

Camelback Desert School

9606 East Kalil Drive
Scottsdale, AZ

5 Inspection Visits Since 2023 - 5 Findings

Most recent inspection: Feb 25, 2026

● 5 Important

Across 5 inspections since 2023, the issues cited most often were The Following Deficiencies Were Observed at the Time of the Compliance Inspection Conducted on 2/25/2026 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 Compliance Officer Provided the Facility with a Paper Copy of the Notice of Inspection Rights at the Start of the inspection.

BCCL Staff Emailed the Empower Self-Evaluation Link to the provider.

The Finger (3), The Purpose of the Investigation Was to Conduct a Complaint #00136726 and #00136621 Investigation on 08-27-2025.

The Compliance Officer Provided the Facility with a Paper Copy of the Notice of Inspection Rights at the Start of the Inspection.

A Full Inspection Was Not Conducted at This time.

The Ratios Observed were:

Art Room (2s)- 2:12

Room 7 (3s)- 2:9

Room 9 (3s)- 2:8

Room 10 (4s)- 2:11

Room 11 (4s)- 2:14

Room 14 (3s)- 2:12

Room 15 (3s)- 2:16

Room 16 (2s)- 2:11

Room 17 (1s)- (1), and No Deficiencies Were Observed at the Time of the Modification Inspection Conducted on 9/8/2023.

A Full Inspection Was Not Conducted at This time.

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 Compliance Officer Is Sherri Pavlisick. (1). None of the 5 findings were critical.

Inspection Visits

Feb 25, 2026 1 Finding ● 1 Important

- **The Following Deficiencies Were Observed at the Time of the Compliance Inspection Conducted on 2/25/2026 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 Compliance Officer Provided the Facility with a Paper Copy of the Notice of Inspection Rights at the Start of the inspection.

BCCL Staff Emailed the Empower Self-Evaluation Link to the provider.

The Finger

Compliance (Annual)

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Aug 27, 2025 1 Finding ● 1 Important

- **The Purpose of the Investigation Was to Conduct a Complaint #00136726 and #00136621 Investigation on 08-27-2025.**

The Compliance Officer Provided the Facility with a Paper Copy of the Notice of Inspection Rights at the Start of the Inspection.

A Full Inspection Was Not Conducted at This time.

The Ratios Observed were:

Art Room (2s)- 2:12

Room 7 (3s)- 2:9

Room 9 (3s)- 2:8

Room 10 (4s)- 2:11

Room 11 (4s)- 2:14

Room 14 (3s)- 2:12

Room 15 (3s)- 2:16

Room 16 (2s)- 2:11

Room 17 (1s)-

Complaint

Mar 5, 2025 1 Finding ● 1 Important

- **The Following Deficiencies Were Observed at the Time of the Compliance Inspection Conducted on 3/5/2025 and Are Subject to Changes Pending Programmatic Review.**

The Plan of Corrections Is Not Being Accepted at This time.

The Compliance Officer Provided the Facility with a Paper Copy of the Notice of Inspection Rights at the Start of the inspection.

The Emergency Disaster Contact Form Was Completed at the Time of the inspection.

The Fingerprint Clearance Cards for 7 of 7 Staff Members

Compliance (Annual)

Mar 7, 2024 1 Finding ● 1 Important

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- **The Following Deficiencies Were Observed at the Time of the Compliance Inspection Conducted on 03/072024 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 Group Size Was in Compliance at the Time
Compliance (Annual)

Sep 8, 2023 1 Finding ● 1 Important

- **No Deficiencies Were Observed at the Time of the Modification Inspection Conducted on 9/8/2023.**

A Full Inspection Was Not Conducted at This time.

The Compliance Officer Is Sherri Pavlisick.
Modification

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