

Family Day Care Inspection Compliance Plan

Provider's Name: **Amber Spalding**

City: **Sioux Falls**

Provider Number: **018042563**

Inspector: **Kelly Gnat**

Date of Inspection: **10/25/2018**

Time of Inspection: **10:00 AM**

The items listed below are those that the provider was not in compliance with at the time of the inspection.

B. Record Keeping/Fire Safety & Emergency Weather Drills

30. Does each child's record contain all required information? 67:42:16:13

Corrections To Be Made:

**EE - Immunization Records
RK - Immunization Records
WS - Immunization Records
WS - Immunization Records**

Agency Action:

Compliance Plan

Suggested
Completion
Date:

11/15/2018

Actual
Completion
Date:

11/16/2018

Status: **Corrected Immediately**

C. Health & Safety Features of the Home - Indoor Environmental Observations

74. If caring for children under 4 yrs. of age, are all unused electrical wall sockets covered?
67:42:03:11.07

Corrections To Be Made:

Unused electrical wall sockets were not covered in the basement.

Correction: All unused electrical wall sockets were covered in all areas of the home.

Agency Action:

Compliance Plan

Suggested
Completion
Date:

10/25/2018

Actual
Completion
Date:

11/16/2018

Status: **Corrected**

Amber Spaulding

Provider Signature

10/25/2018

Date

Kelly Gnat

Inspector Signature

10/25/2018

Date