

YMCA at Shaw

123 North 13th Street
Phoenix, AZ

4 Inspection Visits Since 2024 - 5 Findings

Most recent inspection: May 11, 2026

● 5 Important

Across 4 inspections since 2024, the issues cited most often were The Following Deficiencies Were Observed During the Annual Compliance Inspection Conducted on 05/11/2026 and Are Subject to Change Pending Programmatic review. A Full Inspection Was conducted.

A Paper Copy of the Notice of Inspection Rights Was Provided at the Time of the inspection.

Please Submit the Plan of Corrections via the LMS Portal Within 10 Days of Receipt of the Statement of Deficiencies.

The Emergency Disaster Contact Form Was Provided at the Time of the Inspection. Please Com (3), The Following Deficiencies Were Observed at the Time of the Initial Monitoring Inspection Conducted on 11/14/2024 and Are Subject to Change Pending Programmatic review.

A Full Inspection Was Not Conducted at This time.

Please Submit the Plan of Corrections via the LMS Portal Within 10 Days of Receipt of the Statement of Deficiencies.

The Fingerprint Clearance Cards for 3 of 3 Staff Members Were Verified to Be Valid Through the DP S Website at the Time of the inspection.

During the E (1), and There Were No Deficiencies at the Time of the Modification Inspection Conducted on 11/14/2024 but Is Subject to Changes Pending Programmatic Review.

A Full Inspection Was Not Conducted at This Time.

During the Exit Interview, the Following Items Were Discussed but Not Limited To: Flooring in Classroom.

The Compliance Officer Is Patti Longman (1). None of the 5 findings were critical.

Inspection Visits

May 11, 2026 1 Finding ● 1 Important

About this report

Childery generates this report from public inspection records published by the Arizona Department of Health Services, Bureau of Child Care Licensing. Childery did not conduct these inspections or produce the original state reports. Childery is an independent directory and is not affiliated with the Arizona Department of Health Services, Bureau of Child Care Licensing.

- **The Following Deficiencies Were Observed During the Annual Compliance Inspection Conducted on 05/11/2026 and Are Subject to Change Pending Programmatic review.**

A Full Inspection Was conducted.

A Paper Copy of the Notice of Inspection Rights Was Provided at the Time of the inspection.

Please Submit the Plan of Corrections via the LMS Portal Within 10 Days of Receipt of the Statement of Deficiencies.

The Emergency Disaster Contact Form Was Provided at the Time of the Inspection. Please Com
Compliance (Annual)

Aug 7, 2025 1 Finding ● 1 Important

- **The Following Deficiencies Were Observed at the Time of the Compliance Inspection Conducted on 8/7/2025 and Are Subject to Changes Pending Programmatic Review. A Paper Copy of the Notice of Inspection Rights Was Provided at the Time of the inspection.**

Please Submit the Plan of Corrections via the LMS Portal Within 10 Days of Receipt of the Statement of Deficiencies.

The Emergency Disaster Contact Form Was Left on the Site. Please Complete and Return It to the Compliance Officer.

The DES
Compliance (Annual)

Nov 14, 2024 2 Findings ● 2 Important

- **The Following Deficiencies Were Observed at the Time of the Initial Monitoring Inspection Conducted on 11/14/2024 and Are Subject to Change Pending Programmatic review.**

A Full Inspection Was Not Conducted at This time.

Please Submit the Plan of Corrections via the LMS Portal Within 10 Days of Receipt of the Statement of Deficiencies.

The Fingerprint Clearance Cards for 3 of 3 Staff Members Were Verified to Be Valid Through the DP S Website at the Time of the inspection.

During the E
Initial Monitoring

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- **There Were No Deficiencies at the Time of the Modification Inspection Conducted on 11/14/2024 but Is Subject to Changes Pending Programmatic Review.**

A Full Inspection Was Not Conducted at This Time.

During the Exit Interview, the Following Items Were Discussed but Not Limited To: Flooring in Classroom.

The Compliance Officer Is Patti Longman

Modification

Aug 16, 2024 1 Finding ● 1 Important

- **The Following Deficiencies Were Observed at the Time of the Initial Compliance Inspection Conducted on 8/16/2024 and Are Subject to Changes Pending Programmatic review.**

Please Submit the Plan of Corrections via the LMS Portal Within 10 Days of Receipt of the Statement of Deficiencies.

The Fingerprint Clearance Cards for 2 of 2 Staff Members Were Verified to Be Valid Through the DPS Website at the Time of the inspection.

During the Exit Interview, the Following Items Were Discussed but A

Compliance (Initial)

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