

Family Day Care Inspection Compliance Plan

Provider's Name: **JAMIE PHILLIPS**

City: **Rapid City**

Provider Number: **016598664**

Inspector: **Lori Janssen**

Date of Inspection: **06/25/2019**

Time of Inspection: **9:35 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

Corrections To Be Made:

PD - Immunization Records
SD - Immunization Records
KW - Immunization Records

Agency Action:

Compliance Plan

Suggested
Completion
Date:

07/12/2019

Actual
Completion
Date:

07/08/2019

Status: **Corrected**

Jamie Phillips

Provider Signature

06/25/2019

Date

Lori Janssen

Inspector Signature

06/25/2019

Date