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## Behavioral Health Facilities Report



This report is published by the ADHS Division of Licensing Services. For assistance, contact BEHAVIORAL HEALTH at Phone (602) 364-2595; Fax (602) 364-4801.

[Provider Type Info](#)



**Name:** SOUTHWESTERN CHILDREN'S HEALTH SERVICES, INC  
**Address:** 2190 NORTH GRACE BLVD  
 CHANDLER, AZ 85225  
**Phone:** (480) 917-9301  
**Fax:** (480) 917-0503  
**Facility ID:** BH1816  
**Licensee:** YOUTH AND FAMILY CENTERED SERVICES INC./DEVELOPME  
**License:** BH-1816  
**Provider Type:** LEVEL 1 RTC/OUTPATIENT CLINIC

The table below displays the Survey dates for all Inspections for the above provider. The Survey dates are all inspections in the last three years from today's date.

	Survey Date
<a href="#">Select</a>	10/31/2008
<a href="#">Select</a>	12/16/2008
<a href="#">Select</a>	9/29/2009
<a href="#">Select</a>	9/29/2009
<a href="#">Select</a>	2/23/2010
<a href="#">Select</a>	9/14/2010
<a href="#">Select</a>	11/8/2010
<a href="#">Select</a>	11/17/2010

### No Enforcement Actions for this Provider.

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