



Department of Public Health and Human Services

Child Care Licensing-QAD ♦ PO Box 202953 ♦ Helena, MT 59620-2953 ♦ phone: 444-2012 ♦ fax: 444-1742

SURVEY TOOL

Facility

Name: *Maren Griswold/Story Book Daycare*

Provider ID: *PV95711*

Address: *231 South 23rd, Bozeman, MT 59718*

Type: *Group Child Care*

Service Area: *Bozeman*

Assigned Worker: *Kirsten Geiger*

Director: *Maren Alice Griswold*

Phone: *(406) 219-3923*

Email: *storybookdaycare@gmail.com*

Contact: *Maren*

Phone: *219-3923*

Email: *storybookdaycare@gmail.com*

Inspection

Type: *KIS*

Date: *04/10/2019*

Time In: *11:15 AM* **Time Out:** *12:25 PM*

Inspector: *Kirsten Geiger*

Phone: *406-522-2271*

Children/Caregiver Observations

Time: *11:36 AM*

children: *14*

under 2: *2*

caregivers: *3*

Time: *12:19 PM*

children: *13*

under 2: *2*

caregivers: *3*

Time: *12:23 PM*

children: *12*

under 2: *1*

caregivers: *3*

Staff Ratios

1. License

Yes

2. Overlap

Yes

Building/Fire Requirements

3. Inside Facility

Yes

4. Fire Safety

Yes

5. Equipment

Yes

6. Exiting

Yes

Outdoor Tour

7. Play Area

Yes

Health Issues

14. Health Prevention Yes

Medication

16. Storage Yes

Infants/Toddlers

17. Diapering Yes

20. Sleeping Yes

Written Records

28. Parent Information Yes

29. Facility Records **No**

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.

Deficiency

The intent of this rule was not met:

Based on review of facility records, CCL found that the provider's master list did not contain addresses.

The Plan of Correction was accepted on April 16, 2019.

30. Child File Review Yes

32. Caregiver File Review Yes

33. First Aid Requirements Yes