

Department of Public Health and Human Services

Child Care Licensing-QAD ♦ PO Box 202953 ♦ Helena, MT 59620-2953 ♦ phone: 444-2012 ♦ fax: 444-1742

SURVEY TOOL

Facility

Name: Shawnna Jenks Ryan / Three Rivers CC

Provider ID: *PV108268*

Address: 78 Connor Dr, Bozeman, MT 59718

Type: Group Child Care Service Area: Bozeman Assigned Worker: Kirsten Geiger

Director: Shawnna Jenks Ryan Phone: (406) 404-5148 Email: kgeiger@mt.gov
Contact: Shawnna Phone: 404-5148 Email: kgeiger@mt.gov

Inspection

Type: Renewal Inspection Date: 02/19/2020 Time In: 10:50 AM Time Out: 12:15 PM

Inspector: Kirsten Geiger Phone: 406-522-2271

Children/Caregiver Observations

 Time: 10:55 AM
 # children: 6
 # under 2: 1
 # caregivers: 2

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

Staff Ratios

1. License Yes

2. Overlap N/A

Building/Fire Requirements

3. Inside Facility Yes

4. Fire Safety Yes

5. Equipment No

37.95.

720. EQUIPMENT

3. High chairs, when used, must have a wide base and a safety strap. Portable high chairs that hook onto tables are not allowed.

Deficiency

The intent of this rule was not met:

Based on observation on 2/19/20 at 11:00 am, CCL found a portable high chair latched onto the kitchen island.

The Plan of Correction was accepted on February 26, 2020.

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Building/Fire Requirements (continued)	
6. Exiting	Yes
Outdoor Tour	
7. Play Area	Yes
8. Swimming	N/A
Program Issues	
9. Supervision	Yes
10. Provider Responsibilities	Yes
11. Activities	Yes
12. Night Care	N/A
Health Issues	
13. Illness Exclusion	Yes
14. Health Prevention	Yes
Medication	
15. Administration	Yes
16. Storage	Yes
Infants/Toddlers	

17. Diapering No

37.95

- 1001. INFANT'S AND TODDLERS DIAPERING AND TOILET TRAINING
 - 7. All toilet articles shall be specifically labeled for each infant and toddler. Each item must be separated and kept in a sanitary condition.

<u>Deficiency</u>

The intent of this rule was not met:

Based on observation and provider interview on 2/19/20 at 11:20 am, CCL found that packages of diapers are not separated and labeled with the child's name for whom they belong to.

The Plan of Correction was accepted on February 26, 2020.

18. Feeding	Yes
19. Bathing	N/A

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Infants/Toddlers (continued)	
20. Sleeping	Yes
21. Activities	Yes
22. Outdoor Activities	Yes
Nutrition/Food Issues	
23. Sanitation	Yes
24. Meal Frequency	Yes
25. Special Diet	N/A
Transportation	
26. Basic Requirements	N/A
27. Child Passenger Safety	N/A
Written Records	
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	Yes
Administrative Records	
34. License-Certificate	Yes
35. Facility Requirements	Yes
36. Registration/License Process	Yes