

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES BUREAU OF ENVIRONMENTAL HEALTH SERVICES

SANITATION INSPECTION REPORT LICENSED CENTERS, GROUP HOMES AND LICENSE-EXEMPT FACILITIES

Arrival Time	CODES
	X = Defects Noted
December Time	N.O. = Not Observed
Departure Time	N.A. = Not Applicable
	# = Discussed and Agrees to comply with requirements
Date	
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	LIOLITOL-LALIVII I I AOILITILO				17102 1 01			
ı	nitial Annual Re-Inspection Lead Special Circu	mstances	:					
FACIL	FACILITY NAME				COUNTY CODE			
ADDF	ESS (Street, City, State, Zip Code)			INSPECTOR'S NAME				
An	inspection of your facility has been made on the above date.	Any nor		ed below with a	1 X.			
Α.	GENERAL REQUIREMENTS	E.	•					
1.	Clean and free of unsanitary conditions.	1	Food from an approved s	source and in soun	d condition;			
2.	No environmental hazards observed.	١.	no excessively dented ca					
3.	No evidence of insects, spiders, rodents or or pest harborage.	2. No use of home-canned food. No unpasteurized milk.						
4.	Well ventilated, no evidence of mold, noxious or harmful odors.	3.	3. Ground beef cooked to 155° F; poultry and pooled eggs to 165° F; pork to 145°F; and all other foods cooked to at least 135° F; all hot food kept at 135° F or above. 4. Precooked food reheated to 165° F.					
5.	Screens on windows and doors used for ventilation in good repair.							
6.	No indications of lead hazards.							
7.	No toxic or dangerous plants accessible to children.				or bolow			
8.	Medicines and other toxic agents not accessible to children and stored to prevent contamination of child contact items.	5.						
	All sinks equipped with mixing faucets or combination faucets with	—— 6.	Refrigerator 41° F or belo		np(s) at time of inspection:			
9.	hot and cold running water under pressure.		10441104.1 0040 11 110020		ip(o) at amo of moposition.			
10.	Hot water temperature at sinks accessible to children: 100°-120° F.							
	Temp(s) at time of inspection:	7.			0° F in 2° increments			
11.	Pets free of diseases communicable to man.		for checking food tempe		ed and stored to prevent			
12.	Pets living quarters clean and well maintained.	8.	Food, food related items and utensils covered and stored to 8. contamination by individuals, pests, toxic agents, cleaning a					
13.	Reptiles prohibited on the premises. Birds of the Parrot Family		water drain lines, medicines, dust, splash and other foods. No ba					
10.	tested for Psittacosis.		hand contact with ready-					
44	Swimming/wading pools filtered, treated, tested and water quality	9.	Food, toxic agents, clean shall be properly labeled	iing agents not in t	heir original containers			
14.	records maintained. Meets local codes.	10	No food stored or prepare					
15	A minimum of 18" separation between drinking fountains and hand	11	. Food stored in food grad	de containers only.				
	sinks.	12	12. Food thawed under refrigeration, 70° F running water, or microwave					
16.	No high hazard cross connections.	40	if part of the cooking process.					
B. WATER SUPPLY (check type)			13. No animals in food preparation or food storage areas. 14. No eating, smoking, drinking during food preparation.					
COMMUNITY NON-COMMUNITY PRIVATE			15. Food served and not eaten shall not be re-served to children in care.					
	PRIVATE SYSTEMS ONLY	16	16. Refrigerated potentially hazardous foods properly marked with 7-day					
1.	Constructed to prevent contamination.	_	discard date after opening or preparation.					
2.	Meets DHSS water quality requirements.	F.	F. CLEANING AND SANITIZING					
	A. Bacteriological sample results:	1.	All items requiring sanitizing shall be washed, rinsed, and sanitized with approved agents, methods, and concentrations.					
	B. Chemical sample results:							
C.	SEWAGE (check type)	3.	 2. All utensils and toys air dried. 3. The following items washed, rinsed and sanitized after each use: 					
	COMMUNITY ON-SITE	3.	A. Food Utensils.	ieu, iiriseu ariu sai	inized after each use.			
	ON-SITE SYSTEMS ONLY		B. Food contact surfaces including eating surfaces, high chairs, etc.					
1.	DNR Regulated System		C. Potty chairs and ad		<u> </u>			
	Type:		D. Diapering surfaces.	·				
2.	DHSS Regulated System Type:		E. All toys that have ha	ad contact with boo	dy fluids.			
	Meets DHSS requirements.	4.	The following items are w	ashed, rinsed and	sanitized at least daily:			
3.	Meets local requirements.		A. Toilets, urinals, han	dsinks.				
D.	HYGIENE		B. Non-absorbant floor		•			
1.	Caregivers and children wash hands using soap, warm running water and sanitary hand drying methods		C. Infant/Toddler toys		<u> </u>			
	water and sanitary hand drying methods. Care givers and children wash hands BEFORE: preparing, serving,		Walls, ceiling, and floors		d repair. Cleaned and			
and eating food: glove use AFTER: toileting diapering assisting			sanitized when contacte		ta abaali muan : :	-		
with toileting, nose blowing, handling raw food, glove use, cleaning		6.	Appropriate test strips a concentration of sanitizing		ю спеск proper			
	and sanitizing, outdoor play, handling animals, eating, smoking, and as necessary.	7.	0 1 11 1 1 1		nner which does not			
3.	Personnel preparing/serving food free of infection or illness.		contaminate food, food					
	-1916 (5-21) BETA INSPECTION REPORT GENERATED ELECTRO	ONICALLY	USING ADOBE® ACROBAT®	SOFTWARE		BCC-35-1		

	ters, Group Homes and License-Exempt Facilities			O = Observed	DA 05 0 05		
	nitation Inspection Report			R = Required	PAGE 2 OF		
FACI	.ITY NAME			DVN	DATE		
	FOOD EQUIPMENT AND UTENSILS	l.	BATHROOMS				
	Single service items not reused.	1.	Cleaned as needed or a				
2.	All food equipment and utensils in good repair.	2.		d dispensed in a manner th	at minimizes		
3.	Food preparation and storage areas have adequate lighting.	_	contamination. All equi	· · · · · · · · · · · · · · · · · · ·			
4.	Kitchen equipment that produces excessive grease laden vapors,	3.		ER October 31, 1991 have			
	moisture, or heat is properly vented.			and solid doors. Doors clo	sed when		
5.	Facilities shall have mechanical refrigeration for facility use only.		not in use.				
	Exception: License-Exempt facilities approved BEFORE October 31, 1997.	4.		ER October 31, 1998 have			
6.	No carpeting or absorbent floor coverings in food preparation areas.			prevent molds and odors.			
7.	Adequate preparation and storage equipment for hot foods.	5.	•	cated in or immediately adja	acent to the		
8.	Facilities with a capacity of 20 children or less shall have:	6.	bathrooms. No carpeting or absorb	ant floor coverings			
	A. Mechanical dishwasher that sanitizes; or employ an additional			-			
	sanitizing rinse in conjunction with the mechanical dishwasher;	7. 8.	Sufficient lighting for cl				
	or a 3 compartment sink or a 2 compartment sink with a third			shes or mouthable toys.			
	portable compartment for the final sanitizing step.	J.	INFANT/TODDLER U				
	B. If a mechanical dishwasher is used, a minimum of two sinks	1.		urs, shall have a sink for fo	od preparation		
	located in the food preparation area labeled as: 1) Hand washing only 2) Food preparation only.			ering hand washing sink.			
	Facilities with a capacity of more than 20 children approved BEFORE	2.		Unit washed, rinsed and s	anitized after		
9.	October 31, 1991, shall have:	17		methods and equipment.			
	A. Mechanical dishwasher that sanitizes; or employ an additional	K.	DIAPERING AREA				
	sanitizing rinse in conjunction with the mechanical dishwasher;	1.		shed, rinsed or stored in the	e diaper		
	or use a 3 compartment sink.		changing area.		p		
	B. If a mechanical dishwasher is used, a minimum of two sinks	2.		unning water located in the	diapering area		
	located in food preparation areas labeled as:		•	e to the diapering surface. ooth, easily cleanable, nona	hoorbont and		
	1) Hand washing only 2) Food preparation only.	3.	in good repair.	oun, easily cleanable, nona	osorbent, and		
10.	Facilities with a capacity of more than 20 children approved AFTER			in a solid, nonabsorbent co	ntainer with		
	October 31, 1991 shall have:	4.	tight fitting lid located		Tallor Will		
	A. Facilities located in a provider's residence shall have separate	5.		r emptied, washed, rinsed,	and sanitized		
	food preparation and storage areas.	ა.	daily.	·			
	B. A commercial dishwasher or a 3 compartment sink in addition to a separate hand washing sink.	L.	REFUSE DISPOSAL				
	C. If a commercial dishwasher is used, a sink located in the food	1.	Adequate number of c	ontainers.			
	preparation area labeled as food preparation.	2.	Clean, nonabsorbent,	in sound condition.			
Ц	CATERED FOODS	3.	Outside refuse area cl	ean; containers covered at	all times.		
1.		4.	Inside food refuse con	tainers covered as required			
	Catered food from inspected and approved source. Safe food temperature maintained during transport.	5.	Restrooms used by st	aff have covered refuse cor	ntainers.		
2.	Temperature at arrival:						
3.	Facility using catered food exclusively shall have a hand washing						
,	sink in kitchen/food service area.						
4.	Facility not using single service utensils exclusively meets applicable						
	dishwashing requirements as stated in Section G(8), G(9), or G(10).						
5.	Food and food related items protected from contamination during						
	transport.						
The	above facility has been inspected and does does not conform	1	The inspector has disc	cussed the issues marke	d by an asterisk (**)		
	n the sanitation requirements of the Missouri Department of Health and						
Senior Services.			and/or marked by an (X) on this form. I agree to comply with these requirements.				
	ATURE OF INSPECTOR TELEPHONE DATE		SIGNATURE OF CHILD CARE PRO	OVIDER	DATE		
	Kank						

Centers, Group Homes and License-Exempt Facilities

Centers, Gr Sanitatio	oup Homes and License-Exempt Faci n Inspection Report	lities			O = Observed R = Required	PAGE 3 OF
FACILITY NAM	n Inspection Report				DVN	DATE
Section #			OBSERVAT	TIONS		
			0202			
The abov	e facility has been inspected a	ind does does	not conform	The inspector has disc	ussed the issues marked	I by an asterisk (*)
with the s Senior Se	anitation requirements of the Mervices.	lissouri Department of	Health and	and/or marked by an these requirements.	(X) on this form. I ag	ree to comply with
SIGNATURE O	FINSPECTOR	TELEPHONE	DATE	SIGNATURE OF CHILD CARE PRO	VIDER	DATE
	and					