

Family Day Care Inspection Compliance Plan

Provider's Name: **Debbie Dickhaut**

City: **Redfield**

Provider Number: **013005085**

Inspector: **Eric Janke**

Date of Inspection: **04/24/2018**

Time of Inspection: **1:15 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

<p>Corrections To Be Made:</p> <p>EA - Immunization Records CJ - Immunization Records SS - 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;">05/24/2018</td> <td style="text-align: center;">05/17/2018</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	05/24/2018	05/17/2018
Suggested Completion Date:	Actual Completion Date:				
05/24/2018	05/17/2018				

39. Does the provider have a written plan for prevention and response to emergencies due to food and allergic reactions? 67:42:03:13

<p>Corrections To Be Made:</p> <p>No written preparedness plan at time of inspection.</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;">05/24/2018</td> <td style="text-align: center;">05/17/2018</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	05/24/2018	05/17/2018
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Debbie Dickhaut
Provider Signature

04/24/2018
Date

Eric Janke
Inspector Signature

04/24/2018
Date