



Dear Child Care Facility Designer/Engineer/Builder:

Any new or remodeled child care facilities will need to submit plans to Adams County Health Department (ACHD) for review and approval **prior** to construction and/or opening.

The plan review process is designed to occur prior to building/remodeling and thereby prevent the need for costly and time consuming modifications/additions after the facility is built in order to meet the [Rules and Regulations Governing the Health And Sanitation in Child Care Facilities](#). The lack of a plan review may result in ACHD withholding approval to open the facility until requirements are met. ACHD's approval is required for the facility to be licensed by the Colorado Department of Early Childhood (CDEC).

To make the process as efficient as possible, please adhere to the following procedures:

1. Read and fill out the enclosed form completely. Your plans will not be reviewed until the procedures listed here are all met.
2. Plans must be submitted electronically to: ehchildcare@adcogov.org
3. A plan review application fee of **\$120.00** will be invoiced once plans are received by ACHD.
4. Invoices will be sent via email to your preferred email and instructions on how to pay the invoice will be provided with the emailed invoice. Invoices must be paid before the plan review will be conducted.
5. You will be notified within 14-30 business days after your plans are reviewed and approved or if more information is needed.

Additionally, if the facility will also have newly constructed or remodeled retail food service establishments (restaurants, grocery) and/or public or semi-public swimming pools, spas, and spray pads, then separate plan reviews for those areas are also required by ACHD. If the building department knows of any of the above facilities that will be opening or are to be remodeled, it is recommended and requested that the certificate of occupancy not be issued until ACHD approves the facility.

If you have any questions regarding your plan submittal or want to make any changes/modifications after your submittal, please contact ehchildcare@adcogov.org.

Thank you for your cooperation.

Sincerely,

The Child Care Plan Review Team



Plan Review Form	
Facility Information	
Name of Facility:	Contact:
Street Address:	Phone:
City:	Cell:
State/ Zip:	Fax:
CDHS License # (if known):	Email:
Number of Children:	
Infants:	Toddlers:
Preschool and older:	Total:
License Type:	
<input type="radio"/> Child Care Center <input type="radio"/> School-Age <input type="radio"/> Resident Camp <input type="radio"/> 24-hour Facility (Specify):	
Business/Ownership Information (If Different)	
Individual or Corporate Name:	Phone:
Street Address:	Cell:
City:	Fax:
State/Zip:	Email:
Contact Information (If Different)	
Additional Contact:	Phone:
Street Address:	Cell:
City:	Fax:
State/Zip:	Email:
Building Information	
New Construction or Remodel*:	Original year constructed*:
Construction start date:	Planned opening date:
If remodel, provide a brief explanation of what work is being done:	

*Prior to beginning any renovation or demolition, all requirements pursuant to 5 CCR 101-10, Colorado Air Quality Control Commission, Regulation Number 8 Part B, including inspection for asbestos containing materials by a Colorado certified asbestos building inspector and notification must be met. Renovation activities that disturb painted surfaces in buildings built before 1978 must be conducted pursuant to the U.S. Environmental Protection Agency Lead Renovation, Repair and Painting Program regulations unless a lead-based determination by a certified inspector or risk assessor shows that the surface does not contain lead-based paint.

Days and Hours of Operation												
Days	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday					
Hours												
Circle all months of operation												
All Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec



A. Radon Testing

All facilities are required to test for radon. New facilities are required to test for radon within 6 months of occupancy. After remodeling, radon tests may need to be conducted again. It is recommended that facilities test for radon every 5 years.

Has the facility been tested for radon? Yes* No

*If yes, provide a copy of the testing results.

B. Water Supply (Select One)

<input type="checkbox"/>	Municipal	
<input type="checkbox"/>	Public Community Well/Spring	Public Water System ID Number:
<input type="checkbox"/>	Private Well/ Spring	No Public Water System ID Number:

C. Sewage Disposal (Select One)

<input type="checkbox"/>	Municipal Sewer	
<input type="checkbox"/>	Septic/ Onsite Wastewater System	Indicate location on site plan and attach a copy of the permits for the systems that will service the facility.

D. External Plan Submissions

Question	Yes	No	Date Submitted
Have plans been submitted to the local building department?			
Have plans for this facility been submitted to the Colorado Department of Human Services?			

Do you have similar facilities in other counties in Colorado? Yes No
 If yes, list other counties: _____

*What plumbing code will be utilized to construct the facility?



E. Facility Site Plan – Submit a site plan that includes the location of all outdoor areas that apply to this apply. Check all that apply:

Animal Enclosures*		Outdoor refrigerators or freezers		Swimming pools
Gardens		Outdoor storage areas		Trash/recycling/compost storage
Grease Interceptor		Play areas		Well or spring
Hot Tubs		Septic tank and leach field		Wading pools

* Include the types of animals.

F. General facility floor plan/layout – Submit floor plans drawn to scale that include all areas of the building. For classrooms, include the number of children anticipated and age range. Include the location of all areas listed below that apply to the facility. Please note, a separate drawing will be requested for the kitchen. Check all that apply.

Plumbing and other fixtures		Designated areas	
	Bottle preparation sinks		Car seat storage
	Chemical dispensing units		Chemical storage areas
	Drinking fountains ³		Children’s personal belonging storage
	Garbage disposals		Diaper changing areas ¹
	Hand washing sinks – label child and adult		Employee personal belonging storage
	Laundry facilities		First aid supply storage
	Showers/bathtubs		Meals/snacks/bottle preparation areas
	Toilet facilities		Ill/injured child areas
	Utility/mop sinks		Mat/cot storage ²
	Ventilation fans		Medication storage
	Water heater locations		Staff break areas
	Art/Science Sink (for washing paints brushes, cleaning science materials)		Lactation room/prioritized or designated ⁴

¹Diaper changing areas must be adjacent to a hand sink and have adequate storage area for children’s diapers, other supplies, and disinfecting solutions.

²Mats, cots, clean linens, clothing and toys may not be stored in bathrooms. Drinking fountains are prohibited on designated restroom hand sinks, art, and science sinks.

³The Colorado Workplace Accommodations for Nursing Mothers Act establishes a recommended standard for an employer to: (1) Provide reasonable unpaid break time, or allow an employee to use paid break and/or meal time, to express breast milk for her nursing child for up to 2 years after the child’s birth; (2) Make reasonable efforts to provide a nursing mother with a private location in close proximity to her work area (other than a toilet stall) in which to express milk; and (3) Not discriminate against women for expressing milk in the workplace.



G. Finishes & Operation Procedures

1. Carpet must not be installed in the following areas:

- **Kitchens**
- **Restrooms**
- **Under or around sinks**
- **Under or around diapering areas**
- **Laundry rooms**
- **Utility rooms**
- **Mechanical rooms**

- Non-carpeted areas must be tightly covered with approved concave coving at the floor to wall junctures.
- Hand contact and splash areas of doors, walls, cabinets, and shelves must be smooth, non-absorbent, and easily cleanable.

Initial	Statement
	I confirm that the finishes in the proposed facility meet all requirements listed above.

2. Lighting requirements must be as follows:

- 30-foot candles upon play surfaces
- 20-foot candles provided in restrooms
- 10-foot candles provided in hallways and stairways

Initial	Statement
	I confirm that the light fixtures in the proposed facility meet all requirements listed above.

3. Handwashing facilities for toileting/ diapering must meet the following criteria:

- Must be in or immediately adjacent to diaper changing areas and toilet rooms.
- Must be accessible without barriers.
- Must be at an appropriate height for children served or are provided with a stable platform that is easily cleanable.
- Must be provided with soap, approved drying devices (i.e: paper towels, clean individual use cloth towels or mechanical air-drying device) and provided with cold and hot running water that is always between 90-120°F during operation.
- Are designated for hand washing only.

Initial	Statement
	I confirm that the handwashing facilities in the proposed facility meet all requirements listed above.



4. Ill/ injured child area must meet the following criteria:

- Always allows for staff supervision.
- Allows for at least 3 feet of separation from all other children.
- Is adequately heated and ventilated.
- Is supplied with a bed, cot or mat and a sheet and blanket available.
- Allows for access to the toilet and lavatory facilities without interruption by other children and staff activities.

Initial	Statement
	I confirm that the ill/injured child area in the proposed facility meet all requirements listed above.

5. Drinking water must be always accessible to children.

- If drinking fountains are not available, how will drinking water be provided to children during hours of operation?

6. Will linens & soft toys be washed at the facility?

Yes

No

- If no, describe where and how they will be washed:

7. Separate identified storage areas shall be provided for each child's personal effects, clothing, and bed linens. How will this be provided?

- Examples: individual cubicles, lockers, coat hooks, drawers, or closet space



Annex 1: Kitchen and Food Handling Procedures

1. Check all that apply to the food service operation:

<input type="checkbox"/>	No meals/ snacks provided
<input type="checkbox"/>	Only parents provide meals/ snacks for their own child
<input type="checkbox"/>	Only commercially pre-packaged, no refrigeration needed items
<input type="checkbox"/>	Only commercially pre-packaged items but some refrigeration required (i.e: yogurt, cheese sticks, etc.)
<input type="checkbox"/>	Meals/snacks are catered from a licensed food establishment
<input type="checkbox"/>	Food is made in one location and delivered to another location for service ²
<input type="checkbox"/>	Kitchen is also used to prepare food for people other than the children and staff at the child care facility or enrolled in the early childhood program ²
<input type="checkbox"/>	Fresh fruits and/or vegetables will be served
<input type="checkbox"/>	Food is prepared and served same day by the facility (takes less than 4 hours)
<input type="checkbox"/>	Food is prepared and served same day by the facility (takes more than 4 hours) ¹
<input type="checkbox"/>	Leftovers are cooled down and saved for another meal or snack ¹
<input type="checkbox"/>	Meals are served family style or through a buffet line
<input type="checkbox"/>	Raw meats will be cooked
<input type="checkbox"/>	Raw shell eggs will be cooked

¹ If food that requires refrigeration is prepared 4 hours or more in advance or if leftovers are saved for another meal or snack, then commercial (restaurant grade) refrigeration is required.

² Some activities also require a retail food establishment license. Example: School kitchens that serve to all school children.

2. Submit a separate drawing for the kitchen/food handling area. Check all that apply.

<input type="checkbox"/>	Cooking equipment*	<input type="checkbox"/>	Food preparation sinks	<input type="checkbox"/>	Lighting
<input type="checkbox"/>	Dishwasher*	<input type="checkbox"/>	Grease interceptor/grease trap	<input type="checkbox"/>	Recycle/damaged/returned goods
<input type="checkbox"/>	Dishwashing sinks	<input type="checkbox"/>	Hand washing sinks	<input type="checkbox"/>	Refrigerators/freezers*
<input type="checkbox"/>	Dry food storage areas	<input type="checkbox"/>	Hot holding equipment*	<input type="checkbox"/>	Ventilation hoods*
<input type="checkbox"/>	Floor sinks/floor drains	<input type="checkbox"/>	Ice bins/Ice machines	<input type="checkbox"/>	Staff personal item, food storage, and eating areas



* Include specification sheets

3. Select the meals/ snacks that are served. Please attach sample menu if completed.

Breakfast: AM Snack: Lunch: PM Snack: Dinner:

4. Food/beverages will be primarily served on:

Multi-use tableware: Disposable tableware: Both:

5. If applicable, describe where infant bottles and/or parent provided child food containers will be prepared, washed, rinsed, and sanitized?

Annex 2: Hot Water Demand Calculations & Plumbing

Step 1: Use the following equations to help calculate the hot water Gallon Per Hour (GPH) use if a 2 or 3 compartment sink is installed:

Calculating 2-compartment sink GPH: Measure one sink compartment basin in inches:

Basin length: _____" Basin width: _____" Basin depth: _____"

$$\frac{\text{Length} * \text{Width} * \text{Depth} * 0.375 * 2}{231 \text{in}^3 / \text{gal}} = \text{_____ GPH}$$

Calculating 3-compartment sink GPH: Measure one sink compartment basin in inches:

Basin length: _____" Basin width: _____" Basin depth: _____"

$$\frac{\text{Length} * \text{Width} * \text{Depth} * 0.375 * 3}{231 \text{in}^3 / \text{gal}} = \text{_____ GPH}$$

Note: 0.375 allows the compartments to be used less than full capacity



Step 2: Provide the number of plumbing fixtures requiring hot water in the table below. The Gallons per hour (GPH) of each fixture can be calculated using the equations above or the manufacturer’s specification may need to be used.

Plumbing Fixture Requiring Hot Water	Water Usage (GPH) per fixture	X	Number of Fixtures	=	Total GPH use of fixtures
Hand sinks (include kitchens, restrooms & classrooms)	3.5 GPH				
Mop sinks/ utility sinks	5 GPH				
Showers	14 GPH				
Clothes Washer (9-12 lbs)	32 GPH				
Clothes Washer (16+ lbs)	42 GPH				
Dish machine					
2- Compartment Sink					
3- Compartment Sink					
Other:					
Other:					
Other:					
Total hot water demand (GPH) by all fixtures:					

Step 3: Calculate the minimum BTU or Kilowatt rating needed for the hot water heater using one of the following equations:

1. For gas water heaters (BTU):

$$\frac{(\text{Total GPH for all fixtures calculated above}) \times (100) \times (8.33) \times (1.2)}{\text{Manufacturers thermal efficiency or } 0.75} = \text{minimum BTU rating}$$

Minimum BTU rating needed = _____

2. For electric water heaters (kW's):

$$\frac{(\text{Total GPH by all fixtures, calculated above}) \times (100) \times 8.33}{3412} = \text{minimum Kilowatt rating}$$

Minimum kW rating needed = _____

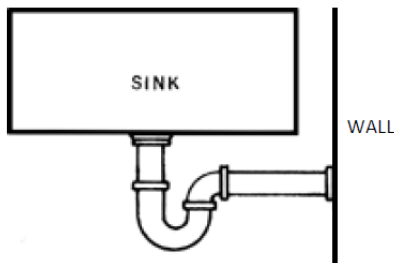


Step 4: List the make, model and total BTU or Kilowatt rating of the of the hot water heaters to be installed.

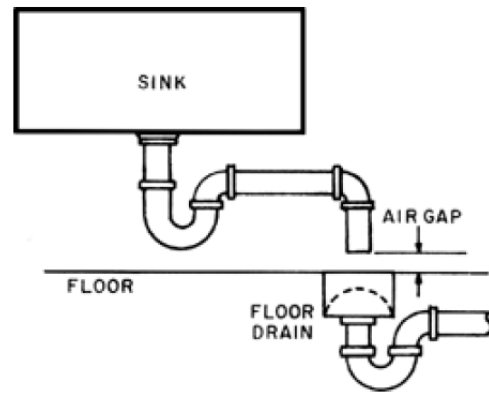
Hot Water Heater		
Make	Model #	kW/ BTU Rating

Indirect or Direct Plumbing

Direct vs. Indirect Draining

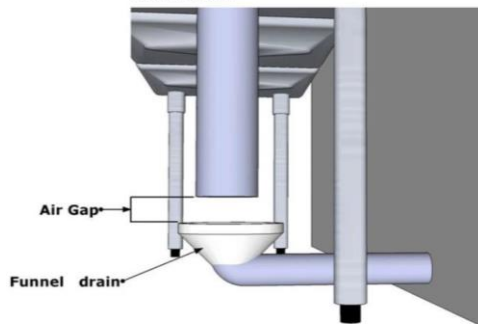


Direct waste lines connect continuously from the sink basin or fixture to the sanitary sewer.



In-direct waste lines do not connect continuously to the sanitary sewer. This is achieved through an air break or an air gap as pictured above.

Side view of an indirect connection using a funnel drain





The following fixtures are required to be indirectly drained:

1. Dishwashing sinks
2. Dish machines
3. Food preparation sinks and
4. Ice machines

Initial	Statement
	I confirm that dishwashing sinks, dish machines, food preparation sinks, and ice machines are indirectly drained to the sewer.

Now that you have completed this packet, please use this checklist to verify that you are including all required information. Lack of complete information will delay review and plan approval.

Required Documents to Submit			
	Completed Plan Review Packet		Kitchen Plan
	Facility Site Plan		Specification sheets for kitchen equipment
	Facility Floor Plan		Specification sheets for hot water heaters
	Interior Finishes Plan/List		Example Menu (if applicable)
	Radon Test Results (if available)		Other: