

Family Day Care Inspection Compliance Plan

Provider's Name: **SARAH WHEATON**

City: **Belle Fourche**

Provider Number: **016597919**

Inspector: **Lori Janssen**

Date of Inspection: **06/06/2019**

Time of Inspection: **9:36 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

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

Corrections To Be Made:

DG - Three References

Agency Action:

Compliance Plan

Suggested
Completion
Date:

06/20/2019

Actual
Completion
Date:

06/11/2019

Status: **Corrected**

Sarah Wheaton

Provider Signature

06/06/2019

Date

Lori Janssen

Inspector Signature

06/06/2019

Date