N.C. Department of Health and Human Services		1			
Division of Public Health	Demerits: _	10 ( 0 )	Health Department	EA4210 A	00
Environmental Health Section	Date of Insp	/Chg 10-5-2]	Current Facility ID:	20129601	46
Sanitation Standards Evaluation	Status Code	:	Old Facility ID:		
Form for Child Care Centers					
Classification: Superior Approved	☐ Provis				
			Water sample taken tod		NO
Transient Non-Community	Non-Public W	ater Supply	Inspection	☐ Name Change	
		1	Re-Inspection	Verification of	Closure
Wastewater System: Community On-Site	Systems	1	Visit	Status Change	
Licensing ID No:		M	aximum Capacity:		
Name of Facility: Nivacle Tabernac	1c Chi	ld Case Center	Operator: Rame	ona Willian	ns
	Soring		States	NC Zip: 2839	10
Street Address: 2301 Ray Rd.	String	CALL	State:	Zip: 2031	
J	-				
HANDWASHING: .2803, .2836	Demerits		products properly stored	and kant alaan	3 2
Handwashing when required     Broppy handwashing procedure	5 5	BEDS COTS MATS	ed for proper storage; used AND LINENS: .2821, .2836	ана кертсеан	2
2. Proper handwashing procedure FOOD: .2804, .2806, .2807, .2808, .2836	5	32. Individual linen	provided; adequate beds, c	ots, or mats provided.	3
*3. From approved sources, no spoilage, no adulteration	6	in good repair, i	properly stored, labeled, spa	aced during use	
*4. Potentially hazardous foods meet storage and holding	6	<ol><li>Linen, bedding,</li></ol>	wash cloths, bibs, burping	cloths laundered, and	3
temperatures; bottles, lunches refrigerated at 45° F or below		in good repair	FURNITURE, 0000, 0000		
5. Food properly stored, thawed, prepared, cooked, cooled,	E	10YS, EQUIPMENT,	FURNITURE: .2822, .2836 ood repair; water play center	re clooped, conitized	4
handled, served, transported, packaged and identified; only supervised children in kitchen	5	and maintained		3 Oleaneu, Samuzeu	
6. Not re-served	3		surfaces cleaned and sanitiz	zed in rooms where	4
7. Thermometers provided, accurate	2	children who are	e not toilet trained are cared	d for	
FOOD SERVICE EQUIPMENT& UTENSILS: .2809, .2810, .2812,	.2814	PERSONNEL: .2808,	.2823	In a Section of the s	0
*8. Meets specifications for refrigeration, sinks, lavatories and	б	36. Approved nygle	enic practices, clean clothes idence of tobacco use where	, nair restraints where	2
dishwashing equipment  9. Meets specifications for other equipment and utensils,	4		CEILINGS: .2824, .2825, .2		_
approved material and construction	7	37. Easily cleanable	e, clean, and in good repair;	; carpets vacuumed	(4)
Food contact surfaces properly washed, rinsed, sanitized	5	as required and	l extraction cleaned; date cle	eaned	
and air dried; single-service articles not re-used			ERMAL ENVIRONMENT: .2		
Approved sanitizer provided; test kit available	2	38. Room temperat	ture between 65° F and 85°	h nined on required	3 2
12. Equipment, non-food contact surfaces clean; in good repair	4 3	39. Equipment clea	n and in good repair; mainta	amed as required	2
<ol> <li>Proper storage and handling of clean equipment, utensils and single-service articles</li> </ol>	3		communicable disease or c		6
WATER SUPPLY & DRINKING WATER FACILITIES: .2815, .283	6		h 10A NCAC 41A .0200		
*14. Water supply meets 15A NCAC 18A .1700 and 15A NCAC	6	41. Persons caring	for sick or mildly ill children	excluded from	4
18C if applicable; documentation provided			ich disease transmission lik		2
*15. Hot water supplied and maintained in the kitchen	6 4	42. Designated are WASTEWATER: .282	a for sick children; maintain	ed as required	2
<ol> <li>Hot water supplied and tempered water maintained as required in all other areas</li> </ol>	4	*43 Approved waste	ewater disposal in accordan	ice with 15A NCAC	6
*17. Hot water in excess of 120°F not allowed in areas	6	18A .1900	strator disposal in door can		
accessible to children		SOLID WASTE: .283			
18. Backflow prevention provided, no cross connections	3		perly handled; containers a		2
19. Approved drinking fountains, pressure regulated, clean	2	equipment kept	t clean; can cleaning facilitie CONTROL, OUTDOOR LE	IS AGEQUATE FARNING ENVIRONMEN	NT
<b>LEAD POISONING HAZARDS: .2816</b> ★20. No identified lead poisoning hazards in accordance with	6	& PREMISES: .2831			
NCGS 130A-131.7(7); date water tested	Ü	★45. Pesticides prop	perly used; no new CCA pres	ssure-treated wood	6
TOILET AND LAVATORY FACILITIES: .2817, .2818, .2836		<ol><li>46. CCA pressure-</li></ol>	treated wood sealed; date s	ealed;	2
<ol><li>Properly sized, located, accessible, and in good repair;</li></ol>	4	soil covered or			2
sinks, toilets and potty chairs cleaned and disinfected	2	47. No animais in to	ood preparation areas and r as allowed; no prohibited a	nimale: required	3
<ol> <li>Soap, approved hand drying devices, toilet tissue available</li> <li>Approved storage in toilet rooms, lavatories free of storage;</li> </ol>	3 2	veterinary reco	rds available and current	minais, required	_4
hand wash signs posted	2	48. Effective contro	ol of rodents, insects, and ot	her vermin; premises	(3)
DIAPER CHANGING FACILITIES: .2817, .2818, .2819; .2820, .28	36	free of vermin h	narborage and breeding are	as	•
*24. Approved facilities as needed	6	49. Premises clean	and drained; equipment in	good repair;	2
*25. Diapering surfaces cleaned and disinfected after each use	6 2	sandboxes proj	perly constructed and clean outdoor activity restrictions	, autherence to all	
<ol> <li>Approved cleaning and disinfecting solutions provided; test kit available when required</li> </ol>	2	SWIMMING & WADI		mion applicable	
27. Free of storage and in good repair; cleaning and disinfecting	4	★50. Designed, cons	structed, operated and main	tained in accordance	6
solutions labeled; approved diapering methods used; diaper		with 15A NCAC			
changing and handwash signs posted		→ Indicates or	ritical item (6 demorite)		
STORAGE: .2820	6	★ Indicates cr	ritical item (6-demerits).		
<ul><li>★28. Medications properly stored</li><li>★29. Hazardous products properly stored and locked</li></ul>	6 6	4	901	Down	
		Signad:	men cars	n Kens	
Comment Sheet Attached	10	Signed:	Environmental He	alth Specialist	

**Environmental Health Specialist** Purpose: This form is used to implement G.S. 110-93 requiring child care centers to submit evidence of meeting sanitation standards in G.S. 110-91. Preparation: An original and two copies of this form shall be completed by local Environmental Health Specialists during each inspection. The original is sent to the Division of Child Development, N.C. Department of Health and Human Services, one copy is given to the child care operator; and the other copy is kept by the local health department. Classification: Superior – 0-15 demerits, no 6-point demerit; Approved – 16-30 demerits, no 6-point demerit; Provisional – 31-45 demerits, or any 6-point demerit; Disapproved – 46 or more demerits, or failure to improve Provisional classification. Disposition: This form may be destroyed in accordance with Standard-8.B.6., Inspection Records, of the Records Retention and Disposition Schedule for County/District Health Departments which is published by the N.C. Division of Archives and History. Additional forms may be ordered from: Environmental Health Section, 1632 Mail Service Center, Raleigh, NC 27699-1632 (Courier 52-01-00).

## N.C. DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES **DIVISION OF ENVIRONMENTAL HEALTH**

## **Comment Addendum**

COUNTY: Harnett County
NAME: Miracle Tabornacle Child Care 10: 5043420192
STREET: 230   Ray Rd.
CITY: Spring Lake DATE: 10-5-21
STATE: NC ZIP CODE: 28390 TIME 18:55
STATE.
COMMENTS
Coulting monded at Class to use II a declass in
Caulking needed at floor to wall junctures in Kitchen and in classrooms.
The should be have classoners of it assily transitive
Thresholds between classrooms don't easily transition and are difficult to clean.
and are citticult to clearly
Mouse droppings seen in infant room.
Water temperature adjusted during inspection. Monitor temperatures daily.
Cornerguald recommended for window stools in infint
COOM.
Purchase test strips for sanitizer a disinfectant.
Mill Eason KEHS
Signature of Environmental Health Specialist  Signature of Recipient

Purpose: This form is developed to be used for making explanatory comments about violations observed during inspections and/or notices of permit actions during inspections of restaurants, foodstands, commissaries, hotels, bed and breakfast homes and inns, summer camps, meat markets, institutions, residential care facilities, public swimming pools, tattoo establishments and other establishments inspected by Environmental Health Specialists under rules adopted by the Commission for Health Services. Preparation: local Environmental Health Specialists shall complete form DENR 4008 when necessary during inspections and or notices of permit actions. The original and two copies will be distributed with the form about which they provide comments. Disposition: This form may be destroyed in accordance with Standard &, Inspection Records of the Records Disposition Schedule published in the N.C. Division of Archives and History.

Additional Forms may be ordered from: Division Of Environmental Health 1630 Mail Service Center, Raleigh, NC 27699-1630 (Courier 52-01-00)

Environmental Health Services Section (Review 10/06)

**DENR 4008** - Revised 10/04

Environmental Health Services Section (Review 10/07)