

# Family Day Care Inspection Compliance Plan

Provider's Name: **Stephanie Skyberg**

City: **Madison**

Provider Number: **010605210**

Inspector: **Ambuer Jaacks**

Date of Inspection: **02/21/2024**

Time of Inspection: **9:37 AM**

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

## B. Record Keeping/Emergency Preparedness

31. Does each child's record contain all required information? 67:42:17:42

<p>Corrections To Be Made:</p> <p><b>PS - 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>03/06/2024</b></td> <td style="text-align: center;"><b>03/22/2024</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>03/06/2024</b>	<b>03/22/2024</b>
Suggested Completion Date:	Actual Completion Date:				
<b>03/06/2024</b>	<b>03/22/2024</b>				

43. Does the provider have documentation showing two fire evacuation drills, two shelter-in-place drills, and two lockdown drills conducted in the past calendar year? 67:42:17:43

<p>Corrections To Be Made:</p> <p><b>Provider didn't have documentation of completing 2 lockdown drills in past calendar year.</b></p> <p><b>Provider must have documentation showing two fire drills, two shelter-in-place drills, and two lock-down drills that were conducted in past calendar year.</b></p> <p><b>Correction: Verification received that provider conducted a lockdown drill to be in compliance with this inspection.</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>03/06/2024</b></td> <td style="text-align: center;"><b>03/30/2024</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>03/06/2024</b>	<b>03/30/2024</b>
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<b>03/06/2024</b>	<b>03/30/2024</b>				

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

52. Is there an operating smoke detector with audible alarm located on each level of the home (regardless if level is used for care of children or not)? 67:42:17:37

Corrections To Be Made:	Agency Action:	
<b>Lower level of home didn't have an operating smoke detector at time of inspection.</b>	<b>Compliance Plan</b>	
<b>Each level of the home must have an operating smoke detector.</b>	Suggested Completion Date:	Actual Completion Date:
<b>Correction: Verification received that smoke detector has been installed and is operational.</b>	<b>03/06/2024</b>	<b>03/22/2024</b>
	Status: <b>Corrected</b>	

56. Are all walls, ceilings, floors, and equipment easily cleanable, kept clean and in good repair? 67:42:17:32

Corrections To Be Made:	Agency Action:	
<b>A part of the door frame in a bedroom used for naps is detached from the wall.</b>	<b>Compliance Plan</b>	
<b>All walls, ceilings, floors, and equipment should be maintained in good repair.</b>	Suggested Completion Date:	Actual Completion Date:
<b>Provider requesting more time to hire a contractor to complete this project.</b>	<b>04/30/2024</b>	<b>04/10/2024</b>
	Status: <b>Corrected</b>	

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

81. Is the playground equipment installed according to the manufacturer ' s instructions and in good repair? 67:42:17:35

Corrections To Be Made:	Agency Action:	
<b>Swing set needs to be anchored to the ground to prevent tipping.</b>	<b>Compliance Plan</b>	
<b>Playground equipment must be installed according to the manufacturer's instructions and be in good repair.</b>	Suggested Completion Date:	Actual Completion Date:
<b>Provider requesting more time to hire contractor to complete this project.</b>	<b>04/30/2024</b>	<b>04/10/2024</b>
	Status: <b>Corrected</b>	

**Stephanie Skyberg**  
\_\_\_\_\_  
Provider Signature

**02/21/2024**  
\_\_\_\_\_  
Date

**Ambuer Jaacks**  
\_\_\_\_\_  
Inspector Signature

**02/21/2024**  
\_\_\_\_\_  
Date