

Department of Public Health and Human Services

FAMILY and GROUP DAY CARE FACILITIES (includes infant regulations) SURVEY TOOL

INSPECTION INFORMATION

Facility: Billie Jo Stebbins / Home Sweet	J: Billie Jo Stebbins / Home Sweet Home					
Type: Renewal Inspection	Date:05/23/2017	Time: 09:30 AM				
Director: Billie Jo Stebbins						
Contact:						
Licensing Worker: Sharla Jerrel		Phone #: (406) 234-4581				

Time:	09:30 AM	# children:	<u>7</u> # under 2:	<u>2</u> # caregivers:	2
Time:		# children:	# under 2:	# caregivers:	
Time:		# children:	# under 2:	# caregivers:	

	STAFF RATIOS			
Yes	1. License			
Yes	2. Overlap			
	BUILDING/FIRE REQUIREMENTS			
Yes	3. Inside Facility			
Yes	4. Fire Safety			
Yes	5. Equipment			
Yes	6. Exiting			
	OUTDOOR TOUR			
Yes	7. Play Area			
Not Observed	8. Swimming			
	PROGRAM ISSUES			
Yes	9. Supervision			
Yes	10. Provider Responsibilities			
Yes	11. Activities			
N/A	12. Night Care			
	HEALTH ISSUES			
Yes	13. Illness Exclusion			
Yes	14. Health Prevention			
	MEDICATION			
N/A	15. Administration			
N/A	16. Storage			
	INFANTS/TODDLERS			
Yes	17. Diapering			
Not Observed	18. Feeding			
Not Observed	19. Bathing			
Yes	20. Sleeping			
Yes	21. Activities			
Yes	22. Outdoor Activities			
	NUTRITION/FOOD ISSUES			
Not Observed	23. Sanitation			
Not Observed	24. Meal Frequency			

NUTRITION/FOOD ISSUES

Not Observed 25. Special Diet

TRANSPORTATION

Yes	26. Basic Requirements					
Yes	27. Child Passenger Safety					
	WRITTEN RECORDS					
Yes	28. Parent Information					
Yes	29. Facility Records					
Νο	 30. Child File Review 37.95.139(1) (1) The parent(s) of each child admitted to the day care facility shall provide the name of the physician or health care facility the parent wishes to have called in case of an emergency. The intent of this rule was not met: Based on record review, CCL found that the parents of 2 children did not provide the name of the physician or health care facility. See enclosed copy of children's record review. The plan of correction was accepted on 5/24/2017. 					
N/A	31. Medication File					
Yes	32. Caregiver File Review					
Yes	33. First Aid Requirements					
	ADMINISTRATIVE RECORDS					
Yes	34. License-Certificate					
Yes	35. Facility Requirements					
Not Observed	36. Registration/License Process					