



# Department of Public Health and Human Services

## CHILD DAY CARE FACILITIES (includes infant regulations) SURVEY TOOL

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### INSPECTION INFORMATION

**Facility:** Footsteps

**Type:** Key Indicator Survey      **Date:** 06/21/2018      **Time:** 11:25 AM

**Director:** Angela Buckley

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

**Licensing Worker:** Kirsten Geiger      **Phone #:** (406) 522-2271

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**Time:** 11:30 AM # **children:** 30 # **under 2:** 0 # **caregivers:** 3

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

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

**STAFF RATIOS**

Yes 1. License

**BUILDING/FIRE REQUIREMENTS**

Yes 2. Inside Facility

Yes 3. Equipment

**OUTDOOR TOUR**

Yes 6. Play Area

**INFANTS/TODDLERS**

N/A 19. Sleeping

**WRITTEN RECORDS**

Yes 25. Parent Information

Yes 26. Facility Records

Yes 27. Child File Review

Yes 29. Caregiver File Review