

Family Day Care Inspection Compliance Plan

Provider's Name: **Marlys Robinson**

City: **Martin**

Provider Number: **013702094**

Inspector: **Becky Hurst**

Date of Inspection: **03/28/2019**

Time of Inspection: **1:57 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>KL - Immunization Records KL - Immunization Records PR - Immunization Records</p>	<p>Agency Action:</p> <p>Compliance Plan</p> <table border="0"> <tr> <td style="text-align: center;">Suggested Completion Date:</td> <td style="text-align: center;">Actual Completion Date:</td> </tr> <tr> <td style="text-align: center;">04/11/2019</td> <td style="text-align: center;">04/19/2019</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	04/11/2019	04/19/2019
Suggested Completion Date:	Actual Completion Date:				
04/11/2019	04/19/2019				

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

<p>Corrections To Be Made:</p> <p>MR - CPR, Training</p>	<p>Agency Action:</p> <p>Compliance Plan</p> <table border="0"> <tr> <td style="text-align: center;">Suggested Completion Date:</td> <td style="text-align: center;">Actual Completion Date:</td> </tr> <tr> <td style="text-align: center;">04/11/2019</td> <td style="text-align: center;">04/30/2019</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	04/11/2019	04/30/2019
Suggested Completion Date:	Actual Completion Date:				
04/11/2019	04/30/2019				

37. Does the provider have a current CPR certification? 67:42:03:07.02

Corrections To Be Made:	Agency Action:	
The Provider does not have current CPR Certification.	Compliance Plan	
Provider will obtain CPR Certification with in 30 days and keep on file for future inspections and accessible to parents if requested.	Suggested Completion Date:	Actual Completion Date:
CORRECTION: The provider has obtained CPR verification and provided it to the Licensing Specialist.	04/28/2019	04/02/2019
	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:	Agency Action:	
The provider did not complete the child deveopment training in the allotted time frame.	Compliance Plan	
The provider will complete child development training and provide verification of completion to the Licensing Specialist.	Suggested Completion Date:	Actual Completion Date:
CORRECTION: The provider has completed the child development training.	04/11/2019	04/30/2019
	Status: Corrected	

Marlys Robinson
Provider Signature

03/28/2019
Date

Becky Hurst
Inspector Signature

03/28/2019
Date