

CHILD CARE FACILITY INSPECTION REPORT FOR TENNESSEE DEPARTMENT OF HUMAN SERVICES DEPARTMENT OF HEALTH

	LISHMENT anding #2				DATE 03/05/2024	RECOMMENDATION	
LOCAT	TION	STAFF		1	EST. NO.	Approval	
224 McClain Ava				631226613			
		Paige Bass					
CITY, STATE, ZIP Lebanon TN 37087 Routine					FOLLOW- UP () YES REQUIRED () NO		
				_			
	WATER SUPPLY, ICE			5-5-1	BEDDING, FU	RNITURE	
4 1.	Source, adequate		-	23.	Adequate		
2.	Drinking facilities, approved types, cl	ean, good repair,	-	24.	Clean, good repai	г	
- ***	adjusted		_	25.	Bed spacing		
	SEWAGE DISPOSAL / PLUM	BING			LIGHTING		
* 3.	Operating properly			26.	Adequate		
* 4.	Cross connection			27.	Fixtures, shades, l	blinds clean, good repair	
* 5.	Visible sewage leaks				HEATING, VE	INTILATION	
	SOLID WASTE			28.	Adequate tempera	iture	
6.	Containers adequate, clean			29.	Noxious odors eli	minated	
7.	Storage area, grounds clean			30.	Heating and ventilation units clean, good repair		
8.	Collection, disposal				INSECT, ROD	ENT CONTROL	
	TOILETS, HANDWASHING, A	AND BATHING		31.	Infestation		
9.	Fixtures adequate	W12-13-11-12-11-11-11-11-11-11-11-11-11-11-11-		32.	Harborage, contro		
10.	Fixtures clean, good repair			33.	Adequate drainage	c	
11.	Hygienic practices, adult supervision		4 9		SAFETY		
12.	Soap, individual towels			34.	Toxic items (inclu	ding medicines) stored and labeled	
13.	Toilet tissue provided on holder			2.4.	properly		
14.	Water temperature (90°F-120° F)			35.	used	s locations shielded unless safety glass	
15.	Covered container(s)		*	36.	The state of the s	n building or on playgrounds	
	BUILDING		. L	37.	Contract of the Contract of th	of hazards likely to cause falls	
16.	Visible cracks, sealed openings		1 _	38.	Furniture safe		
17.	Exterior clean, painted		1	39.		uired, bathtubs have safety strips or non-	
18.	Gutters, down spouts, clean good repa			***	slip mats	2000	
* 19,	Materials, asbestos control meets Star	dard		997		water pipes, other heated objects	
	FLOORS			40.	protected. No visi	ible electrical hazards. Electrical outlets	
20.	Clean, good repair			Opposite the same of the same		unds free of unprotected, abandoned well	
	WALLS AND CEILINGS		18.5	41.		or, or similar hazards	
21.	Clean, good repair			42.	THE RESERVE AND ADDRESS OF THE PARTY OF THE	g provided on grounds as necessary	
	DOORS AND WINDOWS			43.	Play equipment sa		
22.	Clean, good repair				ANIMAL CON		
	Identifies critical items			44.	Cages clean	NAME OF THE OWNER OWNER OF THE OWNER OWNE	
	Not required for programs serving chi	ldren five (5) years of		45.	Pets controlled, no	turtles	

Critical items shall be corrected within a time frame not to exceed thirty (30) days. Approval indicates no critical item violations of the Department of Human Services standards. Disapproval indicates critical item violations were not corrected as required. Pending indicates disapproval pending correction of critical items.

Signature of Person in Charge 03/05/2024

age and above in school-age care programs.

Date of Signature

By 11:08 AM

__EHS

Time in/out

11:24 AM

CHILDCARE FACILITY INSPECTION REPORT TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH



Establishment Information
Establishment Name: Tot's Landing #2
Establishment Number: 631226613
Observed Violations
Total # 0
***See page at the end of this document for any violations that could not be displayed in this space.
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Additional Comments

^{***}See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Establishment Name: Tot's Landing #2 Establishment Number: 631226613								
W. W								
bserved Violations (cont'd)								
dditional Comments (cont'd)								
urce Type: Water	Source: City							

Establishment Information