



South Central Public Health District

Prevent. Promote. Protect.

CHILD CARE HEALTH STANDARDS INSPECTION

CIRCLE ONE Type of facility:	Family ICCP 634-131	Relative ICCP 634-133	Family ICCP/LIC 634-140	Group ICCP/LIC 634-141	Center ICCP/LIC 634-142	State Lic Only 635/635	City Lic Only 636/636
FACILITY#:		EHS#:	INSP. DATE:	REF. DATE:	EXP. DATE:	INSP. TYPE:	
FACILITY NAME:			PROVIDER NAME:			INSP. TIME:	
ADDRESS:			CITY/ST/ZIP:			TRAVEL TIME:	
PHONE:		Ratio: # of Children:	# ≤ 18(24) mo.	# of Staff:	# Provider's Children:		

Based on the inspection conducted this day, the items marked identify the violations or problems that need to be corrected:

#	Description	X	Comments/Correction Required	Date Corrected
1	AGE & HEALTH OF PROVIDER			
2	PEDIATRIC RESUCE BREATHING CPR/FA			
3	STAFF/CHILDREN EXCLUDED WHEN ILL			
4	IMMUNIZATION RECORDS		# Reviewed:	
5	EMERGENCY COMMUNICATION			
6	SMOKE DETECTOR, FIRE EXTING, EXITS			
7	FOOD SOURCE/FOOD THAWING			
8	FOOD HANDLING/PERSONAL HYGIENE			
9	FOOD CONTACT SURFACES/SANITIZING			
10	DISHWASHING/SANITIZING			
11	UTENSIL STORAGE			
12	FOOD TEMPERATURES/THERMOMETERS			
13	FOOD STORAGE/CROSS CONTAMINATION			
14	MEDICINES/HAZARDOUS SUBSTANCES			
15	GARBAGE COVERED/REMOVED			
16	PLUMBING/SEWAGE DISPOSAL			
17	WATER SUPPLY/WELL SAMPLED			
18	HANDWASHING FACILITIES			
19	DIAPER CHANGING FACILITIES			
20	FIREARM STORAGE			
21	WATER HAZARDS (POOLS, CANALS...)			
22	SMOKING/ALCOHOL CONSUMPTION			
23	SLEEPING, PLAY, & RESTROOMS CLEAN, PETS ON SITE/SANITATION			

24 COMMENTS:

Follow-up date: ON SITE:	<input type="checkbox"/> ICCP not recommended until corrections made	<input type="checkbox"/> Do not issue License	<input type="checkbox"/> CPSC EDUCATION PROVIDED
VCR DUE BY:	<input type="checkbox"/> ICCP – Passed DATE:	<input type="checkbox"/> Issue License DATE:	

Signatures: _____

Person in Charge
Health Authority

COMMENTS INTERPRETED INTO: SPANISH BOSNIAN OTHER _____

FOR INFORMATION ON VIOLATION DESCRIPTIONS PLEASE VISIT OUR WEBSITE AT

www.phd5.idaho.gov or

<http://healthandwelfare.idaho.gov/Children/DayCareLicensing/tabid/306/Default.aspx>

Printed copies available upon request

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<p>BELLEVUE OFFICE 117 E. Ash St. Bellevue, ID 83313 788-4335 * FAX 788-0098</p>
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<p>GOODING OFFICE 255 North Canyon Dr Gooding, ID 83330 934-4477 * FAX 934-8558</p>
<p>JEROME OFFICE 951 E. Ave. 'H' Jerome, ID 83338 324-8838 * FAX 324-9554</p>
<p>RUPERT OFFICE 1218 9th St., Suite 15 Rupert, ID 83350 436-7185 * FAX 436-9066</p>