

Family Day Care Inspection Compliance Plan

Provider's Name: **Amanda Bunke**

City: **Aberdeen**

Provider Number: **011008482**

Inspector: **Julie Hermansen**

Date of Inspection: **05/31/2019**

Time of Inspection: **11:00 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: SG - Immunization Records	Agency Action: Compliance Plan <table border="0"> <tr> <td style="width: 50%;">Suggested Completion Date:</td> <td style="width: 50%;">Actual Completion Date:</td> </tr> <tr> <td style="text-align: center;">06/25/2019</td> <td style="text-align: center;">07/08/2019</td> </tr> </table> Status: Corrected	Suggested Completion Date:	Actual Completion Date:	06/25/2019	07/08/2019
Suggested Completion Date:	Actual Completion Date:				
06/25/2019	07/08/2019				

32. Do provider and helper records contain all required information? 67:42:03:07.03

Corrections To Be Made: CA - Three References, C A/N Report Statement AB - Timely Orientation, Training JK - Three References MR - Three References, Sex Offender Registry Check, C A/N Report Statement, Timely Orientation, CPR, Training	Agency Action: Compliance Plan <table border="0"> <tr> <td style="width: 50%;">Suggested Completion Date:</td> <td style="width: 50%;">Actual Completion Date:</td> </tr> <tr> <td style="text-align: center;">06/30/2019</td> <td style="text-align: center;">07/09/2019</td> </tr> </table> Status: Corrected	Suggested Completion Date:	Actual Completion Date:	06/30/2019	07/09/2019
Suggested Completion Date:	Actual Completion Date:				
06/30/2019	07/09/2019				

34. Has the provider completed six hours of training in at least three topic areas in the past year? Of those hours, only three are limited to reading or watching TV or video etc. 67:42:03:07.02

Corrections To Be Made:	Agency Action:	
Amanda needs 6 hours training for 2018.	Compliance Plan	
Provided training hours completed for 2018.	Suggested Completion Date:	Actual Completion Date:
	06/25/2019	07/09/2019
	Status: Corrected	

36. Have all helpers completed six hours of training in at least three separate topic areas in the past year?
67:42:03:07.02

Corrections To Be Made:	Agency Action:	
Mary Raymond needs 6 hours training for 2018.	Compliance Plan	
Provided helper training hours for 2018.	Suggested Completion Date:	Actual Completion Date:
	06/25/2019	07/09/2019
	Status: Corrected	

38. Do the helpers have current CPR certification? 67:42:03:07.02

Corrections To Be Made:	Agency Action:	
Mary Raymond needs a CPR certification.	Compliance Plan	
Helper Mary Raymond completed her CPR certification.	Suggested Completion Date:	Actual Completion Date:
	06/25/2019	07/08/2019
	Status: Corrected	

D. Health & Safety Features of the Home - Outdoor Environmental Observations

90. Did the Provider obtain orientation training in the topic of child development by 11/30/2018?

Corrections To Be Made:

Amanda Bunke & Mary Raymond need the child development orientation training class.

Amanda Bunke & Mary Raymond completed the child development orientation class.

Agency Action:

Compliance Plan

Suggested
Completion
Date:

Actual
Completion
Date:

06/25/2019

07/08/2019

Status: **Corrected**

Amanda Bunke

Provider Signature

05/31/2019

Date

Julie Hermansen

Inspector Signature

05/31/2019

Date