

Family Day Care Inspection Compliance Plan

Provider's Name: **Silvia Grohs**

City: **Huron**

Provider Number: **017504984**

Inspector: **Deb Bigge**

Date of Inspection: **11/04/2019**

Time of Inspection: **1:12 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

<p>Corrections To Be Made:</p> <p>HB - Immunization Records IJ - Immunization Records LR - 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;">11/18/2019</td> <td style="text-align: center;">01/02/2020</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	11/18/2019	01/02/2020
Suggested Completion Date:	Actual Completion Date:				
11/18/2019	01/02/2020				

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

<p>Corrections To Be Made:</p> <p>SG - CPR, Training</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;">12/04/2019</td> <td style="text-align: center;">12/12/2019</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	12/04/2019	12/12/2019
Suggested Completion Date:	Actual Completion Date:				
12/04/2019	12/12/2019				

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

Corrections To Be Made:	Agency Action:	
4 hours of training are needed for 2018.	Compliance Plan	
*Training hours were verified complete.	Suggested Completion Date:	Actual Completion Date:
	12/04/2019	12/16/2019
	Status: Corrected	

37. Does the provider have a current CPR certification? 67:42:03:07.02

Corrections To Be Made:	Agency Action:	
Need current CPR certification.	Compliance Plan	
*CPR certification was completed on 12/12/2019.	Suggested Completion Date:	Actual Completion Date:
	12/04/2019	12/16/2019
	Status: Corrected	

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

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

Corrections To Be Made:	Agency Action:	
Need current shot record for dog.	Compliance Plan	
Current shot records for dog are on file.	Suggested Completion Date:	Actual Completion Date:
	11/18/2019	12/16/2019
	Status: Corrected	

74. If caring for children under 4 yrs. of age, are all unused electrical wall sockets covered?
67:42:03:11.07

<p>Corrections To Be Made:</p> <p>Cover all unused wall sockets.</p> <p>*Unused sockets were covered.</p>	<p>Agency Action:</p> <p>Compliance Plan</p> <p>Suggested Completion Date:</p> <p>11/05/2019</p> <p>Status: Corrected</p>	<p>Actual Completion Date:</p> <p>11/05/2019</p>
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D. Health & Safety Features of the Home - Outdoor Environmental Observations

90. Did the Provider obtain orientation training in the topic of child development by 11/30/2018?

<p>Corrections To Be Made:</p> <p>Verification of child development orientation training topic is needed.</p> <p>*Training was completed.</p>	<p>Agency Action:</p> <p>Compliance Plan</p> <p>Suggested Completion Date:</p> <p>12/04/2019</p> <p>Status: Corrected</p>	<p>Actual Completion Date:</p> <p>01/02/2020</p>
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Silvia Grohs

 Provider Signature

11/04/2019

 Date

Deb Bigge

 Inspector Signature

11/04/2019

 Date