

Family Day Care Inspection Compliance Plan

Provider's Name: **Nicole Stoterau**

City: **Garretson**

Provider Number: **018041872**

Inspector: **Rita Trager**

Date of Inspection: **10/22/2019**

Time of Inspection: **7:57 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>Documentation of training hours to be provided. *Documentation received on 10/30/19.</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;">11/01/2019</td> <td style="text-align: center;">10/30/2019</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	11/01/2019	10/30/2019
Suggested Completion Date:	Actual Completion Date:				
11/01/2019	10/30/2019				

36. Have all helpers completed six hours of training in at least three separate topic areas in the past year? 67:42:03:07.02

<p>Corrections To Be Made:</p> <p>Documentation of training hours to be provided. *Documentation received 10/30/19</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;">11/01/2019</td> <td style="text-align: center;">10/30/2019</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	11/01/2019	10/30/2019
Suggested Completion Date:	Actual Completion Date:				
11/01/2019	10/30/2019				

38. Do the helpers have current CPR certification? 67:42:03:07.02

<p>Corrections To Be Made:</p> <p>Documentation was not available at the time of the inspection. *Documentation received on 10/22/2019.</p>	<p>Agency Action:</p> <p>Compliance Plan</p> <table> <tr> <td>Suggested Completion Date:</td> <td>Actual Completion Date:</td> </tr> <tr> <td>11/01/2019</td> <td>10/22/2019</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	11/01/2019	10/22/2019
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11/01/2019	10/22/2019				

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>Documentation of child development training from D2L website to be provided. *Documentation received on 10/23/19.</p>	<p>Agency Action:</p> <p>Compliance Plan</p> <table> <tr> <td>Suggested Completion Date:</td> <td>Actual Completion Date:</td> </tr> <tr> <td>11/01/2019</td> <td>10/23/2019</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	11/01/2019	10/23/2019
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Nicole Staterau

 Provider Signature

10/22/2019

 Date

Rita Trager

 Inspector Signature

10/22/2019

 Date