



# Department of Public Health and Human Services

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

---

---

### INSPECTION INFORMATION

**Facility:** Origins Early Learners

**Type:** Renewal Inspection      **Date:** 11/03/2017      **Time:** 10:30 AM

**Director:** Genevieve King

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

**Licensing Worker:** Jodi Linne      **Phone #:** (406) 453-0526

---

---

**Time:** 10:30 AM # **children:** 9 # **under 2:** 0 # **caregivers:** 2

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

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

**STAFF RATIOS**

Yes	1. License
Not Observed	2. Overlap

**BUILDING/FIRE REQUIREMENTS**

Yes	3. Inside Facility
<b>No</b>	<p>4. Fire Safety</p> <p><b>37.95.706(2)</b>                  (2) A fire extinguisher must be easily accessible on each floor level . The minimum level of extinguisher classification is 2A10BC. Fire extinguishers shall be mounted near outside exit doors.  <b>The intent of this rule was not met:</b></p> <p>Based on observation, CCL found that the fire extinguisher was not mounted near an outside exit door .  <b>Plan of Correction accepted 12/18/2017.</b></p>
Yes	5. Equipment
Yes	6. Exiting

**OUTDOOR TOUR**

Yes	7. Play Area
Not Observed	8. Swimming

**PROGRAM ISSUES**

Yes	9. Supervision
Yes	10. Provider Responsibilities
Yes	11. Activities
Not Observed	12. Night Care

**HEALTH ISSUES**

Yes	13. Illness Exclusion
<b>No</b>	<p>14. Health Prevention</p> <p><b>37.95.183(2)(a-g)</b>                  (2) A first aid kit must be kept on site at all times and must at a minimum contain :                  (a) Unexpired syrup of ipecac (one ounce bottle) which may be administered only upon directive from the Emergency Montana Poison Control Center or upon directive of the local emergency service program (i.e., 911 operator, local hospital, or physician);                  (b) Sterile, absorbent bandages;                  (c) A cold pack;                  (d) Tape and a variety of band-aids;                  (e) Tweezers and scissors;                  (f) The toll free number for the Emergency Montana Poison Control Center, 1(800) 222-1222;                  (g) Disposable single use gloves.  <b>The intent of this rule was not met:</b></p> <p>Based on review of first aid kit, CCL found that the kit did not contain the following items: tape and scissors.  <b>Plan of Correction accepted 12/18/2017.</b></p>

**MEDICATION**

Yes	15. Administration
Yes	16. Storage

**INFANTS/TODDLERS**

Yes	17. Diapering
Yes	18. Feeding
Not Observed	19. Bathing
<b>No</b>	<p>20. Sleeping</p> <p><b>37.95.1005(3)(b)</b>  <b>(b)</b> Cot or mat surfaces may be of plastic or canvas or other material, which can be cleaned with detergent solution and allowed to air dry.  <b>The intent of this rule was not met:</b></p> <p>Based on observation and interview, CCL found that there were not enough sleeping/rest mats made out of a waterproof/sanitizable surface for each child to have their own at nap/rest time.  <b>Plan of Correction accepted 12/18/2017.</b></p>
Yes	21. Activities
Yes	22. Outdoor Activities

**NUTRITION/FOOD ISSUES**

Yes	23. Sanitation
Yes	24. Meal Frequency
Yes	25. Special Diet

**TRANSPORTATION**

Yes	26. Basic Requirements
Not Observed	27. Child Passenger Safety

**WRITTEN RECORDS**

<b>No</b>	<p>28. Parent Information</p> <p><b>37.95.115(2)</b>  <b>(2)</b> Day care facility shall post a copy of the facility registration or license and the phone number of state and local quality assurance division offices in a conspicuous place. Parents should be encouraged to contact the division if they have questions regarding the license or the day care regulations.  <b>The intent of this rule was not met:</b></p> <p>Based on review of facility records, CCL found that the phone number of the state and local quality assurance division was not posted in a conspicuous place.  <b>Corrected on site 11/3/17.</b></p>
Yes	29. Facility Records
Yes	30. Child File Review
Yes	31. Medication File

**WRITTEN RECORDS**

Yes 32. Caregiver File Review

Yes 33. First Aid Requirements

**ADMINISTRATIVE RECORDS**

Yes 34. License-Certificate

Yes 35. Facility Requirements

Yes 36. Registration/License Process