

# Family Day Care Inspection Compliance Plan

Provider's Name: **Nancy Kraayenhof**

City: **Sioux Falls**

Provider Number: **018026095**

Inspector: **Kelly Gnat**

Date of Inspection: **05/29/2019**

Time of Inspection: **3:30 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

Corrections To Be Made:

**MC - Immunization Records  
HL - Immunization Records**

Agency Action:

### Compliance Plan

Suggested  
Completion  
Date:

**06/30/2019**

Actual  
Completion  
Date:

**07/08/2019**

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:

**Nancy could not find a copy of the shot records.**

**\*Pet vaccination records received.**

Agency Action:

### Compliance Plan

Suggested  
Completion  
Date:

**06/30/2019**

Actual  
Completion  
Date:

**07/08/2019**

Status: **Corrected**

## 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?

Corrections To Be Made:

**Must complete the orientation class added to be done by November 2018 on the topic of Child Development.**

**\*Orientation training completed.**

Agency Action:

### Compliance Plan

Suggested  
Completion  
Date:

**06/30/2019**

Actual  
Completion  
Date:

**07/09/2019**

Status: **Corrected**

**Nancy Kraayenhof**

Provider Signature

**05/29/2019**

Date

**Kelly Gnat**

Inspector Signature

**05/29/2019**

Date