

Program Inspection Licensed Day Care Programs Compliance Plan

Provider's Name: **Angel Care Day Care**

City: **Sturgis**

Provider Number: **010606036**

Inspector: **Lori Janssen**

Date of Inspection: **06/15/2020**

Time of Inspection: **6:45 AM**

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

G. Record Keeping, Posting Information, Fire/tornado Drills

40. Are staff records complete? 67:42:10:09 Note: Staff records are to be maintained at the facility for 6 months following the end of employment.

<p>Corrections To Be Made:</p> <p>DF - CPR RL - CPR</p>	<p>Agency Action:</p> <p>Compliance Plan</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Suggested Completion Date:</td> <td style="width: 50%;">Actual Completion Date:</td> </tr> <tr> <td style="text-align: center;">07/15/2020</td> <td style="text-align: center;">07/27/2020</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	07/15/2020	07/27/2020
Suggested Completion Date:	Actual Completion Date:				
07/15/2020	07/27/2020				

Donna Fedderson

Provider Signature

06/15/2020

Date

Lori Janssen

Inspector Signature

06/15/2020

Date