



# Department of Public Health and Human Services

Child Care Licensing-QAD ♦ PO Box 202953 ♦ Helena, MT 59620-2953 ♦ phone: 444-2012 ♦ fax: 444-1742

## SURVEY TOOL

### Facility

**Name:** Hands/Lincoln Elementary School

**Provider ID:** PV75613

**Address:** 625 27th Street South, 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:** 268-6930

**Email:** kim\_yarlott@gfps.k12.mt.us

### Inspection

**Type:** KIS

**Date:** 03/05/2019

**Time In:** 3:50 PM **Time Out:** 4:30 PM

**Inspector:** Jodi Linne

**Phone:** 406-453-0526

### Children/Caregiver Observations

**Time:** 3:50 PM

**# children:** 42

**# under 2:** 0

**# caregivers:** 4

**Time:** 4:13 AM

**# children:** 33

**# under 2:** 0

**# caregivers:** 4

**Time:**

**# children:**

**# under 2:**

**# caregivers:**

### Staff Ratios

1. License

Yes

### Building/Fire Requirements

2. Inside Facility

Yes

3. Equipment

Yes

### Outdoor Tour

6. Play Area

Yes

### Written Records

25. Parent Information

Yes

26. Facility Records

Yes

27. Child File Review

Yes

Written Records *(continued)*

29. Caregiver File Review	Yes
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