

Annual IPM inspection Review Form

Inspection Date: _____

1. School name, district and location:

2. Audit Participants:

3. School site details (names, phone numbers and/or e-mails):

Principal	
Age of school	
Area of interior and exterior	
Number of students	
Director of Operations	
IPM Coordinator	

Building Manager			
Grounds Supervisor			
Number of custodians			
Contractual custodians			
Kitchen manager			
On-site food preparation	Yes	No	
School nurse			
Pest Management company			
Waste Management company			
Reported pests			
Observed pests			
Use of rodent bait	Correct	Incorrect	N/A
Use of insect baits	Correct	Incorrect	N/A
Use of sticky monitoring traps	Yes	No	
Use of pest-sighting log	Yes	No	
Annual training for staff and faculty provided	Yes	No	
Any student IPM education	Yes	No	
Record keeping	Yes	No	
Description of sanitation standards			
Environmental management committee	Yes	No	
School IPM newsletter	Yes	No	
Other comments			

Building Exterior



Item	Location	<u>Condition</u>	<u>Sanitation</u>	Pests	Follow-up
		Good	Good		
		Fair	Fair		
		Poor	Poor		
Windows screens					
Trees, shrubbery					
Exterior lighting					
Dumpster(s)					
Turf					
Conduits					
Trash cans					
Covered areas					
Cold seams					
Food areas, tables					
Eaves, walls					
Fence lines					

Other questions:

Gaps between window or screen and frame?

Dumpsters located away from building, closed, and relatively clean?

Trees overhanging buildings?

Shrubs shoulder-width from buildings?

Water damage on eaves or walls?

Spider webbing?

Water pooling?

Kitchen: Room # _____



Item	Location	<u>Condition</u>	<u>Sanitation</u>	Pests	Follow-up
		Good	Good		
		Fair	Fair		
		Poor	Poor		
Pantry					
Under counters & appliances					
Trash cans					
Stored food bins					
Dishwashing area					
Floor drains & sinks					

Cookware storage area					
Garbage disposals					
Ceiling tiles					
Backdoor & exterior cafeteria					
Counter tops					
Pantry shelving					
Floor					
Non-slip mats					
Clean cleaning tools					

Other questions:

Pest activity behind bulletin boards?

Pests on window sills?

How close is the dumpster to the back door?

Efficiency of air-curtains on doors?

Intact external door seals?

Floor drains have metal baskets?

Are floor corner clean?

Are floors steam cleaned or power washed periodically?

Pest monitoring log available?



Kitchen storage specifics

Questions:

Adequet shelving?

Shelving base open and lowest shelf at least 12 inches from the ground?

Boxes against walls or in corners?

Wooden or cardboard covered pallets being used?

Food dated and rotated so oldest orders are constantly consumed first?

Custodian’s closet: Room # _____

Item	Location	Condition	Sanitation	Pests	Follow-up
		Good	Good		
		Fair	Fair		
		Poor	Poor		
Mops, buckets, & brooms clean?					
Cleaning supplies					
Sink					
Pesticides?					
Clutter?					
Racks for brooms and mops?					

Shelving adequate?					
Cardboard boxes used as storage containers?					

Classrooms: Name/room # _____



Item	Location	<u>Condition</u>	<u>Sanitation</u>	Pests	Follow-up
		Good	Good		
		Fair	Fair		
		Poor	Poor		
Inside cupboards					
Under sinks					
Under, inside & behind furniture					
Overhead lights					
Teacher's cupboards					
Drains					
Corners					
Lost and found					

Class pets and supplies					
Recycle containers					
Air-fresheners and candles					
Clutter					
Access to chemicals?					
OTC Pesticides?					
Pest accessible food?					

Teacher's lounge: Room # _____

Item	Location	<u>Condition</u>	<u>Sanitation</u>	Pests	Follow-up
		Good	Good		
		Fair	Fair		
		Poor	Poor		
Under furniture & cushions					
Sinks					

Under & behind vending machines					
Overhead lights					
Cupboards					
Microwave (inside and underneath)					
Oven (inside and underneath)					
Refrigerator (inside and underneath)					
Counters					
Pesticides?					

Other questions:

Pests behind bulletin boards, in furniture, on window sills?

Are floor to wall junctures and corners clean?

Is a pest monitoring log available?

IPM newsletters available?

Any water marks on ceiling tiles?

Nurse's office: Room # _____

Item	Location	<u>Condition</u>	<u>Sanitation</u>	Pests	Follow-up
		Good	Good		
		Fair	Fair		
		Poor	Poor		
Under furniture & cushions					
Examination beds					
Medicine cabinet					
Overhead lights					
Cupboards					
Pesticides?					
Sinks					
Refrigerator					
Counters					
Floor drains					

Hallways, main office: Name/room # _____

Item	Location	<u>Condition</u>	<u>Sanitation</u>	Pests	Follow-up
		Good	Good		
		Fair	Fair		
		Poor	Poor		
Corners					
Overhead lighting					
Under & behind furniture					
Exterior doors					
General sanitation					
Ventilation					
Windows					
Ceiling tiles					
Bulletin boards					

