



Department of Public Health and Human Services

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www.dphhs.mt.gov

SURVEY TOOL

Facility

Name: Kasey Lorang / Kasey's Kiddo's

Provider ID: PV92712

Address: 2009 5th Ave S, Great Falls, MT 59405

Type: Family Child Care

Service Area: Great Falls

Assigned Worker: Jodi Linne

Director: Kasey Lorang

Phone: (406) 781-2061

Email: kcnjason@yahoo.com

Contact: Kasey Lorang

Phone: 406-781-2061

Email: kcnjason@yahoo.com

Inspection

Type: Renewal Inspection

Date: 06/26/2018

Time In: 10:45 AM Time Out: 11:50 AM

Inspector: Jodi Linne

Phone: 406-453-0526

Children/Caregiver Observations

Time: 10:45 AM

children: 5

under 2: 2

caregivers: 1

Time:

children:

under 2:

caregivers:

Time:

children:

under 2:

caregivers:

Caregivers

Kasey

Staff Changes

Notes

Deficiency Notice (Additional Text)

Staff Ratios

1. License

Yes

2. Overlap

Yes

Building/Fire Requirements

3. Inside Facility

Yes

4. Fire Safety

Yes

06/26/2018

1 of 3

Building/Fire Requirements *(continued)*

5. Equipment Yes

6. Exiting Yes

Outdoor Tour

7. Play Area No

37.95.121.6.:Any outdoor play area must be maintained free from hazards such as wells, machinery and animal waste. If any part of the play area is adjacent to a busy roadway, drainage or irrigation ditch, stream, large holes, or other hazardous areas, the play area must be enclosed with a fence in good repair that is at least 4 feet high without any holes or spaces greater than 4 inches in diameter or natural barriers to restrict children from these areas.

Note

The intent of this rule was not met:

Based on [], CCL found that the outdoor area was not [].

8. Swimming Not Observed

Program Issues

9. Supervision Yes

10. Provider Responsibilities Yes

11. Activities Yes

12. Night Care Not Observed

Health Issues

13. Illness Exclusion Yes

14. Health Prevention Yes

Medication

15. Administration Yes

16. Storage Yes

Infants/Toddlers

17. Diapering Yes

18. Feeding Not Observed

Infants/Toddlers (*continued*)

19. Bathing	<i>Not Observed</i>
20. Sleeping	<i>Not Observed</i>
21. Activities	<i>Yes</i>
22. Outdoor Activities	<i>Yes</i>

Nutrition/Food Issues

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

Transportation

26. Basic Requirements	<i>Yes</i>
27. Child Passenger Safety	<i>Not Observed</i>

Written Records

28. Parent Information	<i>Yes</i>
29. Facility Records	<i>Yes</i>
30. Child File Review	<i>Yes</i>
31. Medication File	<i>Yes</i>
32. Caregiver File Review	<i>Yes</i>
33. First Aid Requirements	<i>Yes</i>

Administrative Records

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