Family Day Care Inspection
Compliance Plan

Provider's Name:	**Nichole Deknikker**	City:	**Sioux Falls**	Provider Number:	**018042180**
Inspector:	**Rita Trager**	Date of Inspection:	**03/15/2024**	Time of Inspection:	**9:09 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

Corrections To Be Made:

RM - Immunization Records
AP - Immunization Records
AP - Immunization Records

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
03/31/2024	**03/19/2024**

Status: **Corrected**

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

Corrections To Be Made:

Documentation showing a lock down drill is not available.

Provider to complete one lock down drill and date provide to OLA.

***Correction: lock down drill completed on 03/18/2024**

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
03/31/2024	**03/19/2024**

Status: **Corrected**

Nichole Deknikker	**03/15/2024**	**Rita Trager**	**03/15/2024**
Provider Signature	Date	Inspector Signature	Date