



# Department of Public Health and Human Services

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

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### INSPECTION INFORMATION

**Facility:** Nechia L. Love / Cuddly Care Daycare

**Type:** Key Indicator Survey      **Date:** 03/14/2018      **Time:** 10:21 AM

**Director:** Nechia Louan Love

**Contact:** \_\_\_\_\_

**Licensing Worker:** Sharla Jerrel      **Phone #:** (406) 234-4581

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**Time:** 10:21 AM # **children:** 12 # **under 2:** 3 # **caregivers:** 2  
**Time:** \_\_\_\_\_ # **children:** \_\_\_\_\_ # **under 2:** \_\_\_\_\_ # **caregivers:** \_\_\_\_\_  
**Time:** \_\_\_\_\_ # **children:** \_\_\_\_\_ # **under 2:** \_\_\_\_\_ # **caregivers:** \_\_\_\_\_

**STAFF RATIOS**

Yes	1. License
Yes	2. Overlap

**BUILDING/FIRE REQUIREMENTS**

Yes	3. Inside Facility
Yes	4. Fire Safety
Yes	5. Equipment
Yes	6. Exiting

**OUTDOOR TOUR**

Yes	7. Play Area
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**HEALTH ISSUES**

Yes	14. Health Prevention
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**MEDICATION**

N/A	16. Storage
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**INFANTS/TODDLERS**

Yes	17. Diapering
Yes	20. Sleeping

**WRITTEN RECORDS**

Yes	28. Parent Information
Yes	29. Facility Records
<b>No</b>	<p>30. Child File Review</p> <p><b>37.95.139(1)</b>                      (1) The parent(s) of each child admitted to the day care facility shall provide the name of the physician or health care facility the parent wishes to have called in case of an emergency.  <b>The intent of this rule was not met:</b></p> <p>Based on record review, CCL found that the parents did not provide the name of the physician or health care facility. See enclosed copy of childrens record review.  <b>The plan of correction was accepted on 4/17/2018.</b></p> <p><b>37.95.128(1)(a-d)</b>                      (1) A day care facility must have on file a health record form , provided by the department, concerning any special health risks that would affect other children . This must be obtained and kept on file by the provider prior to residence or enrollment of any child under age two at the day care facility. The health record form must be signed by:</p> <ul style="list-style-type: none"> <li>(a) A physician licensed to practice medicine in Montana pursuant to Title 37, chapter 3, MCA; or</li> <li>(b) A physician assistant-certified licensed to practice in Montana and practicing under a utilization plan approved by the board of medical examiners; or</li> <li>(c) A person licensed in Montana as a professional nurse and recognized by the board of nursing as a nurse practitioner or clinical nurse specialist; or</li> <li>(d) A naturopathic physician licensed under Title 37, chapter 26, MCA.</li> </ul>

**WRITTEN RECORDS**

**The intent of this rule was not met:**

Based on record review, CCL found that there was 1 child under age two that did not have a pediatric health record on file. See enclosed copy of children's record review.

**The plan of correction was accepted on 4/17/2018.**

**37.95.140(1)-(4)**

- (1) Before a child under the age of five may attend a Montana day care facility, that facility must be provided with the documentation required by (4) that the child has been immunized as required for the child's age group against measles, rubella, mumps, poliomyelitis, diphtheria, pertussis (whooping cough), tetanus, and Haemophilus influenza type B, unless the child qualifies for conditional attendance in accordance with (9):
- (2) If the child is at least 12 months old but not less than 60 months of age and has not received any Hib vaccine, the child must receive a dose prior to entry.
- (3) DT vaccine administered to a child less than 7 years of age is acceptable for purposes of this rule only if accompanied by a medical exemption meeting the requirements of ARM 16.28.707 that exempts the child from pertussis vaccination.
- (4) Before a child between the ages of five and 12 may attend a day care facility providing care to school aged children, that facility must be provided with documentation required by (5) that the child has been immunized as required for the child's age group against measles, rubella, mumps, poliomyelitis, diphtheria, pertussis (whooping cough), tetanus, and Haemophiles influenza type B, unless the child qualifies for conditional attendance in accordance with (9).

**The intent of this rule was not met:**

Based on record review, CCL found that there was 1 child that did not have immunizations on file. See enclosed copy of children's record review.

**The plan of correction was accepted on 4/17/2018.**

Yes	32. Caregiver File Review
Yes	33. First Aid Requirements