

Family Day Care Inspection Compliance Plan

Provider's Name: **Rachael Collins**

City: **Huron**

Provider Number: **014511612**

Inspector: **Deb Bigge**

Date of Inspection: **08/05/2020**

Time of Inspection: **1:09 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:

**DC - Emergency Permission
AW - Immunization Records**

Agency Action:

Compliance Plan

Suggested
Completion
Date:

08/19/2020

Actual
Completion
Date:

08/14/2020

Status: **Corrected**

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

60. Are frozen foods kept at a temperature of 0 degrees F or below? 67:42:03:11.08

Corrections To Be Made:

**The freezer temperature measured at 6 degrees F during the inspection.
The temperature needs to be maintained at 0 degrees F or colder.**

***The Provider lowered the freezer temperature and will assure it is
maintained at 0 degrees F or colder.**

Agency Action:

Compliance Plan

Suggested
Completion
Date:

08/06/2020

Actual
Completion
Date:

08/06/2020

Status: **Corrected**

Rachael Collins

Provider Signature

09/14/2020

Date

Deb Bigge

Inspector Signature

09/14/2020

Date