



# 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:** Sara DeVries / Big Dreams Daycare

**Type:** Renewal Inspection      **Date:** 07/19/2017      **Time:** 11:00 AM

**Director:** Sara Christine DeVries

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

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

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**Time:** 11:00 AM **# children:** 7 **# under 2:** 4 **# caregivers:** 2

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### STAFF RATIOS

Yes	1. License
Not Observed	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
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
No	<p>14. Health Prevention</p> <p><b>37.95.183(2)(a-g)</b></p> <p><b>(2)</b> A first aid kit must be kept on site at all times and must at a minimum contain :</p> <ul style="list-style-type: none"> <li><b>(a)</b> 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);</li> <li><b>(b)</b> Sterile, absorbent bandages;</li> <li><b>(c)</b> A cold pack;</li> <li><b>(d)</b> Tape and a variety of band-aids;</li> <li><b>(e)</b> Tweezers and scissors;</li> <li><b>(f)</b> The toll free number for the Emergency Montana Poison Control Center, 1(800) 222-1222;</li> <li><b>(g)</b> Disposable single use gloves.</li> </ul> <p><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 item: phone number for the Montana Poison Control Center.</p> <p><b>Corrected on site 7/26/17</b></p>

### MEDICATION

Yes	15. Administration
Yes	16. Storage

### INFANTS/TODDLERS

Yes	17. Diapering
Yes	18. Feeding
Not Observed	19. Bathing
Yes	20. Sleeping
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

Yes	28. Parent Information
Yes	29. Facility Records
No	30. Child File Review

#### 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 Haemophilus 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 requires proof of immunization updates. See enclosed copy of children's record review.

#### Plan of Correction accepted 8/24/17.

#### 37.95.128(1)(a-d)

- (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:

**WRITTEN RECORDS**

- (a) A physician licensed to practice medicine in Montana pursuant to Title 37, chapter 3, MCA; or
- (b) A physician assistant-certified licensed to practice in Montana and practicing under a utilization plan approved by the board of medical examiners; or
- (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
- (d) A naturopathic physician licensed under Title 37, chapter 26, MCA.

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

Based on record review, CCL found that there were 2 children under age two that did not have a pediatric health record on file. See enclosed copy of children's record review.

**Plan of Correction accepted 8/24/17.**

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