

Family Day Care Inspection Compliance Plan

Provider's Name: **Samantha Menning**

City: **Mitchell**

Provider Number: **014511918**

Inspector: **Josh Engquist**

Date of Inspection: **11/03/2022**

Time of Inspection: **11:17 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

34. Has the provider completed six hours of training in at least three topic areas in the past year? Of those hours, only three are limited to reading or watching TV or video etc. 67:42:03:07.02

<p>Corrections To Be Made:</p> <p>Verification of sufficient training hours for 2021 could not be located during the inspection.</p> <p>Six hours of training are to be completed yearly.</p> <p>Verification of sufficient training was received.</p>	<p>Agency Action:</p> <p>Compliance Plan</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;">12/02/2022</td> <td style="text-align: center;">11/29/2022</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	12/02/2022	11/29/2022
Suggested Completion Date:	Actual Completion Date:				
12/02/2022	11/29/2022				

Samantha Menning

Provider Signature

11/03/2022

Date

Josh Engquist

Inspector Signature

11/03/2022

Date