

Family Day Care Inspection Compliance Plan

Provider's Name: **Ashley Mischke**

City: **Watertown**

Provider Number: **011516030**

Inspector: **Kelly Gnat**

Date of Inspection: **10/01/2020**

Time of Inspection: **1:58 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: TB - Immunization Records WP - Immunization Records	Agency Action: Compliance Plan <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Suggested Completion Date:</td> <td style="width: 50%; border: none;">Actual Completion Date:</td> </tr> <tr> <td style="border: none;">10/16/2020</td> <td style="border: none;">10/05/2020</td> </tr> </table> Status: Corrected	Suggested Completion Date:	Actual Completion Date:	10/16/2020	10/05/2020
Suggested Completion Date:	Actual Completion Date:				
10/16/2020	10/05/2020				

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: Ashley will call Amber when the email shows up. Provider emailed pet records to show immunizations are up to date.	Agency Action: Compliance Plan <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Suggested Completion Date:</td> <td style="width: 50%; border: none;">Actual Completion Date:</td> </tr> <tr> <td style="border: none;">10/16/2020</td> <td style="border: none;">10/28/2020</td> </tr> </table> Status: Corrected	Suggested Completion Date:	Actual Completion Date:	10/16/2020	10/28/2020
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10/16/2020	10/28/2020				

Ashley Mischke

Provider Signature

10/01/2020

Date

Kelly Gnat

Inspector Signature

10/01/2020

Date