adequate handwashing facilities supplied & accessible		
Approved Source		
10 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
Food obtained from approved source		
11 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A N/O		
Food received at proper temperature		
12 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
Food in good condition, safe, and unadulterated		
13 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A N/O		
Required records available: shellstock tags, parasite destruction		
Protection from Contamination		
14 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A		
Food separated and protected		
15 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A		
Food - contact surfaces: cleaned & sanitized		
Approved Source		
16 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
Proper disposition of returned, previously served, reconditioned, and unsafe food		
Potentially Hazardous Food (TCS food)		
17 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A N/O		
Proper cooking time and temperatures		
18 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A N/O		
Proper reheating procedures for hot holding		
19 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A N/O		
Proper cooling time and temperature		
20 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A N/O		
Proper hot holding temperatures		
21 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A		
Proper cold holding temperatures		
22 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A N/O		
Proper date marking and disposition		
23 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A N/O		
Time as a public health control: procedure & records		

Compliance Status	COS	R
Consumer Advisory		
24 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A		
Consumer advisory provided for raw or undercooked foods		
Highly Susceptible Populations		
25 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A		
Pasteurized foods used; prohibited foods not offered		
Chemical		
26 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A		
Food additives: approved and properly used		
27 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
Toxic substances properly identified, stored, used		
Conformance with Approved Procedures		
28 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A		
Compliance with variance, specialized process, and HACCP plan		
29 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A		
Risk control plan as required		
Other Critical Factors		
Preventative measures to control the introduction of pathogens, chemicals and physical objects into foods.		
30 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
Water and ice from approved source		
31 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
Insects, rodents, and animals not present		
32 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A		
Hot and cold water available; adequate pressure		
33 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A		
Plumbing installed; proper backflow devices		
34 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A		
Sewage and waste water properly disposed		
35 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
Toilet facilities: properly constructed, supplied		
36 <input checked="" type="radio"/> IN <input type="radio"/> OUT N/A		
Permit/Last inspection posted		

Date **9/23/2020**Person in Charge (Signature) **See the MOH Renewal Letter**Inspector (Signature) **[Signature]**

Letter grade "A" rec'd

Food Service Facility Inspection Results

PIMS ID	Facility Name, Address Little School Learning Center 202 Visconti Pl Madison, MS 39110	Date 9/23/2020
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CRITICAL VIOLATIONS


CORRECTION PLAN AND SCHEDULE

- No critical violations were observed during the inspection. (virtual).
- Letter grade "A"

<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 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	Environmentalist Code TB, 05
Please Remit within 10 days to:	

Rhonda Kuriger
Certified Manager

Tummy Sale
Licence Number
Exp. 9/24/2020

Facility Signature	See the MSDH Renewal Letter
Environmentalist Signature	

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

Child Care Licensure Playground Checklist

Center Name Little School Learning Ctr #6409 Inspection Date 9/23/2020

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)
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) Standing water present due to intermittent weather.
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, 2.5.2, pg 1 & 5.3.8.1, pg 36)
12. ☒ If slide is present, is exit height/exit zone adequate? If not, state deficiency (CPSC 5.3.6.4-5 pgs 36)
13. ☒ Are spring rockers a minimum of 6 ft. apart? (ASTM 9.5.1.2 & CPSC 5.3.7, pg 36)
14. ☒ Is age-appropriate equipment being used? If not, state which pieces are inappropriate (Rule 1.10.2 & CPSC 2.2.6, pg 16-17)
15. ☒ Is playground area clean & free of hazards? If not, state deficiency. (Rule 1.11.11 (1), pg 11)
16. ☒ Is adequate shade present on the playground? (Rule 1.11.9 (7), pg 60 & CPSC 2.1.1, pg 11)
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 (Rule 2.5.5, pg 15)

Director See the MSDH Acknowledgment Letter Licensing Official [Signature] CLF-II