



Department of Public Health and Human Services

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www.dphhs.mt.gov

SURVEY TOOL

Facility

Name: *Misty Rae Harris*

Provider ID: *PV90575*

Address: *619 Lile Road, Billings, MT 59101*

Type: *Group Child Care*

Service Area: *Billings*

Assigned Worker: *Sharla Jerrel*

Director: *Misty Rae Harris*

Phone: *(406) 696-1777*

Email: *sjerrel@mt.gov*

Contact: .

Phone: .

Email: .

Inspection

Type: *Complaint Investigation*

Date: *08/21/2018*

Time In: *3:23 PM* Time Out: *3:48 PM*

Inspector: *Sharla Jerrel*

Phone: *406-234-4581*

Children/Caregiver Observations

Time: *3:23 PM*

children: *10*

under 2: *2*

caregivers: *1*

Time:

children:

under 2:

caregivers:

Time:

children:

under 2:

caregivers:

Caregivers

Misty

Staff Changes

Notes

Deficiency Notice (Additional Text)

Staff Ratios

1. License

Yes

2. Overlap

No

37.95.702.1.:Except for approved overlap care there shall be at least 2 caregivers caring for the children at all times when there are more than 6 children present at the home.

Deficiency

The intent of this rule was not met:

Based on observation and interview, CCL found that there were 10 children in care with one caregiver.

The plan of correction was accepted on 8/30/2018.

Building/Fire Requirements

3. Inside Facility	<i>Not Observed</i>
4. Fire Safety	<i>Not Observed</i>
5. Equipment	<i>Not Observed</i>
6. Exiting	<i>Not Observed</i>

Outdoor Tour

7. Play Area	<i>Not Observed</i>
8. Swimming	<i>Not Observed</i>

Program Issues

9. Supervision	<i>Not Observed</i>
10. Provider Responsibilities	<i>Not Observed</i>
11. Activities	<i>Not Observed</i>
12. Night Care	<i>Not Observed</i>

Health Issues

13. Illness Exclusion	<i>Not Observed</i>
14. Health Prevention	<i>Not Observed</i>

Medication

15. Administration	<i>Not Observed</i>
16. Storage	<i>Not Observed</i>

Infants/Toddlers

17. Diapering	<i>Not Observed</i>
18. Feeding	<i>Not Observed</i>
19. Bathing	<i>Not Observed</i>
20. Sleeping	<i>Not Observed</i>
21. Activities	<i>Not Observed</i>

Infants/Toddlers (continued)

22. Outdoor Activities *Not Observed*

Nutrition/Food Issues

23. Sanitation *Not Observed*

24. Meal Frequency *Not Observed*

25. Special Diet *Not Observed*

Transportation

26. Basic Requirements *Not Observed*

27. Child Passenger Safety *Not Observed*

Written Records

28. Parent Information *Not Observed*

29. Facility Records *Not Observed*

30. Child File Review *Not Observed*

31. Medication File *Not Observed*

32. Caregiver File Review *Not Observed*

33. First Aid Requirements *Not Observed*

Administrative Records

34. License-Certificate *Not Observed*

35. Facility Requirements *Not Observed*

36. Registration/License Process *Not Observed*