

A Child Care Facilities Guide to a Successful Inspection

Child care facilities and health departments share a common goal - to provide a healthy environment for children and staff. Achieving that goal is made possible by partnering with your Public Health Investigator to ensure that inspections can be completed as efficiently and effectively as possible.

A few tips:

- Routine health inspections are not scheduled, so they can occur at varying times during your operating hours.
- Being prepared is the best way to have an efficient, effective, and successful inspection.
- If possible, ensure that someone from the facility with access to all areas used for the program is available to walk with the investigator during the inspection process.
- There are several online training courses and guidance documents available for free to help you and your staff gain a better understanding of the child care regulations. Check out the link provided below for more information:
 - https://www.denvergov.org/Government/Agencies-Departments-Offices/Agencies-Departments-Offices-Directory/Public-Health-Environment/Public-Health-Investigations/Healthy-Families-Healthy-Homes/Child-Care

What to expect during the inspection:

Your investigator will be looking at multiple areas and several operational aspects within your facility. Use the below checklist as a self-assessment tool prior to your inspection. The following is not meant to represent a comprehensive list of the inspection, but it does provide an overview of some violations that are commonly found.

Sanitizers & Disinfectants:

harborages

□ Properly labeled with intended use and content ☐ Facility has test strips available for testing, if applicable. If content is premade, no testing is required but the provider must follow expiration date and labeled instructions for use Knowledge of surfaces sanitized vs. disinfected-sanitizer used on food contact surfaces and toys that are moutheddisinfectants used for bodily fluid clean up, etc. ☐ Frequency of cleaning, sanitizing and disinfecting-infant and toddler rooms wash, rinse, sanitize all toys daily preschool rooms weekly or when mouthed □ Correct concentrations for mixed solutions **Outside areas:** ☐ Buildings, playgrounds, and equipment are in good repair ☐ Tarps/covers available for sandboxes Free of animal waste, trash, pest

First Aid Supplies and Medication:

- ☐ Gauze pads, rolled gauze, Band-Aids, adhesive tape, cold pack, plastic bags, disposable gloves, scissors, and hand cleaner for staff are available in first aid kits
- First aid supplies are readily accessible to staff and inaccessible to children
- Medication is labeled, in the original container, stored away from food and chemicals, and inaccessible to children
- The ability to store medications that require refrigeration

Handwashing:

- ☐ Sinks are stocked with soap and single use towels accessible to children
- Sinks are accessible to children П
- Hands are washed at the required times, such as [after wiping noses, after toileting, after coming in from outdoors, etc. see 7.10.3 B&C for full list
- The water temperature is maintained between 90°F to 120°F

Infant/Toddler Rooms: **Kitchens:** Proper diaper changing procedures are Sinks used for washing produce and dishes are indirectly drained followed Food is stored to prevent contamination Bottles of breast milk and formula are (i.e. raw meat should not be stored above labeled with the child's name and date it was received, breast milk shall be ready to eat foods) differentiated by colored labels, or another Food is cooked, cooled, and held at the method approved by the Department required temperatures ☐ The temperature is monitored at 68°F at Proper food handling procedures floor level with a mercury free □ A food thermometer to measure food thermometer temperatures is available, if applicable □ Staff wear smocks **Reporting Illnesses:** ☐ Ensure pacifiers are labeled with child's Disease outbreaks shall immediately be reported to the Department. Reportable **All Rooms:** communicable disease shall be reported ☐ Children's personal belongings are labeled to the Department in the time frame and separated (including water bottles) stipulated by 6 CCR 1009-1, Rules and Regulations Pertaining to Epidemic and ☐ Art supplies are properly stored and Communicable Disease Control. labeled ☐ Maintain illness logs for 2 months tracking ☐ Cleaning supplies and other poisonous children's symptoms items are stored away from food and

Prepare the necessary documentation for review at the time of inspection:

medications and are inaccessible to

The following records should be maintained and made available for review during the inspection:

- □ Radon test results. Results must be available for all rooms that are frequently occupied by staff and children (Does not apply to non-building-based programs such as mobile school age child care programs)
- □ Documentation that all children are either up to date on their immunizations, in-process, or exempt; and maintained on a CDPHE approved or Alternate Certificate of Immunization
- ☐ Written policies for staff and children regarding symptoms of illness that require exclusion from the childcare facility
- □ Current illness log and records from the previous two months showing children's symptoms of illness occurring within the facility
- Records of quarterly bacteriological samples from the previous 12 months (only required for childcare facilities with drinking water supply that does not meet definition of a public water system)

After the inspection:

children

Once the inspection is completed, ensure you review the inspection report and work with any staff to correct the violations noted by your investigator. If there are any questions or uncertainty with the report, reach out to your investigator for clarification and guidance. Immediately contact your investigator if any unexpected delays occur and you need to request additional time to correct a violation. Most importantly, be sure to communicate all corrected violations to your investigator when they are completed.