

Primrose Of West Gilbert

1545 North Parkway Drive
Gilbert, AZ

7 Inspection Visits Since 2023 - 7 Findings

Most recent inspection: Apr 17, 2026

● 7 Important

Across 7 inspections since 2023, the issues cited most often were The Following Deficiencies Were Observed at the Time of the Compliance Inspection Conducted on 02/02/2026 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 Emergency Disaster Contact Form Was Completed at the Time of the inspection.

The Empower Self-Evaluation Was Emailed at the Time of the inspection.

The DES Contact Form Was Completed at the Time of the Ins (3), **Amended*

The Purpose of the Inspection Was to Conduct Complaint # 00096358 Investigation on 01/29/2025. The Complaint Was a Facility Self-report Complaint.

A Full Inspection Was Not Conducted at This time.

Compliance Officer #1: Monika Jones

Compliance Officer #2: Celeste Angulo

Ratios Observed were:

Infants: 2:7

Infants: 2:7

1-year-old Children: 2:12

1-year-old Children: 2:12

2-year-old Children: 2:16

2-year-old Children: 2:19

2-year-old Children: 1:8

3-year-old Children: (3), and The Following Deficiencies Were Observed at the Time of the Monitoring Inspection Conducted on 04.17.26 and Are Subject to Changes Pending Programmatic Review. A Full Inspection Was Not conducted.

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

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.

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

The Fingerprint Clearance Cards for 3 of 3 Staff Members Were Verified to Be Valid Through (1). None of the 7 findings were critical.

Inspection Visits

Apr 17, 2026 1 Finding ● 1 Important

- **The Following Deficiencies Were Observed at the Time of the Monitoring Inspection Conducted on 04.17.26 and Are Subject to Changes Pending Programmatic Review. A Full Inspection Was Not conducted.**

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

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

The Fingerprint Clearance Cards for 3 of 3 Staff Members Were Verified to Be Valid Through
Monitoring

Feb 2, 2026 1 Finding ● 1 Important

- **The Following Deficiencies Were Observed at the Time of the Compliance Inspection Conducted on 02/02/2026 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 Emergency Disaster Contact Form Was Completed at the Time of the inspection.

The Empower Self-Evaluation Was Emailed at the Time of the inspection.

The DES Contact Form Was Completed at the Time of the Ins
Compliance (Annual)

Feb 4, 2025 1 Finding ● 1 Important

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- **The Following Deficiencies Were Observed at the Time of the Compliance Inspection Conducted on 02/04/2025 and Are Subject to Changes Pending Programmatic review.**

The Plan of Corrections Will Not Be Accepted at This Time.

The Empower Self-Evaluation Was Emailed at the Time of the inspection.

The Fingerprint Clearance Cards for 12 of 12 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 Dis

Compliance (Annual)

Jan 29, 2025 1 Finding ● 1 Important

- ****Amended***

The Purpose of the Inspection Was to Conduct Complaint # 00096358 Investigation on 01/29/2025. The Complaint Was a Facility Self-report Complaint.

A Full Inspection Was Not Conducted at This time.

Compliance Officer #1: Monika Jones

Compliance Officer #2: Celeste Angulo

Ratios Observed were:

Infants: 2:7

Infants: 2:7

1-year-old Children: 2:12

1-year-old Children: 2:12

2-year-old Children: 2:16

2-year-old Children: 2:19

2-year-old Children: 1:8

3-year-old Children:

Complaint

Dec 2, 2024 1 Finding ● 1 Important

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- **The Purpose of the Inspection Was to Conduct Complaint #92283 Investigation on 12/02/2024. A Full Inspection Was Not Conducted at This Time.**

Compliance Officer #1 Monika Jones
Compliance Officer #2 Pat Morgan-Martinez

Ratios Observed were:

Infants: 1:4

Infants: 2:7

1-year-old Children: 2:15

1-year-old Children: 2:12

1-year-old Children: 2:12

2-year-old Children: 3:15

2-year-old Children: 3:14

3-year-old Children: 1:8

3-year-old Children: 2:17

3-year-old Children: 3:11

4-year-old

Complaint

Feb 12, 2024 1 Finding ● 1 Important

- **The Following Deficiencies Were Observed at the Time of the Compliance Inspection Conducted on 02/12/2024, 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 Emergency Disaster Contact Form Was Completed at the Time of the inspection.

The Empower Self-Evaluation Was Completed at the Time of the inspection.

The DES Contact Form Was Completed at the Time of The

Compliance (Annual)

Jun 12, 2023 1 Finding ● 1 Important

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- **The Following Deficiencies Were Observed at the Time of Complaint #0058798 investigation Conducted on 6/12/23 and Are Subject to Changes Pending Programmatic review.**

A Telephone Call Was Made to the Complainant on 6/12/23

Compliance Officer # 1: Brian Howell

Compliance Officer # 2: Archana Navin

The Written Document of Corrections Is Due Within 10 days

A Complete Inspection of the Facility Was Not conducted.

The Following Classroom Ratios Were observed:

Infants: 2:5

Infants: 2

Complaint

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