



# 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: *DePew & Troy / Stepping Stones Childcare*

Provider ID: *PV107872*

Address: *405 S 13th St, Livingston, MT 59047*

Type: *Group Child Care*

Service Area: *Bozeman*

Assigned Worker: *Kirsten Geiger*

Director: *Kristin Troy / Alisa DePew*

Phone: *(406) 224-5333*

Email: *steppingstone406@gmail.com*

Contact: *Alisa/Kristin*

Phone: *(406)599-5752*

Email: *steppingstone406@gmail.com*

### Inspection

Type: *Initial-New Inspection*

Date: *07/25/2018*

Time In: *11:00 AM* Time Out: *12:30 PM*

Inspector: *Kirsten Geiger*

Phone: *406-522-2271*

### Children/Caregiver Observations

Time: *11:21 AM*

# children: *6*

# under 2: *2*

# caregivers: *2*

Time:

# children:

# under 2:

# caregivers:

Time:

# children:

# under 2:

# caregivers:

### Caregivers

*Alisa, Kalene*

### Staff Changes

### Notes

### Deficiency Notice (Additional Text)

*As a reminder, please check with the Helena licensing office about new staff member's paperwork. If employee paperwork has not yet been sent in, this must be completed immediately.*

*In addition, it is highly recommended that parents/guardians are notified within the handbook or by a posted notice, that the facility utilizes essential oils. This is important especially in a case where an individual (adult or child) has a sensitivity to the usage of oils.*

### Staff Ratios

1. License

Yes

## Building/Fire Requirements *(continued)*

2. Overlap	N/A
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## Building/Fire Requirements

3. Inside Facility	<b>No</b>
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37.95.127.4.:Bathtubs, buckets and other water receptacles shall be emptied immediately after use.

Deficiency

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

Based on observation, CCL found that the water table was not immediately emptied after use.

The Plan of Correction was accepted on August 20, 2018.

4. Fire Safety	Yes
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5. Equipment	Yes
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6. Exiting	Yes
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## Outdoor Tour

7. Play Area	Yes
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8. Swimming	N/A
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## Program Issues

9. Supervision	Yes
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10. Provider Responsibilities	Yes
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11. Activities	Yes
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12. Night Care	N/A
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## Health Issues

13. Illness Exclusion	Yes
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14. Health Prevention	Yes
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## Medication

15. Administration	Yes
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## Medication (*continued*)

### 16. Storage

No

37.95.182.2.:Any nonprescription medication brought into the facility for use by a specific child shall be labeled with the following information:

Deficiency

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

Based on observation, CCL found that non-prescription medication was not labeled with the following information: the child's first and last name. CCL found that the medication belonged to a caregiver's child, however, this requirement must still be met.

The Plan of Correction was accepted on August 20, 2018.

## Infants/Toddlers

### 17. Diapering

Yes

### 18. Feeding

Yes

### 19. Bathing

N/A

### 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

Yes

### 27. Child Passenger Safety

Yes

## Written Records

### 28. Parent Information

Yes

## Written Records *(continued)*

### 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 interview, CCL found that the provider did not have a master list.*

*The Plan of Correction was accepted on August 20, 2018.*

### 30. Child File Review No

37.95.140.1.: *Before a child under the age of five may attend a Montana day care facility, that facility must be provided with the documentation required by (4) that the child has been immunized as required for the child's age group against measles, rubella, mumps, poliomyelitis, diphtheria, pertussis (whooping cough), tetanus, and Haemophilus influenza type B, unless the child qualifies for conditional attendance in accordance with (9):*

Deficiency

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

*Based on record review, CCL found that there were 2 children that did not have immunizations on file. In addition, one child's file requires proof of immunization updates. See enclosed copy of children's record review.*

*The Plan of Correction was accepted on August 20, 2018.*

### 31. Medication File Yes

### 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