

Family Day Care Inspection Compliance Plan

Provider's Name: **Diane Wiltse**

City: **Sioux Falls**

Provider Number: **018042151**

Inspector: **Sarah Boese**

Date of Inspection: **09/29/2023**

Time of Inspection: **2:54 PM**

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

Corrections To Be Made:

AS - Immunization Records

Agency Action:

Compliance Plan

Suggested
Completion
Date:

10/06/2023

Actual
Completion
Date:

10/03/2023

Status: **Corrected**

Diane Wiltse

Provider Signature

09/29/2023

Date

Sarah Boese

Inspector Signature

09/29/2023

Date