



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Facility Inspection

County <u>Hinds</u>	Date <u>06/13/17</u>
Facility Name <u>The Privette School</u>	License Number <u>3848</u>
Purpose <u>Renewal</u>	Capacity <u>95</u>

All Items In Red Are Critical

Qualified director present
 Proper staff to child ratio present
 Room and playground capacity met
 Center capacity met
 License/complaint visible
 Certified food manager

In	Out	COS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Sanitation Approved

Garbage and garbage bins maintained
 Vector control maintained
 Water system approved and functioning
 Waste water system approved and functioning
 Food service approved

In	Out	COS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<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.	5 / infants / Love, Murphy (carpet)
2.	6 / infant / Sanders, Littleton
3.	6 / 3yr. / Standred
4.	11 / 2yrs / Kasty, Kera
5.	12 / 2yr / Shanon, Candace
6.	9 / 3yr + 4yr / Washington, Elay-Phillips
7.	

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
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<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 carpet

Lighting approved
 Heating/cooling approved
 Ventilation adequate
 Glass approved and shielded
 Telephone on premises, available, and functioning

In	Out	COS	N/A
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Electrical outlets protected
 Large appliances located properly
 Sinks and toilets working properly
 Hot water at all sinks, not to exceed 120°
 Children barred from kitchen
 Vending machine snacks meet nutritional guidelines, if present
 Exits, doors and fastening devices single action approved and in good working order

In	Out	COS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Exits unobstructed
 Required smoke detectors, carbon monoxide monitors, fire extinguishers and thermometers placed properly and in good working order

In	Out	COS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

First aid kits stocked and easily accessible

In	Out	COS	N/A
<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

In	Out	COS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Playground equipment meets standards

In	Out	COS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Pool area clean, fenced, and adequately maintained

In	Out	COS	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Diaper changing stations adequate in number and each fully supplied (number 4)

In	Out	COS	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Center Director/Individual

Child Care Representative

White Copy - Facility File

Yellow Copy - Facility Operator

Mississippi State Department of Health

12-10-08

Form No. 281



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District 5Date 06/13/17

Name	<u>The Privette School</u>	License No.	<u>25C4RFA-384B</u>
Address	<u>4419 Broadmeadow Drive Jackson MS 39206</u>		
	Center/Organization/Individual		
Purpose	<u>Renewal</u>	Director	<u>Tammie McGruder</u>
Mileage Start	<u> </u>	Mileage End	<u> </u>
County	<u>Hinds</u>	Telephone No.	<u>601.362.5545</u>
Time In	<u>11:00am</u>	Time Out	<u>1:15pm</u>
		Total Time	<u> </u>

Findings/Comments Upon arrival of the facility, the licensing official met with Tammie McGruder, the director at the facility. The purpose of this visit is to conduct a renewal inspection.

The licensing official observed the following deficiency on today under the Buildings and Grounds section of the inspection:

Subchapter: Playground Handbook CPSC, 2.4.2 pg. 8

Deficiency: CPSC, 2.4.2 pg. 8

Finding: During the playground inspection, the licensing official observed inadequate surfacing underneath all equipment located on the school-age/ or older children playground area.

PCC: The Director, Tammie McGruder will present the inspection documentation before the board request for immediate surfacing. The facility is aware and is already working to add to or replace surfacing. The expected renewal for surfacing is expected of about 2 weeks.

Technical assistance is provided on Rule CPSC, 2.4.2; which requires all facilities to have adequate surfacing. The L.O advised the director that children are restricted from any location or playground area where there is inadequate surfacing.

Tammie McGruder
Center Director/Designee/Individual

J. Hyles
Child Care Representative

White Copy - Facility File
Yellow Copy - Operator



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter (Continuation)

Date 06/13/17Facility Name The Privette SchoolLicense No. 25C4RFA-3843

Technical assistance has also been provided on Rule 1.11.1(8) pertaining to maintaining the cleanliness of the carpet where children play. Technical assistance also provided on Rule 1.10.9 Rest Period equipment make sure that all mats are padded and are not torn. L.O recommend that facility replace all worn mats and mats that are not properly padded.

The following items are received and placed in the file: Parent Hand book, Liability, Pest control, water bills, Fire Drill, Staff Roster, Children roster.

The kitchen will receive a letter grade of "A" of today.

"see playground sheet" for playground inspection.

A followup visit will be conducted within 14 days from today to follow up on playground and technical assistance that was given on today.

All children records are up to date with Regulations and will be recorded.
All staff records are up to date.

The licensing official is requesting all documentation for the new director such as: Qualifications, 121, FBT letter (received) will be placed in the file.

Please contact LaTonya Lyles if you have any questions at 601-364-2842 or LaTonya.Lyles@msdhs.ms.gov

Class 1 + 2 violations may result in a monetary penalty, repeated violation may result in a doubled penalty, suspension or revocation of license.

Shammi McArthur
Center Director/Designee/Individual

Lyles
Child Care Representative

White Copy - Facility File
Yellow Copy - Operator



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Program Review

Facility Name

Warton The Privette School

License No.

25C4PPA-3848

Date

06/13/17

- | | 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Attendance records for children and staff {Rule 1.6.3 (1)} |
| 6. | <input checked="" type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Monthly records of fire/disaster drills {Rule 1.6.3 (5)} |
| 9. | <input checked="" 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 checked="" 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Reports of serious occurrences made as required {Rule 1.7.1} |
| 15. | <input checked="" 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 type="checkbox"/> | <input type="checkbox"/> | <input checked="" 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Appropriate transportation policy followed {Subchapter 15} |
| 26. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Infant feeding schedules posted (Appendix C, VII) |

Comments/Recommendations (1) child 121 missing

- ☒ Pass –
 License to be issued: ☐ Regular ☐ Probational ☐ Restricted
☐ Fail
☒ Follow-up within 14 days

☒ Director

☐ Designee

Shomo-LL
 Child Care Representative

Food Service Facility Inspection Results

PIMS ID 3848	Facility Name, Address The Privette School 4419 Broadmeadow Dr. Jackson MS 39206	Date 06/13/17
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CRITICAL VIOLATIONS

CORRECTION PLAN AND SCHEDULE

Letter "A"
given

no critical violations

- ☐ 92020 Scheduled
- ☐ 92030 Followup
- ☐ 92040 Complaint
- ☐ 92050 Consultation
- ☐ 92070 Plan Review/Const.
- ☐ 92080 No Inspection
- ☐ 92090 Restaurant Training

- ☒ 92010 Permit No Charge
- ☐ 92015 Permit 1 \$30.00
- ☐ 92011 Permit 2 \$100.00
- ☐ 92012 Permit 3 \$150.00
- ☐ 92013 Permit 4 \$200.00

Permit Date

Environmental Code

Please Remit within 10 days to:

Linda Vaughn
Certified Manager

Terry Saff
Licence Number

~~Valid Exp.~~

Facility Signature

Environmental Signature

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

Playground Checklist

Center Name The Privette School Inspection Date 06/13/17
Name of Licensing Official LaTanya Lyles License # 2504 RFA-3843

YES NO

- ☒ 1. Playground fence less than 3 1/2" from surface. (Regs, 110.09 - 8, pg 39) In good repair, with no gaps? (Regs, 110.09 - 5, pg 39).
- ☒ 2. 2 entrances/exits, with one being remote from the building? (Regs, 110.09 - 8, pg 39)
- ☒ 3. Is surfacing adequate? If not, where is it inadequate? (CPSC, 2.4.2, pg8)
requiring more wood-chips
- ☒ 4. AC units, high-voltage cabling/wires inaccessible? (Regs, 110.09 - 5, pg 39)
- ☒ 5. Transformers located a minimum of 30 ft. from playground? (Regs, 110.09 - 5, pg 39)
- ☒ 6. No standing water present on playground or in/on playground equipment or walkways? (CPSC 2.4.2.2-5, pg 10)
- ☒ 7. Toys & equipment in good repair? (none broken/deteriorating) (Regs, 109.02, pg 30)
- ☒ 8. Sidewalks provide smooth walking surface? (no trip hazards) (CPSC 3.6, pg 15)
- ☒ 9. All bolts on equipment & fence <2 threads beyond the nut? Are all bolts and fencing twists/wires facing away from the playground area? (Regs, 110.09 - 5, pg 39)
- ☒ 10. Tree limbs at least 7ft. above play surfaces? Is fence free of brush/overgrowth? (CPSC 3.4, 3.5, pg 15)
- ☒ 11. Are use zones adequate? If not, where are they inadequate? (CPSC 5.3.9, pg 40)
- ☒ 12. If swings are present, are S-hooks in good repair? If not, state deficiency
inadequate surfacing (CPSC 3.2, pg 13)
- ☒ 13. If slide is present, is exit height/exit zone adequate? If not, state deficiency
inadequate surfacing (CPSC 5.3.6.4-5 pgs 34-35)
- ☒ 14. Are spring rockers a minimum of 6 ft. apart? (ASTM 9.5.1.2, pg 15)
- ☒ 15. Is age-appropriate equipment being used? If not, state which pieces are inappropriate
(Regs, 109.10, pg 31)
- ☒ 16. Is playground area clean & free of hazards? If not, state deficiency.
(Regs, 110.09 - 5, pg 39)
- ☒ 17. Is adequate shade present on the playground? (CPSC 2.1.1, pg 5)
- ☒ 18. Are concrete footings located a minimum of 6" beneath the surface? (Regs, 109.02, pg 30)
- ☒ 19. Is wood smooth? Documentation provided that wood has been properly treated. (CPSC 2.5.5)

Director

Licensing Official