

Family Day Care Inspection Compliance Plan

Provider's Name: **Ashley Cortney**

City: **Edgemont**

Provider Number: **016598433**

Inspector: **Tina Uecker**

Date of Inspection: **04/11/2023**

Time of Inspection: **12:30 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

Corrections To Be Made:

Children's records did not have an emergency medical consent. This must be obtained for all children in care.

***Provider sent in verification that emergency medical consents were signed.**

Agency Action:

Compliance Plan

Suggested
Completion
Date:

04/30/2023

Actual
Completion
Date:

04/20/2023

Status: **Corrected**

Ashley Cortney

Provider Signature

04/21/2023

Date

Tina Uecker

Inspector Signature

04/21/2023

Date