



MISSOURI DEPARTMENT OF HEALTH & SENIOR SERVICES
SECTION FOR CHILD CARE REGULATION
SANITATION INSPECTION REPORT
LICENSED CENTERS, GROUP HOMES
AND LICENSE-EXEMPT FACILITIES

Arrival Time 9:59am	CODES X = Non-Compliance Noted N.O. = Not Observed N.A. = Not Applicable * = Discussed and Agrees to comply with requirements
Departure Time 11:46am	
Date 12-11-17	

Initial Annual Reinspection Lead Special Circumstances _____

FACILITY NAME East Missouri Action Agency Head Start / Kelly Dement	DVN 000725522	COUNTY CODE 187
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ADDRESS (Street, City, State, Zip Code) #2 Savannah Drive, Bonne Terre, MO 63628	INSPECTOR'S NAME (Print) John Wiseman
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An inspection of your facility has been made on the above date. Any non-compliances are marked below.

A. GENERAL **E. FOOD PROTECTION**

1. Clean and free of unsanitary conditions.	X	1. Food from approved source and in sound condition; no excessively dented cans.	
2. No environmental hazards observed.		2. No use of home canned food. No unpasteurized milk.	
3. No evidence of insects, spiders, rodents or pest entry points, or pest harborage.		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 140° F. All hot food kept at 140° F or above.	
4. Well ventilated, no evidence of mold, noxious or harmful odors.		4. Precooked food reheated to 165°.	
5. Screens on windows and doors used for ventilation in good repair.	X	5. Food requiring refrigeration stored at 41° F or below.	
6. No indication of lead hazards.		6. Refrigerator 41° F or below, accessible readable thermometer required. Foods in freezer frozen solid. Temp at time of Inspection _____ 38° F.	
7. No toxic or dangerous plants accessible to children.		7. Metal stemmed thermometer reading 0° - 220° F in 2° increments for checking food temperatures. (Also use to check hot water temperature.)	
8. Medicines and other toxic agents not accessible to children. Child contact items stored to prevent contamination by medicines, other toxic agents, cleaning agents and waste water drain lines.		8. Food, food related items, and utensils covered, stored and handled to prevent contamination by individuals, pests, toxic agents, cleaning agents, water drain lines, medicines, dust, splash and other foods. No bare-hand contact of ready-to-eat foods.	
9. All sinks equipped with mixing faucets or combination faucets with hot and cold running water under pressure.		9. Food, toxic agents, cleaning agents not in their original containers properly labeled.	
10. Hot water temperature at sinks accessible to children - 100° - 120° F. Temp at time of Inspection _____ 100-105° F.		10. No food or food related items stored or prepared in diapering areas or bathrooms.	
11. Pets free of disease communicable to man.		11. Food stored in food grade containers only.	
12. Pets living quarters clean, and well maintained.		12. Food thawed under refrigeration, 70° F running water, or microwave (if part of the cooking process).	
13. Reptiles are prohibited on the premises. Birds of the Parrot Family tested for Psittacosis.		13. No animals in food preparation or food storage areas.	
14. Swimming/wading pools filtered, treated, tested and water quality records maintained. Meets local codes.		14. No eating, drinking, and/or smoking during food preparation.	
15. A minimum of 18" separation between drinking fountains & hand sinks.		15. Food served and not eaten shall not be re-served to children in care.	
16. No high hazards cross-connections.		16. Refrigerated potentially hazardous foods properly marked with 7-day discard date after opening or preparation.	X

B. WATER SUPPLY (circle type)

COMMUNITY	NON-COMMUNITY	PRIVATE
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1. Constructed to prevent contamination.	
2. Meets DHSS-SCCR water quality requirements. A. Bacteriological sample results. B. Chemical (Prior SCCR Approval Needed)	

C. SEWAGE (circle type)

COMMUNITY	ON-SITE
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ON-SITE SYSTEMS ONLY	
1. DNR Regulated System: Type: _____	
2. DHSS Regulated System: Type: _____ Meets DHSS-SCCR requirements.	
3. Meets local requirements.	

D. HYGIENE

1. Care givers and children wash hands using soap, warm running water and sanitary hand drying methods.	
2. Care givers and children wash hands BEFORE: preparing, serving, and eating food; glove use. AFTER: toileting, diapering, assisting with toileting, nose blowing, handling raw food, glove use, cleaning and sanitizing, outdoor play, handling animals, eating, smoking, and as necessary.	
3. Personnel preparing/serving food is free of infection or illness.	

F. CLEANING AND SANITIZING

1. All items requiring sanitizing shall be washed, rinsed and sanitized with approved agents, methods, and concentrations.	X
2. All utensils and toys air dried.	
3. The following items washed, rinsed and sanitized after each use: A. Food utensils B. Food contact surfaces including eating surfaces, high chairs, etc. C. Potty chairs and adapter seats. D. Diapering surface E. All toys that have had contact with body fluids.	
4. The following items are washed, rinsed and sanitized at least daily: A. Toilets, urinals, hand sinks. B. Non-absorbent floors in infant/toddler spaces. C. Infant/Toddler toys used during the day.	
5. Walls, ceilings, and floors clean and in good repair. Cleaned and sanitized when contacted by body fluids.	
6. Appropriate test strips available and used to check proper concentration of sanitizing agents.	
7. Soiled laundry stored and handled in a manner which does not contaminate food, food related items and child contact items.	

Centers, Group Homes and License-Exempt Facilities
Sanitation Inspection Report

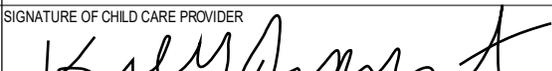
FACILITY NAME East Missouri Action Agency Head Start / Kelly Dement	DVN 000725522	DATE 12-11-17
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G. FOOD EQUIPMENT AND UTENSILS	I. BATHROOMS
1. Single service items not reused. X	1. Cleaned as needed or at least daily.
2. All food equipment and utensils in good repair.	2. Paper towels stored and dispensed in a manner that minimizes contamination. All equipment in good repair.
3. Food preparation and storage areas have adequate lighting.	3. Facilities approved AFTER October 31, 1991 have: Enclosed with full walls and solid doors. Doors closed when not in use.
4. Kitchen equipment that produces excessive grease laden vapors, moisture or heat is properly vented.	4. Facilities approved AFTER October 31, 1998 have: Mechanically vented to prevent molds and odors.
5. Facilities shall have mechanical refrigeration for facility use only. Exception: License-Exempt facilities approved BEFORE October 31, 1997	5. Hand washing sinks located in or immediately adjacent to the bathroom.
6. No carpeting or absorbent floor coverings in food preparation area.	6. No carpeting or absorbent floor coverings.
7. Adequate preparation and storage equipment for hot foods.	7. Sufficient lighting for cleaning.
8. Facilities with a capacity of 20 children or less shall have:	8. No storage of toothbrushes or mouthable toys.
A. Mechanical dishwasher that sanitizes; or employ an additional sanitizing rinse in conjunction with the mechanical dishwasher; or a 3 compartment sink or a 2 compartment sink with a third portable compartment for the final sanitizing step.	J. INFANT / TODDLER UNITS
B. If a mechanical dishwasher is used, a minimum of two sinks located in food preparation area labeled as: 1) Hand washing only 2) Food preparation only.	1. If food preparation occurs, shall have a sink for food preparation separate from the diapering hand washing sink.
9. Facilities with a capacity of more than 20 children approved BEFORE October 31, 1991, shall have:	2. Utensils used in the I/T Unit washed, rinsed and sanitized after each use with proper methods and equipment.
A. Mechanical dishwasher that sanitizes; or employ an additional sanitizing rinse in conjunction with the mechanical dishwasher; or use a 3 compartment sink.	K. DIAPERING AREA
B. If a mechanical dishwasher is used, a minimum of two sinks located in food preparation area labeled as: 1) Hand washing only 2) Food preparation only.	1. No utensils or toys washed, rinsed or stored in the diaper changing area.
10. Facilities with a capacity of more than 20 children approved AFTER October 31, 1991 shall have:	2. Hand sink with warm running water located in the diapering area immediately accessible to the diapering surface.
A. Facility located in provider's residence shall have separate food preparation and storage areas.	3. Diapering surface smooth, easily, cleanable, nonabsorbent, and in good repair.
B. A commercial dishwasher or a 3 compartment sink in addition to a separate hand washing sink.	4. Soiled diapers stored in a solid, nonabsorbent container with tight fitting lid located in diapering area.
C. If a commercial dishwasher is used, a sink located in food preparation area labeled as food preparation.	5. Soiled diaper container emptied, washed, rinsed and sanitized daily.
H. CATERED FOODS	L. REFUSE DISPOSAL
1. Catered food from inspected and approved source.	1. Adequate number of containers.
2. Safe food temperature maintained during transport. Temperature at arrival _____ °F.	2. Clean, nonabsorbent, in sound condition.
3. Facility using catered food exclusively shall have a hand washing sink in kitchen/food service area.	3. Outside refuse area clean; containers covered at all times.
4. Facility not using single service utensils exclusively meets applicable dishwashing requirements as stated in Section G(B), or G(9), or G(10).	4. Inside food refuse containers covered as required.
5. Food and food related items protected from contamination during transport.	5. Restrooms used by staff have covered refuse containers.
SECTION #	OBSERVATIONS
	Lunch: Grilled cheese sandwich Tomato soup = 161F (hot held) Milk = 40F Apple sauce True cooler = 38F True freezer = 5F Frigidaire freezer = 8F Classroom B water = 100F Classroom A water = 105F The re-inspection will be conducted on January 11, 2018. This facility is served by public water and sewerage.

The above facility has been inspected and does does not conform with the sanitation requirements of the Missouri Department of Health and Senior Services -Section for Child Care Regulation

The inspector has discussed the issues marked by an asterisk (*) and/or marked by an (X) on this form. I agree to comply with these requirements.

SIGNATURE OF INSPECTOR  TELEPHONE 573-431-1947 DATE 12-11-17

SIGNATURE OF CHILD CARE PROVIDER  DATE 12-11-17

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East Missouri Action Agency Head Start / Kelly Dement

DVN:

000725522

DATE

12-11-17

SECTION #**OBSERVATIONS**

E16) A discard date was not marked on a plastic bag of hard boiled eggs stored in the True cooler in the kitchen. Refrigerated potentially hazardous foods must be properly marked with a seven day discard date after opening or preparation. COS by discarding the eggs.

F1) Chlorine was not detected in a tub of sanitizer water holding cloth rags. All items requiring sanitizing shall be washed, rinsed and sanitized with approved agents, methods and concentrations. COS by preparing new sanitizer.

G1) Several used, disposable, aluminum food pans were observed stored with clean food equipment in the cabinet in the kitchen. Single service items may not be reused. COS by discarding the pans.

A1) The cover was missing from the water tank reservoir of the toilet in the childrens' restroom in classroom B. Aluminum foil was placed over the reservoir. Physical facilities must be clean and free of unsanitary conditions.

A5) The window on the south side of classroom A was open for ventilation. The screen frame in this window is bent and does not adequately seal the window to entry by pests. Screens on windows and doors used for ventilation shall be in good repair.

Note: A small wire-fence enclosure was observed in classroom A. According to an employee, the enclosure is used to contain a guinea pig. The animal was not present on the day of this inspection. The enclosure was lined with disposable potty pads. The enclosure appeared to be clean.

Note: The facility will be closed due to the holidays from December 22, 2017 to January 9, 2018.

The above facility has been **inspected** and does does not conform with the sanitation requirements of the Missouri Department of Health and Senior Services Section for Child Care Regulation.

The inspector has discussed the issues marked by an asterisk (*) and/or marked by an (X) on this form. I agree to comply with these requirements.

SIGNATURE OF INSPECTOR

TELEPHONE

DATE

573-431-1947

12-11-17

SIGNATURE OF CHILD CARE PROVIDER

DATE

12-11-17