

Family Day Care Inspection Compliance Plan

Provider's Name: **Rachel Talich**

City: **Murdo**

Provider Number: **010611469**

Inspector: **McKenzie
Hyronimus**

Date of Inspection: **02/04/2020**

Time of Inspection: **11:17 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

<p>Corrections To Be Made:</p> <p>AL - Immunization Records CL - Immunization Records MM - Emergency Permission, Immunization Records JV - Immunization Records HW - Immunization Records</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;">02/18/2020</td> <td style="text-align: center;">03/10/2020</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	02/18/2020	03/10/2020
Suggested Completion Date:	Actual Completion Date:				
02/18/2020	03/10/2020				

Rachel Talich

Provider Signature

02/04/2020

Date

McKenzie Hyronimus

Inspector Signature

02/04/2020

Date