

# Family Day Care Inspection Compliance Plan

Provider's Name: **Kathryn Hendrickson**

City: **Dell Rapids**

Provider Number: **018042410**

Inspector: **Denise Ferguson**

Date of Inspection: **04/05/2019**

Time of Inspection: **6:34 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

<p>Corrections To Be Made:</p> <p><b>OB - Emergency Permission</b>  <b>GG - Immunization Records</b>  <b>KG - Immunization Records</b>  <b>LP - Immunization Records</b>  <b>FS - Immunization Records</b>  <b>AT - Immunization Records</b></p>	<p>Agency Action:</p> <p><b>Compliance Plan</b></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;"><b>04/30/2019</b></td> <td style="text-align: center;"><b>04/23/2019</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>04/30/2019</b>	<b>04/23/2019</b>
Suggested Completion Date:	Actual Completion Date:				
<b>04/30/2019</b>	<b>04/23/2019</b>				

## C. Health & Safety Features of the Home - Indoor Environmental Observations

59. Is the refrigeration temperature maintained at 41 degrees or below? 67:42:03:11.08

<p>Corrections To Be Made:</p> <p><b>Refrigerator measured at 43 degrees, must be 41 degrees or below.</b></p> <p><b>*Refrigerator has been adjusted to 40 degrees.</b></p>	<p>Agency Action:</p> <p><b>Compliance Plan</b></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;"><b>04/30/2019</b></td> <td style="text-align: center;"><b>04/23/2019</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>04/30/2019</b>	<b>04/23/2019</b>
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<b>04/30/2019</b>	<b>04/23/2019</b>				

60. Are frozen foods kept at a temperature of 0 degrees F or below? 67:42:03:11.08

<p>Corrections To Be Made:</p> <p><b>Freezer measured at 2 degrees, must be 0 degrees or below.</b></p> <p><b>*Freezer has been adjusted to -1 degrees.</b></p>	<p>Agency Action:</p> <p><b>Compliance Plan</b></p> <table> <tr> <td>Suggested Completion Date:</td> <td>Actual Completion Date:</td> </tr> <tr> <td><b>04/30/2019</b></td> <td><b>04/23/2019</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>04/30/2019</b>	<b>04/23/2019</b>
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69. Is the hot water temperature at hand washing sinks maintained at 120 degrees or lower?  
67:42:03:11.05

<p>Corrections To Be Made:</p> <p><b>Hot water measured at 124 degrees, must be 120 degrees or below.</b></p> <p><b>*Hot water has been adjusted to 119 degrees.</b></p>	<p>Agency Action:</p> <p><b>Compliance Plan</b></p> <table> <tr> <td>Suggested Completion Date:</td> <td>Actual Completion Date:</td> </tr> <tr> <td><b>04/30/2019</b></td> <td><b>04/23/2019</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>04/30/2019</b>	<b>04/23/2019</b>
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**Kathryn Hendrickson**  
\_\_\_\_\_  
Provider Signature

**04/05/2019**  
\_\_\_\_\_  
Date

**Denise Ferguson**  
\_\_\_\_\_  
Inspector Signature

**04/05/2019**  
\_\_\_\_\_  
Date