



# 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:** Peggy Haderlie

**Type:** Renewal Inspection      **Date:** 01/25/2018      **Time:** 10:10 AM

**Director:** Peggy Haderlie

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

**Licensing Worker:** Kirsten Geiger      **Phone #:** (406) 522-2271

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**Time:** 10:27 AM # **children:** 5 # **under 2:** 1 # **caregivers:** 1

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

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

**STAFF RATIOS**

Yes	1. License
N/A	2. Overlap

**BUILDING/FIRE REQUIREMENTS**

Yes	3. Inside Facility
Yes	4. Fire Safety
Yes	5. Equipment
<b>No</b>	<p>6. Exiting</p> <p><b>37.95.705(5)</b>  <b>(5)</b> All rooms used for napping by children must have at least two means of escape, at least one of which shall be a door or a stairway providing a means of unobstructed travel to the outside of the building at street or ground level to the public way. The second means of escape may be a window which meets the egress requirements of (2).  <b>The intent of this rule was not met:</b></p> <p>Based on observation, CCL found that windows in the bedroom do not meet egress requirements . Therefore, this area should not be utilized for napping purposes.</p> <p><b>The Plan of Correction was accepted on January 30, 2018.</b></p>

**OUTDOOR TOUR**

Yes	7. Play Area
N/A	8. Swimming

**PROGRAM ISSUES**

Yes	9. Supervision
Yes	10. Provider Responsibilities
Yes	11. Activities
N/A	12. Night Care

**HEALTH ISSUES**

Yes	13. Illness Exclusion
Yes	14. Health Prevention

**MEDICATION**

Yes	15. Administration
Yes	16. Storage

**INFANTS/TODDLERS**

Yes	17. Diapering
Yes	18. Feeding
N/A	19. Bathing

**INFANTS/TODDLERS**

Yes 20. Sleeping

Yes 21. Activities

Yes 22. Outdoor Activities

**NUTRITION/FOOD ISSUES**

Yes 23. Sanitation

Yes 24. Meal Frequency

N/A 25. Special Diet

**TRANSPORTATION**

N/A 26. Basic Requirements

N/A 27. Child Passenger Safety

**WRITTEN RECORDS**

Yes 28. Parent Information

Yes 29. Facility Records

Yes 30. Child File Review

Yes 31. Medication File

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