



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Facility Inspection Report

OCEAN SPRINGS PARKS AND RECREATION

License #: 0503

Director: APRIL CHEWNING

Inspection Date: 12/02/2021

Annual/Mid Inspection

Inspector: Anna Walters

Program Administration Violations Cited

No violations cited.

Plan of Correction

1. **POC:** fire form and staff contact hours

Person Responsible: April Chewning **Date for Completion:** For Renewal

Kitchen Violations Cited

No violations cited.

Nutritional Guidelines Violations Cited

No violations cited.

Playground Violations Cited

No violations cited.

School Age Room Violations Cited

School-Age - Classroom Number: 9

No violations cited.

School Age Room - Classroom Number: 9

Legend

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

Child Care Director Signature

A handwritten signature in black ink that reads "April Chavez". The signature is written in a cursive, flowing style.

MSDH Licensure Representative Signature

A handwritten signature in black ink that reads "Annaliese". The signature is written in a cursive, flowing style.