



Department of Public Health and Human Services

CHILD DAY CARE FACILITIES (includes infant regulations) SURVEY TOOL

INSPECTION INFORMATION

Facility: Yellowstone Montessori Academy LLC

Type: Renewal Inspection

Date: 02/23/2017

Time: 10:30 AM

Director: Constance B. Dratz

Contact: _____

Licensing Worker: Kirsten Geiger

Phone #: (406) 522-2271

Time: 10:40 AM **# children:** 22 **# under 2:** 0 **# caregivers:** 5

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

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

STAFF RATIOS

Yes	1. License
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BUILDING/FIRE REQUIREMENTS

Yes	2. Inside Facility
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Yes	3. Equipment
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Yes	4. Exiting
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Yes	5. Space
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OUTDOOR TOUR

Yes	6. Play Area
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N/A	7. Swimming
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PROGRAM ISSUES

Yes	8. Supervision
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Yes	9. Provider Responsibilities
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Not Observed	10. Activities
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N/A	11. Night Care
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HEALTH ISSUES

Yes	12. Illness Exclusion
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Yes	13. Health Prevention
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MEDICATION

Yes	14. Administration
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Yes	15. Storage
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INFANTS/TODDLERS

N/A	16. Diapering
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N/A	17. Feeding
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N/A	18. Bathing
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N/A	19. Sleeping
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N/A	20. Activities
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N/A	21. Outdoor Activities
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N/A	22. Special Requirements
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TRANSPORTATION

N/A	23. Basic Requirements
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N/A	24. Child Passenger Safety
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WRITTEN RECORDS

Yes	25. Parent Information
Yes	26. Facility Records
Yes	27. Child File Review
Yes	28. Medication File
Not Observed	29. Caregiver File Review
Yes	30. First Aid Requirements

ADMINISTRATIVE RECORDS

Yes	31. License-Certificate
Yes	32. Facility Requirements
Yes	33. Registration/License Process