

Inspection of Residential Care Facilities

Establishment Name: _____

Location Address: _____

City: _____ State: North Carolina Zip: _____

County: _____

Licensee: _____

Telephone: _____

Wastewater System:

- Municipal / Community Onsite

Classification:

- Approved (40 or less demerits, and no 6-demerit item violated) Disapproved (More than 40 demerits or 6-demerit item violated)

Establishment ID: _____

Date: _____ Status Code: _____

Time In: _____ Time Out: _____

- Inspection Re-Inspection

Number of Residents: _____

Water Supply:

- Municipal / Community Onsite

PHYSICAL FACILITIES: (.1607 & .1608)

1.	Floors and carpets kept clean	2	0
	Floors and carpets in good repair	1	0
2.	Walls, ceilings, and attachments clean	2	0
	Walls, ceilings, and attachments in good repair	1	0

LIGHTING AND VENTILATION: (.1609)

3.	Illumination of required spaces	2	0
4.	Ventilation equipment clean and in good repair	2	0

TOILET: HANDWASHING: AND BATHING FACILITIES: (.1610)

5.	Facilities provided	5	0
6.	Facilities clean and in good repair	4	0
7.	Hand sink design	4	0
8.	Handwashing facilities properly equipped	4	0

WATER SUPPLY: (.1611)

9.	Approved water supply (6-demerit item)	6	0
10.	No cross-connections	5	0
11.	Water availability, pressure, at required ranges	4	0

LIQUID WASTES: (.1613)

12.	Approved sewage disposal (6-demerit item)	6	0
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SOLID WASTES: (.1614)

13.	Approved waste storage	2	0
14.	Containers covered, clean, and good repair	2	0
15.	Waste removal frequency	2	0

PEST CONTROL AND OUTDOOR PREMISES: (.1615)

16.	Pest presence	3	0
17.	Prevention of harborage conditions; premises clean	2	0
18.	Outdoor furniture and playgrounds in good repair	2	0

CHEMICAL AND MEDICATION STORAGE: (.1616)

19.	Storage and Use	4	0
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BEDS: LINEN: LAUNDRY: FURNITURE: (.1617)

20.	Furnishings clean	2	0
21.	Furnishings in good repair	2	0
22.	Bed linens provided and in good repair	4	0
23.	Bed linens clean; cleaning frequency	4	0
24.	Clean linen storage	3	0
25.	Laundry area and equipment kept clean and in good repair	3	0

FOOD SERVICE UTENSILS AND EQUIPMENT: (.1618)

26.	Utensils/equipment (except holding equipment) in good repair	3	0
27.	Utensils and equipment clean	4	0
28.	Equipment non-food contact sides clean	2	0
29.	Utensil and equipment storage	2	0
30.	Ware washing provisions	5	0
31.	Food storage areas clean	3	0

FOOD: (.1619)

32.	Foods safe and approved sources	5	0
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FOOD PROTECTION: (.1620)

33.	Food time and temperature control	5	0
34.	Live pet prohibitions	3	0
35.	Food holding equipment provided and in good repair	5	0
36.	Temperature indicating device provided and accurate	2	0
37.	Food storage	4	0

EMPLOYEES: (.1621)

38.	Handwashing method	4	0
39.	Handwashing frequency	4	0
40.	Proper use of restriction, exclusion, and reporting	5	0
41.	Vomitus and diarrheal clean up supplies; written plan available	2	0

Total Demerits: _____

