

**Inspection of Adult  
 Day Service Facility**

Score: \_\_\_\_\_

Health Department \_\_\_\_\_

Date of Insp/Chg \_\_\_\_\_

Current Facility ID \_\_\_\_\_

Status Code: \_\_\_\_\_

Old Facility ID \_\_\_\_\_

Classification:  Superior  Approved  Provisional  Disapproved

Water Supply: <input checked="" type="checkbox"/> 1 Community	<input checked="" type="checkbox"/> 3 Non-Transient Non-Community	Water sample taken today? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> 2 Transient Non-Community	<input type="checkbox"/> 4 Non-Public Water Supply	<input type="checkbox"/> 1 Inspection
		<input type="checkbox"/> 2 Re-Inspection
Wastewater System: <input checked="" type="checkbox"/> 1 Community	<input checked="" type="checkbox"/> 2 On-Site System	<input checked="" type="checkbox"/> 3 Visit
	Maximum Capacity _____	<input type="checkbox"/> Name Change
		<input type="checkbox"/> Verification of Closure
		<input type="checkbox"/> Status Change

Name of Facility: \_\_\_\_\_ Operator: \_\_\_\_\_

Address (City, Zip Code): \_\_\_\_\_

- FOOD: (.3304, .3305, .3306, .3307, .3308, .3310) Demerits**
- \*1. From approved sources, free from spoilage and adulteration ..... 6 \_\_\_\_\_
  - 2. Potentially hazardous food temperatures ..... 5 \_\_\_\_\_
  - 3. Properly prepared, handled, packaged, and identified ..... 4 \_\_\_\_\_
  - 4. Not re-served ..... 4 \_\_\_\_\_
  - 5. Protected at all times according to these rules ..... 4 \_\_\_\_\_
  - 6. Refrigerators with thermometers, product thermometers provided ..... 3 \_\_\_\_\_

- FOOD SERVICE EQUIPMENT AND UTENSILS: (.3304, .3306, .3307, .3309, .3310, .3311, .3312, .3313, .3314, .3316)**
- \*7. Meets specifications for refrigeration, sinks, and dishwashing equipment according to type of service ..... 6 \_\_\_\_\_
  - 8. Meets requirements for handwash lavatories ..... 5 \_\_\_\_\_
  - 9. Meets specifications for other equipment and utensils, approved material and construction, in good repair ..... 4 \_\_\_\_\_
  - \*10. Food contact surfaces, including multi-use utensils, properly washed, rinsed and sanitized ..... 6 \_\_\_\_\_
  - \*11. Single-service articles not reused ..... 6 \_\_\_\_\_
  - 12. Single-use articles not reused ..... 2 \_\_\_\_\_
  - 13. Non-food contact surfaces clean ..... 4 \_\_\_\_\_
  - 14. Equipment and utensils, including single-service articles, protected from contamination ..... 4 \_\_\_\_\_
  - 15. Approved testing equipment for sanitizers, sanitizing solution provided ..... 3 \_\_\_\_\_

- WATER SUPPLY: DRINKING WATER FACILITIES: (.3315, .3316)**
- \*16. Supply meets 15A NCAC 18A .1700 or 15A NCAC 18C ..... 6 \_\_\_\_\_
  - \*17. Hot water supplied and maintained in accordance with this section. .... 6 \_\_\_\_\_
  - 18. No cross connections, backflow prevention devices provided ..... 4 \_\_\_\_\_
  - 19. Drinking fountains or drinking utensils of approved type, regulated, clean ..... 4 \_\_\_\_\_

- TOILET AND LAVATORY FACILITIES: (.3310, .3317, .3318, .3319)**
- 20. Toilets and lavatories provided, properly located ..... 5 \_\_\_\_\_
  - 21. Fixtures properly sized, cleaned, sanitized, cleaning and sanitizing solutions provided ..... 4 \_\_\_\_\_
  - 22. Potty chairs, bedpans, urinals properly located, cleaned and sanitized ..... 4 \_\_\_\_\_
  - 23. Soap, disposable towels or approved hand-drying device; lavatories free of storage ..... 4 \_\_\_\_\_
  - 24. Approved clothing changing facilities ..... 4 \_\_\_\_\_
  - 25. Clothing change and bathing surfaces cleaned and sanitized after each use; cleaning and sanitizing solutions provided and labeled. .... 4 \_\_\_\_\_
  - 26. Approved clothing changing methods by caregivers ..... 5 \_\_\_\_\_
  - 27. Test kits provided; sanitizer labeled ..... 3 \_\_\_\_\_
  - 28. Clothing changing surfaces clean and free of storage ..... 2 \_\_\_\_\_
  - 29. Handwashing signs posted ..... 2 \_\_\_\_\_

- STORAGE: (.3317, .3320) Demerits**
- \*30. Medications and hazardous products properly stored and locked ..... 6 \_\_\_\_\_
  - 31. Facilities provided for proper storage, kept clean ..... 3 \_\_\_\_\_

- BEDS, LINENS, FURNITURE AND EQUIPMENT: (.3321, .3322)**
- 32. Beds, chairs, cots, or mats clean and in good repair, stored properly ..... 5 \_\_\_\_\_
  - 33. Mattress covers, individual linen provided ..... 5 \_\_\_\_\_
  - 34. Linen clean, in good repair, properly handled and stored ... 4 \_\_\_\_\_
  - 35. Other furniture and equipment easily cleanable, good repair clean ..... 4 \_\_\_\_\_

- PERSONNEL: (.3323)**
- 36. Approved hygienic practices, clean clothes, hair restraints where required ..... 3 \_\_\_\_\_
  - 37. Tobacco not used in food prep areas or areas occupied by non-smokers ..... 5 \_\_\_\_\_
  - \*38. Persons with communicable disease or a communicable condition excluded from situations in which transmission can reasonable be expected to occur, in accordance with 15A NCAC 19A.0200 ..... 6 \_\_\_\_\_
  - \*39. Wounds or lesions properly bandaged ..... 6 \_\_\_\_\_

- FLOORS, WALLS & CEILINGS: (.3324, .3325)**
- 40. Easily cleanable, durable, good repair, clean ..... 4 \_\_\_\_\_

- LIGHTING AND THERMAL ENVIRONMENT: (.3326)**
- 41. Maintained as required ..... 4 \_\_\_\_\_
  - 42. Equipment clean and in good repair ..... 2 \_\_\_\_\_

- COMMUNICABLE DISEASE CONTROL: (.3327)**
- 43. Designated area for sick participants ..... 5 \_\_\_\_\_
  - 44. Treatment room provided for day health facilities ..... 5 \_\_\_\_\_

- HANDWASHING: (.3308, .3319, .3328)**
- 45. Proper handwashing ..... 5 \_\_\_\_\_

- WASTEWATER: (.3329)**
- \*46. Wastewater disposed of by approved methods ..... 6 \_\_\_\_\_

- SOLID WASTES: (.3330)**
- 47. Solid waste properly handled ..... 2 \_\_\_\_\_
  - 48. Can cleaning facilities adequate and containers kept clean. 2 \_\_\_\_\_

- ANIMAL & VERMIN CONTROL: PREMISES; OUTDOOR ACTIVITY AREA: (.3331, .3332)**
- \*49. Approved pesticides, properly used ..... 6 \_\_\_\_\_
  - 50. Effective control of rodents, insects, and other vermin ..... 4 \_\_\_\_\_
  - 51. No animals in food prep areas and no unrestrained animals except as noted ..... 4 \_\_\_\_\_
  - 52. Premises clean, drained, and free of hazards, vermin harborage and breeding areas ..... 4 \_\_\_\_\_

- SWIMMING & WADING POOLS: (.3833)**
- \*53. Designed, constructed, operated and maintained in accordance with 15A NCAC 18A .2500 ..... 6 \_\_\_\_\_

Signed \_\_\_\_\_ AGENT \*Indicates critical item (6-point demerit).

Environmental Health Section

Purpose: General Statute 130A-235 requires the Commission for Health Services to adopt standards governing the sanitation of child day care facilities. G.S. 130A-235 requires the facility to submit evidence to the Division of Facility Services or Division of Aging that it conforms to the standards. This form is to provide such evidence. Preparation: Local environmental health specialists shall complete the form every time an inspection is conducted and prepare an original and two copies to be submitted: 1. Original for Division of Child Development, N.C. Department of Health and Human Services. 2. Facility operator. 3. Local health department. Classification: Superior - 0-15 demerits, no 6-point demerit Approved - 16-30 demerits, no 6-point demerit Provisional - 31-45, or 6-point demerit Disapproved - 46 or more demerits, or failure to improve Provisional classification. Disposition: Please refer to Records Retention and Disposition Schedule 8.B.6., for County/District Health Departments which is published by the North Carolina Division of Archives & History. Additional forms may be ordered from: Environmental Health Section, 1632 Mail Service Center, Raleigh, NC 27699-1632, (Courier 52-01-00)