

Family Day Care Inspection Compliance Plan

Provider's Name: **Sarah Mann**

City: **Tyndall**

Provider Number: **014512410**

Inspector: **Deb Bigge**

Date of Inspection: **10/02/2018**

Time of Inspection: **10:10 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>M - Enrollment Date, Information Sheet, Emergency Contact, Emergency Permission, Immunization Records OA - Immunization Records MC - Immunization Records EG - 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;">10/16/2018</td> <td style="text-align: center;">11/30/2018</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	10/16/2018	11/30/2018
Suggested Completion Date:	Actual Completion Date:				
10/16/2018	11/30/2018				

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

<p>Corrections To Be Made:</p> <p>AD - Address & Phone Number, Three References</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;">10/16/2018</td> <td style="text-align: center;">10/29/2018</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	10/16/2018	10/29/2018
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10/16/2018	10/29/2018				

35. Have all helpers completed orientation training within 90 days of hire? 67:42:03:07.02

Corrections To Be Made:	Agency Action:	
Verification of completed orientation training is needed.	Compliance Plan	
*Verification of completed training is on file with Provider.	Suggested Completion Date:	Actual Completion Date:
	11/02/2018	10/29/2018
	Status: Corrected	

38. Do the helpers have current CPR certification? 67:42:03:07.02

Corrections To Be Made:	Agency Action:	
Need verification of current CPR certification.	Compliance Plan	
*Training verification is on file for helper.	Suggested Completion Date:	Actual Completion Date:
	10/16/2018	10/29/2018
	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

Corrections To Be Made:	Agency Action:	
Need allergy plan for child with food allergy.	Compliance Plan	
*Plan is on file for child with food allergy.	Suggested Completion Date:	Actual Completion Date:
	11/02/2018	10/29/2018
	Status: Corrected	

40. Does the provider have a written emergency preparedness and response plan in place which covers all areas required to include: evacuation; relocation; shelter-in-place; lock-down procedures; procedures for communication & reunification with families; continuity of operations, accommodation of infants & toddlers; children with disabilities & children with chronic medical conditions? 67:42:03:11.03

Corrections To Be Made:	Agency Action:	
Need emergency preparedness plan for home.	Compliance Plan	
*Emergency preparedness plan is on file with Provider.	Suggested Completion Date:	Actual Completion Date:
	11/02/2018	11/30/2018
	Status: Corrected	

41. Are the helpers aware of the emergency preparedness plan and procedures? 67:42:03:11.03

Corrections To Be Made:	Agency Action:	
Review emergency preparedness plan with helper.	Compliance Plan	
*Emergency preparedness information was shared with helper.	Suggested Completion Date:	Actual Completion Date:
	11/02/2018	11/30/2018
	Status: Corrected	

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

61. Is there a fully charged, portable fire extinguisher, with minimum 2A rating, kept near the food prep area? 67:42:03:11.02

Corrections To Be Made:	Agency Action:	
Need 2A fire extinguisher in kitchen area.	Compliance Plan	
*Fire extinguisher was obtained.	Suggested Completion Date:	Actual Completion Date:
	10/16/2018	10/29/2018
	Status: Corrected	

72. Is there documentation showing pets have current vaccination records? 67:42:03:22

Corrections To Be Made:	Agency Action:	
Need shot record for pet.	Compliance Plan	
*Shot record is on file with provider.	Suggested Completion Date:	Actual Completion Date:
	10/16/2018	11/30/2018
	Status: Corrected	

75. Is there an operating smoke detector with audible alarm located on each level of the home (regardless if level is used for care of children or not)? 67:42:03:11.02

Corrections To Be Made:	Agency Action:	
Need operating smoke detector on uppermost level.	Compliance Plan	
*Operating smoke detector installed.	Suggested Completion Date:	Actual Completion Date:
	10/09/2018	11/30/2018
	Status: Corrected	

D. Health & Safety Features of the Home - Outdoor Environmental Observations

81. Is the outside play area free of litter, trash, weeds and other hazardous materials? 67:42:03:17

Corrections To Be Made:	Agency Action:	
Remove rain water from outdoor toys (potential drowning hazard).	Compliance Plan	
*Water was removed from toys.	Suggested Completion Date:	Actual Completion Date:
	10/03/2018	10/03/2018
	Status: Corrected	

Sarah Mann

Provider Signature

10/02/2018

Date

Deb Bigge

Inspector Signature

10/02/2018

Date