



# Department of Public Health and Human Services

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www.dphhs.mt.gov

## SURVEY TOOL

### Facility

Name: *Ashlynn Breana Schaub/ 406 Daycare*

Provider ID: *PV108098*

Address: *915 13th St, Havre, MT 59501*

Type: *Family Child Care*

Service Area: *Harve*

Assigned Worker: *Pamela West*

Director: *Ashlynn Breana Schaub*

Phone: *(406) 945-1087*

Email: .

Contact: .

Phone: .

Email: .

### Inspection

Type: *Pre-inspection*

Date: *10/19/2018*

Time In: *10:00 AM* Time Out: *12:45 PM*

Inspector: *Pam West*

Phone: *406-262-9790*

### Children/Caregiver Observations

Time: *11:45 AM*

# children: *0*

# under 2: *0*

# caregivers: *1*

Time:

# children:

# under 2:

# caregivers:

Time:

# children:

# under 2:

# caregivers:

### Caregivers

*Ashlynn*

### Staff Changes

### Notes

### Deficiency Notice (Additional Text)

*At this time window egress is not adequate in the basement or the bedroom located upstairs. Due to this, the basement cannot be used for play or sleep until there is appropriate egress. The room upstairs may not be used for napping children. The window size requirement is 5.7 square feet of opening.*

### Building/Fire Requirements

3. Inside Facility

Yes

## Building/Fire Requirements (continued)

### 4. Fire Safety

No

*37.95.706.3.:All day care facilities must have operating UL smoke detecting devices on each floor of the facility, installed in accordance with the manufacturer's specifications. Smoke detectors must be installed in front of the doors to stairways and in corridor of all floors occupied by the day care. Smoke detectors must be installed in any room in which children sleep. If individual battery-operated smoke detectors are used, the following maintenance is required:*

#### Deficiency

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

*Based on observation and interview, CCL found that a smoke detector was not installed in the living room which is used to nap children.*

***This plan of correction was accepted on October 31, 2018.***

### 5. Equipment

Yes

### 6. Exiting

No

*37.95.705.9.:Every bathroom door must be designed to permit the opening of the locked door from the outside in an emergency and the opening device must be readily accessible to the provider.*

#### Deficiency

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

*Based on interview, CCL found that the opening device was not readily accessible to the provider.*

***This plan of correction was accepted on October 31, 2018.***

## Outdoor Tour

### 7. Play Area

No

*37.95.121.6.:Any outdoor play area must be maintained free from hazards such as wells, machinery and animal waste. If any part of the play area is adjacent to a busy roadway, drainage or irrigation ditch, stream, large holes, or other hazardous areas, the play area must be enclosed with a fence in good repair that is at least 4 feet high without any holes or spaces greater than 4 inches in diameter or natural barriers to restrict children from these areas.*

#### Deficiency

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

*Based on observation, CCL found that the outdoor area was not designed so that all parts are visible and easily supervised by staff.*

***This plan of correction was accepted on October 31, 2018.***

## 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: phone number for the Montana Poison Control Center.

**This plan of correction was accepted on October 31, 2018.**

## Medication

### 16. Storage

**No**

37.95.182.3.:All medications, refrigerated or unrefrigerated, shall:

Deficiency

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

Based on observation, CCL found that the medication was not stored in a location that was inaccessible to children as it was stored in an unlocked location.

**This plan of correction was accepted on October 31, 2018.**

## Infants/Toddlers

### 17. Diapering

Yes

### 20. Sleeping

Yes

## Written Records

### 28. Parent Information

Yes

### 29. Facility Records

**No**

37.95.1005.11.:Providers must develop a written policy that describes the practices to be used to promote a safe sleep environment when children under age two are napping or sleeping.

Deficiency

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

Based on interview, CCL found the provider did not have a written policy describing practices used to promote a safe sleep environment available at the time of inspection.

**This plan of correction was accepted on October 31, 2018.**

**Written Records (continued)****31. Medication File**

Yes

**33. First Aid Requirements****No**

*37.95.183.1.:Each provider shall adopt and follow written policies for first aid consistent with recommendations from the American Red Cross. These policies must include but are not limited to:*

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

*Based on interview, CCL found that the provider did not have written policies for first aid consistent with recommendations from the American Red Cross that includes the following information: directions for calling parents or someone parents or someone else designated as responsible for the child when a child is sick or injured or procedures for handling medical emergencies, including calling the Montana Poison Control center.*

***This plan of correction was accepted on October 31, 2018.***