

Family Day Care Inspection Compliance Plan

Provider's Name: **Silvia Grohs**

City: **Huron**

Provider Number: **017504984**

Inspector: **Carrie Lewis**

Date of Inspection: **07/30/2020**

Time of Inspection: **8:25 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>CC - Information Sheet, Emergency Contact, Emergency Permission PE - Enrollment Date, Information Sheet, Immunization Records EF - Enrollment Date, Information Sheet, Emergency Contact, Emergency Permission, Immunization Records IJ - Immunization Records BM - Immunization Records NOM - Information Sheet, Emergency Contact, Emergency Permission LR - Immunization Records CW - Immunization Records</p>	<p>Agency Action:</p> <p>Compliance Plan</p> <table border="0"> <tr> <td style="text-align: right;">Suggested Completion Date:</td> <td style="text-align: right;">Actual Completion Date:</td> </tr> <tr> <td style="text-align: right;">08/30/2020</td> <td style="text-align: right;">08/31/2020</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	08/30/2020	08/31/2020
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08/30/2020	08/31/2020				

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>Required in-service training is not compliant. Please forward in-service training documentation to the appropriate DSS advisor when obtained.</p> <p>*Verification of sufficient training hours for 2019 was received.</p>	<p>Agency Action:</p> <p>Compliance Plan</p> <table border="0"> <tr> <td style="text-align: right;">Suggested Completion Date:</td> <td style="text-align: right;">Actual Completion Date:</td> </tr> <tr> <td style="text-align: right;">08/30/2020</td> <td style="text-align: right;">08/31/2020</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	08/30/2020	08/31/2020
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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:	
No written emergency preparedness and response plan could be produced at the time of inspection.	Compliance Plan	
*The Provider located plan that was previously completed and has on file in her home.	Suggested Completion Date:	Actual Completion Date:
	08/30/2020	08/28/2020
	Status: Corrected	

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

69. Is the hot water temperature at hand washing sinks maintained at 120 degrees or lower? 67:42:03:11.05

Corrections To Be Made:	Agency Action:	
The hot water temperature in the bathroom measured at 123F.	Compliance Plan	
*The hot water temperature was lowered to assure it is maintained at 120 degrees F or cooler.	Suggested Completion Date:	Actual Completion Date:
	08/01/2020	07/30/2020
	Status: Corrected	

Silvia Grohs
Provider Signature

07/30/2020
Date

Carrie Lewis
Inspector Signature

07/30/2020
Date