| Room 1-Sam spray 3  | 00000                                      | DC CCP 4545  | G x p 4/30/35                                 |
|---|--|--|---|
| hand sink   | '''  |  |   |
| egrupped  | Date: 2418                                 | 25 Enrolled: 196 License   | ed: <u>435</u>                                |
| 3100F   | Center Name                                | ' . ^ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \  | muse of Rockeral                              |
| Room 8 Sam  |  |  | ON TX   |
| 23000   | Address:                                   | 3009 Gratial Rad   | aux /   |
| City of Rockwall hand Manager/Operator: Ash 1 Burton  |  |  |   |
| (A) ( Min of k  |  |  |   |
| Courses 9100  |  |  |   |
| Room 9 Sam 9 200 ppm  | CHILD C                                    | ARE FACILITY INSPECTION REP  | )   |
| POSTINGS  | ^  | FACILITY MAINTENANCE   | ldg A   |
| GHD Child Care Center Permit  | Yes\D\No D                                 | Establishment Clean and Well Maintained  | Yes D No D                                    |
| TDPRS Child Care Center License / Your Emergency and Evacuation Relocation Plans            | Yes'Ū-No □<br>Yes 望-No □                   | Walls Properly Constructed, Clean, Good Repair<br>Ceilings Properly Constructed, Clean, Good Repair  |   |
| Activity Plans Available and Followed   | Yes D No □                                 | Floors Properly Constructed, Clean, Good Repair  | Yes B No 🗆                                    |
| Daily Menu, including Snacks and Meals  | Yes D No D N/A D                           | Windows & Doors Maintained and Screened  | Yes 🖳 No 🗆                                    |
| Telephone Numbers Next To Each Phone  | Yes U No 🗆                                 | Hand Contact Surfaces Clean and in Good Repair   | Yes 🖟 No 🛘<br>Yes 🖟 No 🖟                      |
| RECORDS 200 ppm   | records                                    | Lighting Adequate Throughout Center Glass Doors Clearly Marked                                       | Yes D No D N/A D                              |
| RECORDS Sign-In and Sign-Out Logs Maintained Documentation of Drills Available              | Yes 12 No 🛘                                | Electrical Outlets Covered or Inaccessible   | Yes B No D N/A D                              |
| Documentation of Drills Available Areview Vaccication records are state reviewed and record | Yes D No 🛘                                 | Room Temperatures Satisfactory   | Yes No 🗆                                      |
| • -   | 11   | Heating, Air Units, Water Heater Inaccessible  | Yes D No D N/A D                              |
| Koom 4 Sam 9 200 ppm  | grals                                      | Fans and Heaters Equipped With Safeguards Pesticide Applied Only By Licensed Professional            | Yes 2 No NA 1                                 |
| BASIC CARE  | Yes   No   N/A                             | Playground is state inspected and approved \   | Yes D No D                                    |
| Room Arrangements Adequate (Infant Area)  Required Furnishings Provided (Infant Area)       | Yes   No   N/A                             | Aner   | ritech   bir math                             |
| Safety Straps Present on Equipment (Infant Area   |  | WATER SUPPLY AND PLUMBING  | V 5 × 5                                       |
| Cribs Property Equipped and Safe (Infant Area)  | Yes ☐ No ☐ N/A ☐<br>Irea) Yes ☐ No ☐ N/A ☐ | Toilet Facilities Designed, Maintained, Good Repair Toilet Facilities Sanitized, Properly Ventilated | Yes 19 No 11                                  |
| Cribs Sanitized Property and Frequently (Infant A   |  | Toilet Paper and Waste Receptacles Provided  | Yes No 🛘                                      |
| Room3 sami 9200ppma   | pas  | Potty Chairs Sanitized After Use; Stored Properly  | Yes No No NA D                                |
| SANITATION AND HYGIENE  | Van Didio D                                | Diaper Pails Inaccessible to Children Water Source Approved, Safe Temperature                        | Yes No NA |
| Toys Cleaned and Sanitized Routinely<br>Cribs, Cots, Mats Sanitized and Stored Properly     | Yes ☑ No ☐<br>Yes ☑ No ☐                   | Water Fountains Sanitized, Equipped w/ Guard   | Yes No NA                                     |
| Sanitizer Prepared Daily; Correct Concentration   | Yes\☐ No □                                 | No Cross Connections, Back Siphonage, Backflow   | Yes V No I N/A I                              |
| Children's Hands Washed When Required   | Yes ☑ No ☐<br>Yes ☑ No ☐                   | MISCELLANEOUS  |   |
| Employees Hands Washed When Required  | Yes No D N/A D                             | Ouldoor Play Area Maintained and Enclosed  | Yes No   NA                                   |
| Diaper Changing Procedure Correct Diaper Changing Station Adequate                          | Yes No NA                                  | Outdoor Mechanical Areas Inaccessible<br>Landscape Maintained; Grass, Trees, Poison ivy              | Yes No NA                                     |
| Handwash Station Provided in Diaper Changing  | Area Yes (YNo□N/A□<br>ary Yes (YNo□        | All Bodies of Water Inaccessible to Children   | Yes & No   N/A   Yes & No   N/A               |
| Soap and Paper Towels Provided at Each Lavato<br>Linens Changed When Required               | Yes No NA                                  | Animals on Premises Healthy and Documented   | Yes   No   NA                                 |
| Storage Areas, Cots, Mats Available and Labeled   | . /  | Toxic Items Labeled and Stored Properly  Medications Inaccessible and Properly Labeled               | Yes No NA                                     |
| SI was pad to be T  | eplaced                                    | First Aid Kit Fully Equipped and Accessible  | Yes ☑ No ☐ N/A ☐<br>Yes ☑ No ☐                |
| D. 1 /500m,   | S  | Working Telephone Available  | Yes No 🗆                                      |
| COMMENTS:   | ۸. ۸ ه                                     |  |   |
| Cab sheets washed   | Daily. Ke                                  | 25 assigned to   | children                                      |
| Bottles sent home of  | ally Barry.                                | Good discarded at  | ter use.                                      |
| Cots used-new part  | s sent home                                | e weeky  |   |
| & Room 3-need to replace changing past-granted  |  |  |   |
| 30.00   |  |  |   |
| All gaps given ten  | 2  |  | A C   |
| Johli Buth  |  | Clust Corte 125  |   |
| Center Director/Person In Charge 1900 Child Care Facility Inspection Report (12/27/2016)    |  | Environmental Health Specialist  |   |
| - WISH OIRCIN   |  |  |   |
|   |  |  |   |