

MISSISSIPPI STATE DEPARTMENT OF HEALTH
Child Care Facility Inspection

County S WY DWER	Date 2 129 120 19
Facility Name BUCK A- WO LEPENTING CON	License Number 67 CDPF-7149
10.100	pacity 50
All Items In Red Are Critical Qualified director present Proper staff to child ratio present Room and playground capacity met	Other Items - Must be corrected
Proper staff to child ratio present Room and playground capacity met Center capacity met License/complaint visible Certified food manager	Building and Grounds Walls, ceilings, floors, toys, equipment clean and in good repair
Sanitation Approved Garbage and garbage bins maintained	Lighting approved Heating/cooling approved Ventilation adequate Glass approved and shielded Telephone on premises, available,
Waste water system approved and functioning	and functioning
1. Lill 1. 13. U (2) White the Penalty	Hot water at all sinks, not to exceed 120° Children barred from kitchen Vending machine snacks meet
3\$	nutritional guidelines, if present Exits, doors and fastening devices single action approved and in good working order
4. \$ 5. \$	Exits unobstructed
Age/Child/Staff Name 1.	and thermometers placed properly and in good working order
3.	First aid kits stocked and easily accessible Playground area clean, shaded, well drained and equipped and fence in good
5.	repair
6. 7.	Pool area clean, fenced, and adequately maintained
Helen Buchner Center Director/Individual	Diaper changing stations adequate in number and each fully supplied (number) Child Care Representative
White Copy - Facility File Yellow Copy - Facility Operator	Y

Mississippi State Department of Health

12-10-08

Form No. 281

Form No. 287



MISSISSIPPI STATE DEPARTMENT OF HEALTH

District_	Child Care Encounter
CHAV	A-UD (PANT) CINTED (1000)
Name DWC Address 905	HOOVER St. THOUMAIN MY 38751
Purpose HIT	To lowup on linewal TA Director Helen Buckner
Mileage Start	Mileage End_
County Time In (15)	Time Out 1013 100
Time in	Total Time
Findings/Commer	to The pulpose for usit is for A following inspection on lipment, food manager, A) well As CPL + D+ Asa CERTICATIONS.
Collegication	EMPOUR Observed Freith Failed to have updated food Manager, on U-17-2019 At the time of lenewall Inspection.
Subchappel	3: NUTELLIZON & MEALS
Rue 1.13.60	(2) States on part "Early Children, Facility must have a
Cutified 7	SUD MANUSCRIP PART, "EACH CHILDCHILD FACILITY MUST have A
hading: Li	ENSONG Obselved ON todays usit the Jacilety Fried to have A
Plant of cold hel Tumph Exam and	Chon: Perfelen Buckner, director owner she had to reschedured using short stary. She will take the stary and director of the she will take the
icenstry C	observed state development and collect of And an complaince on
rechard i	DISTANCE WAS PROVIDED ON THE IMPORTANCE OF MAKING A
A Childca	l Survey was left with Helen Buctrue, owner.
Helen Brenter Director/Des	White Copy - Facility File Yellow Copy - Operator

Revised 6-24-09

Mississippi State Department of Health



Child Care Encounter (Continuation)

Date 2 28/2019

Facility Name BUCK A-LUD (CANAMY CONTEX License No. (1700) 7149
TF HOREGIE any concerns questions contact war Jones @
Please The Food Manager Certificate to Court 8007 4999, APTN:
scensing read from #333 & The week cycle manus.
THIS I and I molations may result on a minetary penalty, repeated to Atlants may result on the dividing of a monetary penalty. Repeated to penalty of the facility license.
Helen Buchner The Director Designee Individual Child Care Representative White Copy - Facility File Yellow Copy - Operator