

Family Day Care Inspection Compliance Plan

Provider's Name: **Caroll Maddox**

City: **Redfield**

Provider Number: **013005382**

Inspector: **Eric Janke**

Date of Inspection: **03/02/2018**

Time of Inspection: **9:20 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>CS - 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;">04/02/2018</td> <td style="text-align: center;">03/08/2018</td> </tr> <tr> <td colspan="2" style="text-align: center;">Status: Corrected</td> </tr> </table>	Suggested Completion Date:	Actual Completion Date:	04/02/2018	03/08/2018	Status: Corrected	
Suggested Completion Date:	Actual Completion Date:						
04/02/2018	03/08/2018						
Status: Corrected							

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>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;">04/02/2018</td> <td style="text-align: center;">03/08/2018</td> </tr> <tr> <td colspan="2" style="text-align: center;">Status: Corrected</td> </tr> </table>	Suggested Completion Date:	Actual Completion Date:	04/02/2018	03/08/2018	Status: Corrected	
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Carol Maddox
Provider Signature

03/02/2018
Date

Eric Janke
Inspector Signature

03/02/2018
Date