



## MISSISSIPPI STATE DEPARTMENT OF HEALTH

# Child Care Facility Inspection Report

THE FAMILY Y - SCHOOL AGE PROGRAM

License #: 0379

Director: CLAIRE RATLIFF

Inspection Date: 04/11/2023

Annual/Mid Inspection

Inspector: Tyronica Averett

### Program Administration Violations Cited

1. **Out of Compliance:** 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)

#### Plan of Correction

1. **POC:** Ms. Claire will ensure all staff have their 121 forms on file. She will ensure these documents are on file in order to stay in compliance. The time frame of completion is 14 days.

**Person Responsible:** Claire Ratcliff **Date for Completion:** 4-26-23

### Kitchen Violations Cited

No violations cited.

### Nutritional Guidelines Violations Cited

No violations cited.

### Playground Violations Cited

No violations cited.

### School Age Room Violations Cited

S.A. - Classroom Number: 1

No violations cited.

School Age Room - Classroom Number: 1

S.A. - Classroom Number: 5

No violations cited.

School Age Room - Classroom Number: 5

### **Legend**

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

### **Child Care Director Signature**

A handwritten signature in black ink, consisting of a large, stylized 'C' followed by a horizontal line.

### **MSDH Licensure Representative Signature**

A handwritten signature in black ink, reading 'Dyonna Averett' in a cursive script.