



**DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIVISION OF ENVIRONMENTAL HEALTH
CHILD CARE FACILITY
INSPECTION REPORT**

REASON		GRADE	Inspection Date:	ESTABLISHMENT NAME:	
Regular	<input checked="" type="checkbox"/>	4	08/22/2018	SANCTUARY SAGAN NA' HOMLO PARA I MANHOBEN	
Follow-Up	<input type="checkbox"/>		Time In/Out:	OWNER/OPERATOR:	
Complaint	<input type="checkbox"/>		01:55PM / 02:45PM	SANCTUARY, INC.	
Investigation	<input type="checkbox"/>	RATING	Sanitary Permit No.:	LOCATION:	Establishment Type:
Other:	<input type="checkbox"/>	A	20000-10002117	MANGILAO	FGDC
			PERMIT STATUS: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Temporary <input type="checkbox"/> Expired		
No. of Children: 4 Male 2 Female 6 Total			Child Care License No.: 17040 <input checked="" type="checkbox"/> Valid <input type="checkbox"/> / Provisional <input type="checkbox"/> / Expired		

The following items identify violations found this day in the operations and facilities which must be corrected by the next inspection or sooner as the Department indicates. Non-compliance may result in downgrading or permit suspension. To appeal a written request for hearing must be submitted before the indicated correction date.

ITEM*	REMARKS	DEMERIT	CORRECT BY
	A REGULAR INSPECTION WAS CONDUCTED TODAY. PREVIOUS INSPECTION DATED 05/01/2018 RESULTED IN A GRADE/RATING OF 8/A. PREVIOUS VIOLATIONS ITEM # 3, 17, AND 31 WERE CORRECTED. THE FOLLOWING WERE OBSERVED TODAY:		
17.	WALLS AND CEILINGS OF BATHROOM OF ROOM 3 FOUND WITH CO ² BUILD UP OF MOLD DUE TO CONDENSATION. WALLS AND CEILINGS SHALL BE KEPT CLEAN TO MAINTAIN THE FACILITY'S SANITARY CONDITION.	2	09/22/2018
31.	TWO OUTLET WALL PLATE COVERS IN LIVING ROOM AREA FOUND IN DISREPAIR DUE TO NEW CRACKS. AS PER PERSON-IN-CHARGE (PIC), COVERS WERE REPLACED AND WORK ORDER WAS PUT IN. ALL FACILITIES AND EQUIPMENT SHALL BE KEPT NEAT AND IN A GOOD STATE OF REPAIR TO PREVENT PHYSICAL INJURIES OR HAZARDS. PHOTOS TAKEN. PLACARD "A" NO. 02726 POSTED. DISCUSSED THIS REPORT WITH LIONEL CHARGUALAF, RESIDENTIAL ASSISTANT.	2	09/22/2018

I have read and understand the above violation(s) and I am aware of the corrective measures to be taken.

*Note: When any of the following items are cited above, they shall be corrected within 10 days of this inspection:
(2), (4), (6), (14), (21), (23), (24), (27), (28), (39) & (40).

Received By (Name & Title): Residential Assistant
Lionel Chargualaf
DEH Inspector (Name & Title):
V. RAYMUNDO, EPHO I 3009570