



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

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District

5

Name

WILLOWOOD DEVELOPMENTAL
CENTER

Date

9/27/18

Address

1635 BOLING ST, Jackson, MS 39213
Lic. 25CFPFA-1314 P. 601-366-0123
Attn: RASHEEDAH HOLMES

Purpose

Follow-up

Director

Mileage Start

Mileage End

County

Hinds

Telephone No.

Time In

10:50am.

Time Out

Total Time

Findings/Comments

Upon arrival the LO-(S) met with the director
Rasheeda Holmes.

LO-observed the (1) toilet working in the infant and
~~the~~ toddlers building working properly.

* Thermometers are placed on each wall.

* Diaper changing tables station are placed in each
classroom. Along with a sink in each class.

* AC-unit / meter has been fence in using lattice.

* Washing / Drawer has been close using a door.

* Director stated she will contact the LO when
playground is completed. LO- will conduct a
follow-up visit.

LO- received (1) 21 Form that was expired on mid-year
visit.

Rasheeda Holmes
Director/Designee/Individual

A. Ellis
Child Care Representative

White Copy - Facility File
Yellow Copy - Operator