

Family Day Care Inspection Compliance Plan

Provider's Name: **Kathleen Hauge**

City: **Brandon**

Provider Number: **010601030**

Inspector: **Rita Trager**

Date of Inspection: **08/16/2018**

Time of Inspection: **8:30 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

Corrections To Be Made:	Agency Action:	
AP - Emergency Permission TR - Emergency Contact, Immunization Records	Compliance Plan	
*Updated information received.	Suggested Completion Date: 08/31/2018	Actual Completion Date: 08/24/2018
	Status: Corrected	

Kathy Hauge

Provider Signature

08/16/2018

Date

Rita Trager

Inspector Signature

08/16/2018

Date