

Family Day Care Inspection Compliance Plan

Provider's Name: **Kimberly Hudson**

City: **Pierre**

Provider Number: **010604726**

Inspector: **Brenda Sharkey**

Date of Inspection: **01/16/2020**

Time of Inspection: **9:41 AM**

The items listed below are those that the provider was not in compliance with at the time of the inspection.

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:

**Water temperature was 125 degrees
CORRECTION: Provider submitted verification of water temperature at 118 degrees.**

Agency Action:

Compliance Plan

Suggested
Completion
Date:

Actual
Completion
Date:

01/31/2020

01/29/2020

Status: **Corrected**

Kim Hudson

Provider Signature

01/16/2020

Date

Brenda Sharkey

Inspector Signature

01/16/2020

Date