



Child-Care Inspection Form

Early Excellence Academy #1695469

Arrival Date and Time 10/18/2021 09:00 AM
Departure Date and Time 10/18/2021 11:00 AM

Part I: OPERATION INFORMATION

Location: 30330 QUINN RD, TOMBALL, TX 77375
Permit Type: License
Type: Child Care Program
Status: Full
Director/Administrator: Megan Parker
Director/Administrator:
Type of Inspection: Unannounced Monitoring

Phone: (281) 357-3100
Capacity:68 Infant Capacity:
Designee/Registrant: Megan Parker

Licensing Staff: JACQUELINE VERA
Address: 608 E NORTH LOOP 336 , CONROE, TX 77301

Phone: (832) 298-1827

Licensing Supervisor: KAREN VINCENT
Address: 608 E NORTH LOOP 336 , CONROE, TX 77301

Phone: (936) 689-0754

Part II: NOTIFICATION

- Controlling Persons have been verified.
Back ground checks have been verified.
The following items regarding risk to children were evaluated:
The Supervision of Children
Child/Caregiver Ratio
Obvious Fire, Safety, and/or Sanitation Deficiencies
A Sampling of Serious Incidents Reports (RCCL only)

- Conditions of any Waiver/Variance, if applicable
Director and/or Caregiver Responsibilities
Restrictions and/or Conditions of the Permit
Background Checks

Children in Care: 36 Director Present Dir Qual Eval

All or part of the following laws, administrative rules or Minimum Standard rules have been inspected:

- Standard x Standard Administration Record Keeping Personnel Ratios and Group Sizes Activities Infants Toddlers
Pre-K Children School Age Children Discipline Naptime Field Trips Get Well Care (Centers only) Nighttime Care Nutrition and Food Services
Health Practices Safety Practices Physical Facilities Outdoor Safety Pools Fire Safety Transportation



TEXAS
Health and Human Services

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Inspection results from another state agency or political subdivision were used in the evaluation of some standards.

Health and Safety Audit conducted

Others:



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Failure to maintain compliance on an ongoing basis may result in enforcement actions

In an effort to improve our inspection process, we are soliciting your feedback about this licensing inspection at your operation. Please provide responses to the questions posed in the online survey. The survey will take approximately 5-10 minutes to complete. Go to www.CCLinspectionfeedback.org. Your answers and comments are greatly appreciated.

ACKNOWLEDGEMENT OF RECEIPT

An inspection was conducted at my operation on the date below. Deficiencies and, where applicable, technical assistance were discussed with me during the exit conference. Failure to comply within the specified time limit or repetition of deficiencies may result in remedial action without further opportunity to correct the deficiencies. I understand that if the results of this inspection were not given to me on this date, they will be sent through a supplemental letter within ten days of this inspection.

10/18/2021

10/18/2021

Signature (Person Signing for Operation)

Date

Signature (Licensing Staff)

Date

Signed By: Director



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Part III: INSPECTION INFORMATION

Records Evaluated:

Number of Children's Records:

Number of Children Enrolled:

Number of Staff Records:

Number of Staff Employed:

Inspection Dates:

Fire Inspection: 11/04/2020

Health Inspection: 02/02/2021

Liability Insurance (exp.date) 03/31/2022

Gas Pipe Pressure Test: 07/13/2021

Last LP Gas Inspection :

No monitoring deficiencies were found at this inspection.

Operation does not provide Get Well care, transportation, field trips, nighttime care and does not have a pool.

Notification Date: 10/18/2021

If you disagree with the actions or decisions of the licensing staff, you may request an administrative review within 15 days of the receipt of this inspection report by writing the Licensing Supervisor.

Providers may comment on the findings of the inspection in the space below.
