

# Facility Safety Fire & Life Safety / Environmental Health Compliance Plan

Provider's Name: **Roncalli Sonshine Patch Middle School OST**      City: **Aberdeen**

Provider Number: **011102334**

Inspector: **Clint Rux**

Date of Inspection: **09/03/2024**

Time of Inspection: **3:20 PM**

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

## A. Fire and Life Safety

16. Do all unused electrical outlets have self-closing or tamper resistant childproof electrical covers?  
67:42:17:39 NOTE: Outlet plug covers are not permitted.

<p>Corrections To Be Made:</p> <p><b>The outlets in the CavClub/SpED room are not self-closing or tamper resistant.</b></p> <p><b>The outlets must be self-closing, or tamper resistant, in the CavClub/SpED room.</b></p> <p><b>Correction: The Provider installed self- closing outlet covers on the electrical outlets in the CavClub/SpED room.</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>10/03/2024</b></td> <td style="text-align: center;"><b>09/13/2024</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>10/03/2024</b>	<b>09/13/2024</b>
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<b>10/03/2024</b>	<b>09/13/2024</b>				

**Shelby Braun**  
\_\_\_\_\_  
Provider Signature

**09/03/2024**  
\_\_\_\_\_  
Date

**Clint Rux**  
\_\_\_\_\_  
Inspector Signature

**09/03/2024**  
\_\_\_\_\_  
Date