



DEPARTMENT OF
PUBLIC HEALTH AND HUMAN SERVICES
QUALITY ASSURANCE DIVISION - LICENSURE BUREAU - CHILD CARE LICENSING

STATE OF MONTANA

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

INSPECTION INFORMATION

Facility: Jennifer Johannesen

Type: 20% Inspection Date: 05/07/2009 Time: 11:30 AM

Director: Jennifer A Johannesen

Contact: _____

Licensing Worker: Pam West Phone #: (406) 262-9790

Time: 11:30 AM # children: 6 # infants: 2 # caregivers: 2
Time: 01:20 PM # children: 5 # infants: 2 # caregivers: 2
Time: _____ # children: _____ # infants: _____ # caregivers: _____

STAFF RATIOS

<p>No</p>	<p>1. License</p> <p>37.95.106(6) (6) A day care facility may not provide care for more than the number of children permitted at any one time by its day care license or registration certificate. The intent of this rule was not met:</p> <p>Based on observation, this worker found that there were 2 infants in care. This provider is registered as a family daycare and is not registered to provide care to any infants with the exception of her own children. One of the two infants that were present were was her foster daughter.</p> <p>37.95.702(4) (4) Except for approved overlap care, the provider may not provide care for a child if caring for that child would cause the provider to exceed the number of children the provider is registered to care for on the registration certificate. The intent of this rule was not met:</p> <p>Based on observation CCL found that there were 8 children in care. Provider is registered as a family facility with 2 overlap children. Provider failed to mention the 8th child in care, which was an infant. This infant's presence was determined when provider brought the child out of a nap room near the end of the inspection visit. Additionally, it was not the period of approved overlap during the time provider had 8 children in care.</p>
<p>Yes</p>	<p>2. Overlap</p>

BUILDING/FIRE REQUIREMENTS

<p>No</p>	<p>3. Inside Facility</p> <p>37.95.708(3) (3) Telephone numbers of the parents, the hospital, police department, fire department, ambulance, and the emergency Montana poison control center (1 (800) 222-1222) must be posted by each telephone. The intent of this rule was not met:</p> <p>Based on observation and interview, CCL found that phone number's for parents; hospital; police; fire department; ambulance; poison control were not posted near the telephone located on either level in the facility.</p>
<p>No</p>	<p>4. Fire Safety</p> <p>37.95.706(2) (2) A fire extinguisher must be easily accessible on each floor level. The minimum level of extinguisher classification is 2A10BC. Fire extinguishers shall be mounted near outside exit doors. The intent of this rule was not met:</p> <p>Based on observation and interview, this worker found that there was no extinguisher located in the basement. The extinguisher on the main floor was not mounted.</p>
<p>Yes</p>	<p>5. Equipment</p>
<p>Yes</p>	<p>6. Exiting</p>

OUTDOOR TOUR

<p>Yes</p>	<p>7. Play Area</p>
<p>N/A</p>	<p>8. Swimming</p>

PROGRAM ISSUES

Yes	9. Supervision
Yes	10. Provider Responsibilities
Yes	11. Activities
N/A	12. Night Care

HEALTH ISSUES

Yes	13. Illness Exclusion
Yes	14. Health Prevention

MEDICATION

N/A	15. Administration
N/A	16. Storage

INFANTS

Yes	17. Diapering
Yes	18. Feeding
N/A	19. Bathing
Yes	20. Sleeping
Yes	21. Activities
Yes	22. Outdoor Activities

NUTRITION/FOOD ISSUES

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

TRANSPORTATION

Yes	26. Basic Requirements
Yes	27. Child Passenger Safety

WRITTEN RECORDS

Yes	28. Parent Information
No	<p>29. Facility Records</p> <p>37.95.141(2) (2) The facility shall have a master list of the name, address, and phone number of all children in their care and their parents. The intent of this rule was not met:</p> <p>Based on interview, CCL found that the provider did not have a master list.</p>

WRITTEN RECORDS

No	<p>30. Child File Review</p> <p>37.95.1003(1)</p> <p>(1) An individualized diet and feeding schedule shall be provided according to a written plan submitted by the parents or by the child's physician with the knowledge and consent of the parents, guardian or placement agency. A change of diet and schedule shall be noted on each child's daily diet and feeding schedule.</p> <p>The intent of this rule was not met:</p> <p>Based on record review, CCL found that there were one infant(s) that did not have an individualized feeding schedule on file. See enclosed copy of children's record review.</p>
N/A	31. Medication File
No	<p>32. Caregiver File Review</p> <p>37.95.160(2)</p> <p>(2) The facility shall maintain a current list of staff that specifies each staff person's legal name, position, age, residential and mailing addresses, and phone numbers.</p> <p>The intent of this rule was not met:</p> <p>Based on interview, CCL found provider did not have a current list of staff that specifies the following staff information: name; position; age; residential and mailing addresses; phone numbers.</p>
Yes	33. First Aid Requirements

ADMINISTRATIVE RECORDS

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