



Department of Public Health and Human Services

2401 Colonial Drive, PO Box 202953 ♦ Helena, MT 59601 ♦ (406) 444-2012 ♦ Fax: (406) 444-1742

www.dphhs.mt.gov

SURVEY TOOL

Facility

Name: *Susan Bartole*

Provider ID: *PV82352*

Address: *1035 Mill Rd, Helena, MT 59602*

Type: *Group Child Care*

Service Area: *Helena*

Assigned Worker: *Anna Haire*

Director: *Susan Bartole*

Phone: *(406) 449-8380*

Email: *sbart501@hotmail.com*

Contact: *SUE BARTOLE*

Phone: *406 449-8380*

Email: *sbart501@hotmail.com*

Inspection

Type: *Renewal Inspection*

Date: *06/18/2018*

Time In: *3:45 PM* Time Out: *12:00 PM*

Inspector: *Anna Haire*

Phone: *406-444-1954*

Children/Caregiver Observations

Time: *10:30 AM*

children: *5*

under 2: *1*

caregivers: *2*

Time:

children:

under 2:

caregivers:

Time:

children:

under 2:

caregivers:

Caregivers

SUSAN AND DENNIS BARTOLE

Staff Changes

Notes

Deficiency Notice (Additional Text)

Remember to update all the Over the Counter Topical Medication Forms.

Staff Ratios

1. License

Yes

2. Overlap

Yes

Building/Fire Requirements

3. Inside Facility

No

37.95.705.10.:Protective receptacle covers must be installed on electrical outlets in all areas occupied by children under 5 years of age.

06/18/2018

1 of 5

3. Inside Facility (continued) No
Deficiency**The intent of this rule was not met:**

Based on observation, CCL found that an outlet in the dining room did not have an wall plate.

The Plan of Correction was accepted on 8-1-18.

4. Fire Safety No

37.95.706.3.:All day care facilities must have operating UL smoke detecting devices on each floor of the facility, installed in accordance with the manufacturer's specifications. Smoke detectors must be installed in front of the doors to stairways and in corridor of all floors occupied by the day care. Smoke detectors must be installed in any room in which children sleep. If individual battery-operated smoke detectors are used, the following maintenance is required:

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

Based on observation and interview, CCL found that a smoke detector was not installed in the rear napping room.

The Plan of Correction was accepted on 8-1-18.

5. Equipment Yes

6. Exiting Yes

Outdoor Tour

7. Play Area No

37.95.121.5.:The indoor and outdoor play areas must be clean, reasonably neat, and free from accumulation of dirt, rubbish, or other health hazards.

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

Based on observation and interview, CCL found that the outdoor area was not free of animal waste.

The Plan of Correction was accepted on 8-1-18.

37.95.121.6.:Any outdoor play area must be maintained free from hazards such as wells, machinery and animal waste. If any part of the play area is adjacent to a busy roadway, drainage or irrigation ditch, stream, large holes, or other hazardous areas, the play area must be enclosed with a fence in good repair that is at least 4 feet high without any holes or spaces greater than 4 inches in diameter or natural barriers to restrict children from these areas.

| | |
|--------------------------|-----------|
| 7. Play Area (continued) | No |
|--------------------------|-----------|

Deficiency

The intent of this rule was not met:

Based on observation and interview, CCL found that the outdoor area was not free from hazards. There was an open stairway leading down to a lower apartment where there was a cigarette butt container accessible to the children.

The Plan of Correction was accepted on 8-1-18.

| | |
|-------------|-----|
| 8. Swimming | Yes |
|-------------|-----|

Program Issues

| | |
|----------------|-----|
| 9. Supervision | Yes |
|----------------|-----|

| | |
|-------------------------------|-----|
| 10. Provider Responsibilities | Yes |
|-------------------------------|-----|

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|----------------|-----|
| 11. Activities | Yes |
|----------------|-----|

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|----------------|-----|
| 12. Night Care | N/A |
|----------------|-----|

Health Issues

| | |
|-----------------------|-----|
| 13. Illness Exclusion | Yes |
|-----------------------|-----|

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|-----------------------|-----------|
| 14. Health Prevention | No |
|-----------------------|-----------|

37.95.183.2.:A first aid kit must be kept on site at all times and must at a minimum contain:

Deficiency

The intent of this rule was not met:

Based on review of first aid kit, CCL found that the kit did not contain the following items: tape

The Plan of Correction was accepted on 8-1-18.

Medication

| | |
|--------------------|-----|
| 15. Administration | Yes |
|--------------------|-----|

| | |
|-------------|-----|
| 16. Storage | Yes |
|-------------|-----|

Infants/Toddlers

| | |
|---------------|-----|
| 17. Diapering | Yes |
|---------------|-----|

| | |
|-------------|-----|
| 18. Feeding | Yes |
|-------------|-----|

Infants/Toddlers *(continued)*

| | |
|------------------------|-----|
| 19. Bathing | Yes |
| 20. Sleeping | Yes |
| 21. Activities | Yes |
| 22. Outdoor Activities | Yes |

Nutrition/Food Issues

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

Transportation

| | |
|----------------------------|-----|
| 26. Basic Requirements | Yes |
| 27. Child Passenger Safety | Yes |

Written Records

| | |
|------------------------|-----------|
| 28. Parent Information | No |
|------------------------|-----------|

37.95.115.1.:*The following written information shall be made available to all parents:*

Deficiency

The intent of this rule was not met:

Based on review of facility records, provider was unable to produce the following written information: admission requirements, enrollment procedures, hours of operation, frequency and type of meals and snacks served, fees and payment plan, regulations concerning sick children, transportation and trip arrangements, and discipline policies.

The Plan of Correction was accepted on 8-1-18.

| | |
|----------------------|-----------|
| 29. Facility Records | No |
|----------------------|-----------|

37.95.141.2.:*The facility shall have a master list of the name, address, and phone number of all children in their care and their parents.*

Deficiency

The intent of this rule was not met:

Based on review of facility records, CCL found that the provider did not have a master list.

The Plan of Correction was accepted on 8-1-18.

Written Records *(continued)*

30. Child File Review No

37.95.140.1.: *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):*

Deficiency

The intent of this rule was not met:

Based on record review, CCL found that there were 2 children that did not have immunizations on file. See enclosed copy of children's record review.

The Plan of Correction was accepted on 8-1-18.

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