



Department of Public Health and Human Services

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

INSPECTION INFORMATION

Facility: Elaine Hundley / Peace Place Respite Car

Type: Renewal Inspection **Date:** 01/05/2018 **Time:** 10:30 AM

Director: Elaine Hundley / First Presbyterian Church

Contact: _____

Licensing Worker: Jodi Linne **Phone #:** (406) 453-0526

Time: 10:30 AM **# children:** 2 **# under 2:** 1 **# caregivers:** 1

Time: **# children:** **# under 2:** **# caregivers:**

Time: **# children:** **# under 2:** **# caregivers:**

STAFF RATIOS

Yes	1. License
Not Observed	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
Not Observed	12. Night Care

HEALTH ISSUES

Yes	13. Illness Exclusion
No	<p>14. Health Prevention</p> <p>37.95.183(2)(a-g)</p> <p>(2) A first aid kit must be kept on site at all times and must at a minimum contain :</p> <ul style="list-style-type: none"> (a) Unexpired syrup of ipecac (one ounce bottle) which may be administered only upon directive from the Emergency Montana Poison Control Center or upon directive of the local emergency service program (i.e., 911 operator, local hospital, or physician); (b) Sterile, absorbent bandages; (c) A cold pack; (d) Tape and a variety of band-aids; (e) Tweezers and scissors; (f) The toll free number for the Emergency Montana Poison Control Center, 1(800) 222-1222; (g) Disposable single use gloves. <p>The intent of this rule was not met:</p> <p>Based on review of first aid kit, CCL found that the kit did not contain the following items: a cold pack; tweezers and scissors; phone number for the Montana Poison Control Center.</p> <p>Plan of Correction accepted 1/31/18.</p>

MEDICATION

Yes	15. Administration
Yes	16. Storage

INFANTS/TODDLERS

Yes	17. Diapering
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Yes	18. Feeding
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Not Observed	19. Bathing
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Yes	20. Sleeping
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Yes	21. Activities
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Yes	22. Outdoor Activities
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NUTRITION/FOOD ISSUES

Yes	23. Sanitation
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Yes	24. Meal Frequency
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Yes	25. Special Diet
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TRANSPORTATION

Yes	26. Basic Requirements
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Not Observed	27. Child Passenger Safety
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WRITTEN RECORDS

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

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