The Golden Connection  
680 Third Street  
MARKS, MS 38646  
License# 5805 QUITMAN  
Director: Patricia Hankins

**MISSISSIPPI STATE DEPARTMENT OF HEALTH**

**Child Care Facility Inspection**

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**Date:** 11/14/2017  
**License Number:**

<table>
<thead>
<tr>
<th>Purpose</th>
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<tr>
<td><strong>Renewal</strong></td>
<td><strong>Capacity:</strong> 32</td>
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**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

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**Sanitation Approved**

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

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**Possible Monetary Penalty**

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<th>Monetary Penalty</th>
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**Other Items - Must be corrected**

- Children’s belongings separated/stored
- Evacuation plans posted
- Menus posted and served
- Plan of activities

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**Building and Grounds**

- Walls, ceilings, floors, toys, equipment clean and in good repair
- Lighting approved
- Heating/cooling approved
- Ventilation adequate
- Glass approved and shielded
- Telephone on premises, available, and functioning
- Electrical outlets protected
- Large appliances located properly
- Sinks and toilets working properly
- Hot water at all sinks, not to exceed 120°F
- 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
- Exits unobstructed
- Required smoke detectors, carbon monoxide monitors, fire extinguishers and thermometers placed properly and in good working order
- First aid kits stocked and easily accessible
- Playground area clean, shaded, well drained and equipped and fence in good repair
- Playground equipment meets standards
- Pool area clean, fenced, and adequately maintained
- Diaper changing stations adequate in number and each fully supplied (number ___)

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**Age/Child/Staff Name**

- Patricia Hankins
- Shemique Emerson

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**Center Director/Individual**  
**Child Care Representative**

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**White Copy - Facility File**  
**Yellow Copy - Facility Operator**  
**Mississippi State Department of Health**  
**12-10-08**

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**Form No. 181**
Child Care Encounter

District: Y

The Golden Connection
680 Third Street
MArks, MS 38646
License# 5805 QUITMAN
Director: Patricia Hankins

Purpose: Renewal
Director:

Mileage Start: 
Mileage End: 

County: QUITMAN
Telephone No: (601) 326-8311

Time In: 1:20
Time Out: 3:10
Total Time: 

Findings/Comments: Upon arrival, the licensing official met with Patricia Hankins, owner/director.

-Violations: N/A. No Class I or II violations observed during today's inspection.

-Please submit contact hrs by January 15, 2017.

-Please submit the following renewal documents: fire forms and two weeks menus by December 31, 2017. Application and fees must be submitted online by December 31, 2017 @ www.healthyms.com.

-Childcare Questionnaire provided to Mrs. Patricia Hankins.

-Class I and II violations may result in a monetary penalty. Repeated violations may result in the doubling of a monetary penalty, suspension, or revocation of the license.

-Contact: Tel: 2, 562, 4428
-Email: tshogg@msdh.state.ms.us

[Signatures]

Patricia Wright
Center Director/Designee/Individual

Patricia Shoggh
Child Care Representative

White Copy - Facility File
Yellow Copy - Operator

Mississippi State Department of Health
Revised 6-24-09
Form No. 287
MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Program Review

License No. ___________________________ Date 11-17-2017

1. ☐ ☐ ☐ Immunization Records for Children and Staff {Section 105.03, 8}
2. ☐ ☐ ☐ Letter of suitability for staff {Section 104.02}
3. ☐ ☐ ☐ Attendance records for children and staff {Section 105.03, 1}
4. ☐ ☐ ☐ Current alphabetical roster of children (includes date of birth) {Section 105.03, 2}
5. ☐ ☐ ☐ Current staff roster (includes date of birth & date of hire) {Section 105.03, 3}
6. ☐ ☐ ☐ Monthly records of fire/disaster drills {Section 105.03, 5}
7. ☐ ☐ ☐ Medication record with date, time, signature for 90 days {Section 105.03, 6}
8. ☐ ☐ ☐ Policies and procedures (Parent’s Handbook) {Section 103.01}
9. ☐ ☐ ☐ Reports of serious occurrences made as required {Section 106.01}
10. ☐ ☐ ☐ Communicable diseases reported as required {Section 106.03}
11. ☐ ☐ ☐ Appropriate discipline policy followed {Section 113}
12. ☐ ☐ ☐ Appropriate transportation policy followed {Section 114}
13. ☐ ☐ ☐ Approved arrival and departure procedures {Section 103.01, 2}
14. ☐ ☐ ☐ Personnel records (attach employee’s records form) {Section 105.04}
15. ☐ ☐ ☐ Volunteer records {Section 105.05 & 105.06}
16. ☐ ☐ ☐ Children records (attach children’s records form) {Section 105.07}
17. ☐ ☐ ☐ Age appropriate program of activities posted in each room {Section 108}
18. ☐ ☐ ☐ Required toys present in infant room {Section 109.01, 2}
19. ☐ ☐ ☐ Infant feeding schedules posted (Appendix C, VII)
20. ☐ ☐ ☐ Daily written reports provided to parents for infants and toddlers {Section 106.04}
21. ☐ ☐ ☐ Required toys present in toddler room {Section 109.01, 3}
22. ☐ ☐ ☐ Required toys present preschool room {Section 109.01, 4}
23. ☐ ☐ ☐ Pets present (proof of immunization as required, signed by veterinarian) {Section 111.06}
24. ☐ ☐ ☐ Licensed pest control contractor {Section 110.14}
25. ☐ ☐ ☐ Staff present who hold valid CPR and First Aid Certification {Section 107.01, 4 & 5}
26. ☐ ☐ ☐ Proof of Accident/Liability Insurance or documentation that parent has been notified that no insurance is in effect {Section 103.01, 1-j}

Comments/Recommendations

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

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

[Signature]
Director

[Signature]
Child Care Representative

Mississippi State Department of Health
Revised 9-1-09
White Copy - Facility File
Yellow Copy - Operator

Form 289
Food Service Facility Inspection Results
The Golden Connection
680 Third Street
MARKS, MS 38646
License# 5805 QUITMAN
Director: Patricia Hankins

CRITICAL VIOLATIONS
No critical violations during today's inspection

CORRECTION PLAN AND SCHEDULE

Certified Manager: Patricia Hankins
Licence Number: 5805

Facility Signature: [Signature]
Environmentalist Signature: [Signature]

Please Remit within 10 days to:

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

Mississippi State Department of Health

Form 301 Revised 2/15/08
Child Care Licensure Playground Checklist

The Golden Connection
680 Third Street
MARKS, MS 38646

License# 5805 QUITMAN

Director: Patricia Hanks

YES NO N/A

1. Playground fence less than 3½" from surface. (Rule 1.11.9 (8), pg 48) In good repair, with no gaps? (Rule 1.11.9 (8), pg 48)

2. 2 entrances/exits, with one being remote from the building? (Rule 1.11.9 (8), pg 48)

3. Is surfacing adequate? If not, where is it inadequate? (CPSC, 2.4.2, pg8)

4. AC units, high-voltage cabling/wires inaccessible? (Rule 1.11.9 (5), pg 47)

5. No standing water present on playground or in/on playground equipment or walkways? (CPSC 2.4.2.2-5, pg 10)

6. Toys & equipment in good repair? (none broken/deteriorating) (Rule 1.10.2 (2), pg 36)

7. Sidewalks provide smooth walking surface? (no trip hazards) (CPSC 3.6, pg 15)

8. All bolts on equipment & fence <2 threads beyond the nut? Are all bolts and fencing twists/wires facing away from the playground area? (Rule 1.11.9 (5), pg 47)

9. Tree limbs at least 7ft. above play surfaces? Is fence free of brush/overgrowth? (CPSC 3.4, 3.5, pg 15)

10. Are use zones adequate? If not, where are they inadequate? (CPSC 5.3.9, pg 40)

11. If swings are present, are S-hooks in good repair? If not, state deficiency

12. If slide is present, is exit height/exit zone adequate? If not, state deficiency (CPSC 3.2, pg13)

13. Are spring rockers a minimum of 6 ft. apart? (ASTM 9.5.1.2, pg 15)

14. Is age-appropriate equipment being used? If not, state which pieces are inappropriate

15. Is playground area clean & free of hazards? If not, state deficiency. (Rule 1.10.2, pg 36)

16. Is adequate shade present on the playground? (CPSC 2.1.1, pg 5)

17. Are concrete footings located at least 6" beneath the surface? (Rule 1.10.2 (2), pg 36)

18. Is wood smooth? Documentation provided that wood has been properly treated. (CPSC 2.5.5)

Director

Licensing Official