



# Department of Public Health and Human Services

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

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### INSPECTION INFORMATION

**Facility:** Dawn Ikener / Lil' Cupcakes Childcare

**Type:** Renewal Inspection      **Date:** 04/11/2017      **Time:** 03:45 PM

**Director:** Dawn Ikener

**Contact:** \_\_\_\_\_

**Licensing Worker:** Diana Lamers      **Phone #:** (406) 751-5962

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**Time:** 03:45 PM # **children:** 4 # **under 2:** 1 # **caregivers:** 1  
**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
N/A	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**

Yes	15. Administration
Yes	16. Storage

**INFANTS/TODDLERS**

Yes	17. Diapering
Not Observed	18. Feeding
Yes	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**

N/A 26. Basic Requirements

N/A 27. Child Passenger Safety

**WRITTEN RECORDS**

Not Observed 28. Parent Information

Yes 29. Facility Records

Not Observed 30. Child File Review

Not Observed 31. Medication File

Yes 32. Caregiver File Review

Yes 33. First Aid Requirements

**ADMINISTRATIVE RECORDS**

Yes 34. License-Certificate

N/A 35. Facility Requirements

Yes 36. Registration/License Process