



Department of Public Health and Human Services

CHILD DAY CARE FACILITIES (includes infant regulations) SURVEY TOOL

INSPECTION INFORMATION

Facility: Hands/Lincoln Elementary School

Type: Renewal Inspection **Date:** 03/06/2018 **Time:** 04:10 PM

Director: Kim Yarlott

Contact:

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

Time: 04:10 PM **# children:** 33 **# 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 |
|-----|--------------------|

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|-----|--------------|
| Yes | 3. Equipment |
|-----|--------------|

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|-----|------------|
| Yes | 4. Exiting |
|-----|------------|

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|-----|----------|
| Yes | 5. Space |
|-----|----------|

OUTDOOR TOUR

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|-----|--------------|
| Yes | 6. Play Area |
|-----|--------------|

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|--------------|-------------|
| Not Observed | 7. Swimming |
|--------------|-------------|

PROGRAM ISSUES

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|-----|----------------|
| Yes | 8. Supervision |
|-----|----------------|

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|-----|------------------------------|
| Yes | 9. Provider Responsibilities |
|-----|------------------------------|

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|-----|----------------|
| Yes | 10. Activities |
|-----|----------------|

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|--------------|----------------|
| Not Observed | 11. Night Care |
|--------------|----------------|

HEALTH ISSUES

| | |
|-----|-----------------------|
| Yes | 12. Illness Exclusion |
|-----|-----------------------|

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|-----|-----------------------|
| Yes | 13. Health Prevention |
|-----|-----------------------|

MEDICATION

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|-----|--------------------|
| Yes | 14. Administration |
|-----|--------------------|

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|-----|-------------|
| Yes | 15. Storage |
|-----|-------------|

INFANTS/TODDLERS

| | |
|-----|---------------|
| N/A | 16. Diapering |
|-----|---------------|

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|-----|-------------|
| N/A | 17. Feeding |
|-----|-------------|

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|-----|-------------|
| N/A | 18. Bathing |
|-----|-------------|

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|-----|--------------|
| N/A | 19. Sleeping |
|-----|--------------|

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|-----|----------------|
| N/A | 20. Activities |
|-----|----------------|

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|-----|------------------------|
| N/A | 21. Outdoor Activities |
|-----|------------------------|

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|-----|--------------------------|
| N/A | 22. Special Requirements |
|-----|--------------------------|

TRANSPORTATION

| | |
|-----|------------------------|
| Yes | 23. Basic Requirements |
|-----|------------------------|

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|--------------|----------------------------|
| Not Observed | 24. Child Passenger Safety |
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WRITTEN RECORDS

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|-----|--|
| No | <p>25. Parent Information</p> <p>37.95.150(1) (1) Each day care facility must post its license in plain view where it is readily viewable by parents dropping off or picking up children. The intent of this rule was not met:</p> <p>Based on review of facility records, CCL found that the certificate was not posed in plain view.</p> <p>Plan of Correction accepted on 3/27/18.</p> |
| Yes | 26. Facility Records |
| Yes | 27. Child File Review |
| Yes | 28. Medication File |
| No | <p>29. Caregiver File Review</p> <p>37.95.622(6)(a-c) (6) An aide must be directly supervised by a primary care-giver and shall be at least 16 years of age and must: (a) Have sufficient language skills to communicate with children and adults; (b) Have at least one day of one the job orientation; and (c) Receive a minimum of at least eight hours of verified education or training annually as provided in ARM 37.95.162. The intent of this rule was not met:</p> <p>Based on observation and interview, CCL found that three aides were present; however, a primary care-giver was not present to directly supervise the aides.</p> <p>Plan of Correction accepted on 3/27/18.</p> |
| Yes | 30. First Aid Requirements |

ADMINISTRATIVE RECORDS

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|-----|----------------------------------|
| Yes | 31. License-Certificate |
| Yes | 32. Facility Requirements |
| Yes | 33. Registration/License Process |