



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: *Jill Sharon Smith / Twinkle Star Daycare*

Provider ID: *PV106000*

Address: *652 Willow Glen Drive, Kalispell, MT 59901*

Type: *Group Child Care*

Service Area: *Kalispell*

Assigned Worker: *Diana Lamers*

Director: *Jill Sharon Smith*

Phone: *(406) 873-8377*

Email: *NA*

Contact: *NA*

Phone: *NA*

Email: *NA*

Inspection

Type: *Complaint Investigation*

Date: *07/10/2018*

Time In: *1:10 PM* Time Out: *2:00 PM*

Inspector: *Diana Lamers*

Phone: *406-751-5962*

Children/Caregiver Observations

Time: *1:10 PM*

children: *17*

under 2: *4*

caregivers: *2*

Time:

children:

under 2:

caregivers:

Time:

children:

under 2:

caregivers:

Caregivers

Jill and Michael

Staff Changes

Notes

Deficiency Notice (Additional Text)

Please return your completed Plan of Correction to: 121 Financial Drive, Suite C, Kalispell, MT 59901; Fax: 755-6492; or Email: dlamers@mt.gov.

Staff Ratios

1. License

No

37.95.106.6.: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.

1. License (*continued*)**No**Deficiency***The intent of this rule was not met:***

Based on observation, interview, and review of attendance records CCL found that there were 17 children in care. Facility is currently approved for 12 children; therefore, only 12 children should have been in care.

The Plan of Correction was accepted on July 11, 2018.

2. Overlap

*Not Observed***Building/Fire Requirements**

3. Inside Facility

Not Observed

4. Fire Safety

Not Observed

5. Equipment

Not Observed

6. Exiting

*Not Observed***Outdoor Tour**

7. Play Area

Not Observed

8. Swimming

*N/A***Program Issues**

9. Supervision

Yes

10. Provider Responsibilities

Not Observed

11. Activities

Not Observed

12. Night Care

*N/A***Health Issues**

13. Illness Exclusion

Not Observed

14. Health Prevention

*Not Observed***Medication**

15. Administration

Not Observed

Infants/Toddlers (*continued*)

16. Storage	<i>Not Observed</i>
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Infants/Toddlers

17. Diapering	<i>Not Observed</i>
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18. Feeding	<i>Not Observed</i>
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19. Bathing	<i>Not Observed</i>
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20. Sleeping	<i>Not Observed</i>
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21. Activities	<i>Not Observed</i>
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22. Outdoor Activities	<i>Not Observed</i>
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Nutrition/Food Issues

23. Sanitation	<i>Not Observed</i>
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24. Meal Frequency	<i>Not Observed</i>
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25. Special Diet	<i>Not Observed</i>
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Transportation

26. Basic Requirements	<i>N/A</i>
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27. Child Passenger Safety	<i>N/A</i>
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Written Records

28. Parent Information	<i>Not Observed</i>
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29. Facility Records	<i>Not Observed</i>
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30. Child File Review	<i>Not Observed</i>
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31. Medication File	<i>Not Observed</i>
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32. Caregiver File Review	<i>Not Observed</i>
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33. First Aid Requirements	<i>Not Observed</i>
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Administrative Records

34. License-Certificate	<i>Not Observed</i>
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Administrative Records (*continued*)

35. Facility Requirements	<i>Not Observed</i>
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36. Registration/License Process	<i>Not Observed</i>