Family Day Care Inspection Compliance Plan

| Provider's Name: | Christine Antonsen | City: | Volga | Provider Number: | 011512483 |
|------------------|--------------------|---------------------|------------|---------------------|-----------|
| Inspector: | Rachel Holm | Date of Inspection: | 04/09/2019 | Time of Inspection: | 2:34 PM |

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: | Agency Action: | | | |
|---|----------------------------------|-------------------------------|--|--|
| HB - Immunization Records CG - Information Sheet, Emergency Contact, Emergency Permission, | Compliance Plan | | | |
| Immunization Records CG - Immunization Records BH - Immunization Records | Suggested Completion Date: | Actual Completion Date: | | |
| | 05/09/2019 | 04/30/2019 | | |
| | Status: Corrected | I | | |
| | | | | |

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

56. Is soft bedding that could pose a suffocation hazard removed from the infant sleep environment? 67:42:03:23

| Corrections To Be Made: | Agency Action: | |
|--|----------------------------------|-------------------------------|
| Safe sleep- A safe sleep environment was not utilized for an infant in care. | Letter of Notification | |
| The Provider is to immediately remove the blankets from the sleep enviroment and ensure all infants under one year of age have a safe sleeping environment when napping. | Suggested Completion Date: | Actual Completion Date: |
| Blankets were immediately removed. | 04/09/2019 | 04/09/2019 |
| CCS is requiring additional training be taken regarding this topic area no later than 05/27/2019. | Status: Corrected Immediately | |
| | | |

Christine Antonsen

Provider Signature

04/09/2019

Date

Rachel Holm

Inspector Signature

04/09/2019

Date