



Department of Public Health and Human Services

FAMILY and GROUP DAY CARE FACILITIES (includes infant regulations) SURVEY TOOL

INSPECTION INFORMATION

Facility: Yohana Weaver

Type: Renewal Inspection **Date:** 04/03/2018 **Time:** 02:35 PM

Director: Yohana Karma Weaver

Contact: _____

Licensing Worker: Kate Hawley **Phone #:** (406) 329-1590

Time: 02:35 PM **# children:** 9 **# under 2:** 4 **# caregivers:** 2
Time: **# children:** **# under 2:** **# caregivers:**
Time: **# children:** **# under 2:** **# caregivers:**

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
N/A	8. Swimming

PROGRAM ISSUES

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

HEALTH ISSUES

Not Observed	13. Illness Exclusion
Not Observed	14. Health Prevention

MEDICATION

N/A	15. Administration
N/A	16. Storage

INFANTS/TODDLERS

Yes	17. Diapering
Yes	18. Feeding
Not Observed	19. Bathing
Not Observed	20. Sleeping
Yes	21. Activities
Not Observed	22. Outdoor Activities

NUTRITION/FOOD ISSUES

Yes	23. Sanitation
Not Observed	24. Meal Frequency

NUTRITION/FOOD ISSUES

Not Observed	25. Special Diet
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TRANSPORTATION

N/A	26. Basic Requirements
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N/A	27. Child Passenger Safety
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WRITTEN RECORDS

Yes	28. Parent Information
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No	<p>29. Facility Records</p> <p>37.95.155(1) (1) The provider shall maintain all policies, records, and reports that are required by the department. These policies must be reviewed and updated annually by the facility. The intent of this rule was not met:</p> <p>Based on observation, CCL found that emergency contact forms and OTC forms had not been updated annually.</p> <p>PLAN OF CORRECTION ACCPETED 4/29/18</p>
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Yes	30. Child File Review
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Yes	31. Medication File
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Yes	32. Caregiver File Review
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Yes	33. First Aid Requirements
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ADMINISTRATIVE RECORDS

Yes	34. License-Certificate
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Yes	35. Facility Requirements
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Yes	36. Registration/License Process
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