



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: *Carla LaFurge*

Provider ID: *PV76137*

Address: *1448 West Ln, Billings, MT 59101*

Type: *Family Child Care*

Service Area: *Billings*

Assigned Worker: *Holly Carr*

Director: *Carla LaFurge*

Phone: *(406) 655-0324*

Email: *carla.lafurge@gmail.com*

Contact: *Carla*

Phone: *406-655-0324*

Email: *carla.lafurge@gmail.com*

Inspection

Type: *Renewal Inspection*

Date: *08/31/2018*

Time In: *11:00 AM* Time Out: *11:40 AM*

Inspector: *Holly Carr*

Phone: *406-655-7633*

Children/Caregiver Observations

Time: *11:36 AM*

children: *6*

under 2: *2*

caregivers: *2*

Time:

children:

under 2:

caregivers:

Time:

children:

under 2:

caregivers:

Caregivers

Carla

Staff Changes

Notes

Deficiency Notice (Additional Text)

Staff Ratios

1. License

Yes

2. Overlap

Not Observed

Building/Fire Requirements

3. Inside Facility

Yes

4. Fire Safety

Yes

Building/Fire Requirements *(continued)*

5. Equipment	Yes
6. Exiting	Yes

Outdoor Tour

7. Play Area	Yes
8. Swimming	N/A

Program Issues

9. Supervision	No
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37.95.702.4.: *There shall be sufficient staff so that an adult is always present and supervising all children.*

Deficiency

The intent of this rule was not met:

Based on observation, CCL found that caregivers did not supervise children at all times. When CCL arrived, 4 children were playing outside without supervision. Two infants were inside, while the caregiver was inside cleaning the bathroom.

10. Provider Responsibilities	Yes
11. Activities	Yes
12. Night Care	N/A

Health Issues

13. Illness Exclusion	Yes
14. Health Prevention	Yes

Medication

15. Administration	N/A
16. Storage	N/A

Infants/Toddlers

17. Diapering	Yes
18. Feeding	Yes
19. Bathing	Yes

Infants/Toddlers (continued)

20. Sleeping	Yes
21. Activities	Yes
22. Outdoor Activities	Yes

Nutrition/Food Issues

23. Sanitation	Yes
24. Meal Frequency	Yes
25. Special Diet	N/A

Transportation

26. Basic Requirements	N/A
27. Child Passenger Safety	N/A

Written Records

28. Parent Information	Yes
29. Facility Records	Yes
30. Child File Review	Yes
31. Medication File	N/A
32. Caregiver File Review	Yes
33. First Aid Requirements	Yes

Administrative Records

34. License-Certificate	Yes
35. Facility Requirements	Yes
36. Registration/License Process	Yes