

Family Day Care Inspection Compliance Plan

Provider's Name: **Bev Longe**

City: **Lake Andes**

Provider Number: **014512327**

Inspector: **Deb Bigge**

Date of Inspection: **05/08/2018**

Time of Inspection: **10:53 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:	
EFH - Immunization Records HK - Immunization Records LK - Immunization Records RR - Immunization Records	Compliance Plan	
	Suggested Completion Date:	Actual Completion Date:
	05/22/2018	06/29/2018
	Status: Corrected	

32. Do provider and helper records contain all required information? 67:42:03:07.03

Corrections To Be Made:	Agency Action:	
GL - C A/N Report Statement	Compliance Plan	
	Suggested Completion Date:	Actual Completion Date:
	05/15/2018	05/15/2018
	Status: Corrected	

D. Health & Safety Features of the Home - Outdoor Environmental Observations

82. Is playground equipment properly installed, in good repair, without sharp or protruding edges?
67:42:03:17

Corrections To Be Made:	Agency Action:	
Remove remains of broken piece of equipment on middle swing set.	Compliance Plan	
	Suggested Completion Date:	Actual Completion Date:
	05/15/2018	05/30/2018
	Status: Corrected	

Bev Longe

Provider Signature

05/08/2018

Date

Deb Bigge

Inspector Signature

05/08/2018

Date