

Family Day Care Inspection Compliance Plan

Provider's Name: **Susanne Davis**

City: **Box Elder**

Provider Number: **016598710**

Inspector: **Terra Robbins**

Date of Inspection: **07/10/2019**

Time of Inspection: **9:45 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

34. Has the provider completed six hours of training in at least three topic areas in the past year? Of those hours, only three are limited to reading or watching TV or video etc. 67:42:03:07.02

<p>Corrections To Be Made:</p> <p>Provider only had 2 hours of documented training in 2018, however, already has 6.5 hours of training in 2019. Provider must complete 6 hours of training every year.</p> <p>*Provider sent verification of 6 hours of training at Early Childhood Connection in 2018.</p>	<p>Agency Action:</p> <p>Compliance Plan</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Suggested Completion Date:</td> <td style="width: 50%; border: none;">Actual Completion Date:</td> </tr> <tr> <td style="border: none;">07/10/2019</td> <td style="border: none;">07/11/2019</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	07/10/2019	07/11/2019
Suggested Completion Date:	Actual Completion Date:				
07/10/2019	07/11/2019				

Susanne Davis

07/10/2019

Provider Signature

Date

Terra Robbins

07/10/2019

Inspector Signature

Date