



# Department of Public Health and Human Services

2401 Colonial Drive, PO Box 202953 ♦ Helena, MT 59601 ♦ (406) 444-2012 ♦ Fax: (406) 444-1742

www.dphhs.mt.gov

## SURVEY TOOL

### Facility

Name: *Abigail Waller / Little Acorns*

Provider ID: *PV99226*

Address: *536 Avenue F, Billings, MT 59102*

Type: *Group Child Care*

Service Area: *Harve*

Assigned Worker: *Pamela West*

Director: *Christopher Waller*

Phone: *(406) 839-2994*

Email: .

Contact: .

Phone: .

Email: .

### Inspection

Type: *KIS*

Date: *09/18/2018*

Time In: *2:15 PM* Time Out: *2:55 PM*

Inspector: *Pam West*

Phone: *406-262-9790*

### Children/Caregiver Observations

Time: *2:15 PM*

# children: *4*

# under 2: *2*

# caregivers: *1*

Time: *2:40 PM*

# children: *5*

# under 2: *2*

# caregivers: *1*

Time:

# children:

# under 2:

# caregivers:

### Caregivers

*Emma*

### Staff Changes

### Notes

### Deficiency Notice (Additional Text)

*Business cards have been mailed to you to be posted near your daycare registration. Please make sure this information remains uncovered at all times.*

### Staff Ratios

1. License

Yes

2. Overlap

Yes

### Building/Fire Requirements

3. Inside Facility

Yes

## Building/Fire Requirements *(continued)*

4. Fire Safety Yes

5. Equipment Yes

6. Exiting **No**

*37.95.705.5.:All rooms used for napping by children must have at least two means of escape, at least one of which shall be a door or a stairway providing a means of unobstructed travel to the outside of the building at street or ground level to the public way. The second means of escape may be a window which meets the egress requirements of (2).*

Deficiency

***The intent of this rule was not met:***

*Based on observation, CCL found that the egress window in the nap room was not unobstructed.*

***This plan of correction was accepted on October 22, 2018.***

## Outdoor Tour

7. Play Area Yes

## Health Issues

14. Health Prevention **No**

*37.95.183.2.:A first aid kit must be kept on site at all times and must at a minimum contain:*

Deficiency

***The intent of this rule was not met:***

*Based on review of first aid kit, CCL found that the kit did not contain the following items: tweezers.*

***This plan of correction was accepted on October 22, 2018.***

## Medication

16. Storage Yes

## Infants/Toddlers

17. Diapering Yes

20. Sleeping Yes

## Written Records

28. Parent Information	<b>No</b>
<p>37.95.115.2.:Day care facility shall post a copy of the facility registration or license and the phone number of state and local quality assurance division offices in a conspicuous place. Parents should be encouraged to contact the division if they have questions regarding the license or the day care regulations.</p>	
<p><u>Deficiency</u></p>	
<p><b>The intent of this rule was not met:</b></p>	
<p>Based on observation, CCL found that phone number of the state and local quality assurance division was not posted in a conspicuous place.</p>	
<p><b>This plan of correction was accepted on October 22, 2018.</b></p>	
29. Facility Records	<b>No</b>
<p>37.95.141.2.:The facility shall have a master list of the name, address, and phone number of all children in their care and their parents.</p>	
<p><u>Deficiency</u></p>	
<p><b>The intent of this rule was not met:</b></p>	
<p>Based on review of facility records, CCL found that the provider did not have a master list that included child names and addresses.</p>	
<p><b>This plan of correction was accepted on October 22, 2018.</b></p>	
30. Child File Review	Yes
32. Caregiver File Review	Yes
33. First Aid Requirements	Yes