



Department of Public Health and Human Services

CHILD DAY CARE FACILITIES (includes infant regulations) SURVEY TOOL

INSPECTION INFORMATION

Facility: Northern MT Child Development Center

Type: Key Indicator Survey **Date:** 12/06/2017 **Time:** 09:00 AM

Director: Lucinda Sinclair

Contact:

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

Time: 09:00 AM **# children:** 21 **# under 2:** 7 **# caregivers:** 9

Time: **# children:** **# under 2:** **# caregivers:**

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STAFF RATIOS	
Yes	1. License

BUILDING/FIRE REQUIREMENTS	
Yes	2. Inside Facility
Yes	3. Equipment

OUTDOOR TOUR	
Yes	6. Play Area

INFANTS/TODDLERS	
Yes	19. Sleeping

WRITTEN RECORDS	
Yes	25. Parent Information
No	26. Facility Records 37.95.1005(12) (12) All caregivers shall sign an acknowledgement indicating that they have read and understood the provider's policy outlined in (11). The intent of this rule was not met: Based on interview, CCL found that the safe sleep policy was not signed by all caregivers . This plan of correction was accepted on December 15, 2017.
Yes	27. Child File Review
Yes	29. Caregiver File Review