

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: Hands/Chief Joseph School Provider ID: PV75618

Address: 5305 3rd Ave S, Great Falls, MT 59405

Type: Child Care Center Service Area: Great Falls Assigned Worker: Jodi Linne

Director: $Kim\ Yarlott$ Phone: $(406)\ 268-6930$ Email: $kim_yarlott@gfps.k12.mt.us$ Contact: Kim Phone: 406-268-6930 Email: $kim_yarlott@gfps.k12.mt.us$

Inspection

Type: KIS Date: 09/19/2018 Time In: 4:20 PM Time Out: 5:00 PM

Inspector: Jodi Linne Phone: 406-453-0526

Children/Caregiver Observations

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

Caregivers

Christine D and Nancy Crestoni (new hire as of 9/1/2018)

Staff Changes

Notes

Deficiency Notice (Additional Text)

Staff Ratios

1. License Yes

Building/Fire Requirements

2. Inside Facility Yes

3. Equipment Yes

09/19/2018 1 of 2

Outdoor Tour

6. Play Area Yes

Written Records

25. Parent Information Yes

26. Facility Records Yes

27. Child File Review No

37.95.140.5.: Before a child between the ages of five and 12 may attend a day care facility providing care to school aged children, that facility must be provided with documentation required by (5) 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 Haemophiles 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 3 children that did not have immunizations on file. See enclosed copy of children's record review.

Plan of Correction accepted 9/24/18.

29. Caregiver File Review

Yes

09/19/2018 2 of 2