

Family Day Care Inspection Compliance Plan

Provider's Name: **Shelby Rieger**

City: **Tea**

Provider Number: **018042875**

Inspector: **Renee Strong**

Date of Inspection: **08/28/2023**

Time of Inspection: **10:55 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:	Agency Action:	
LB - Immunization Records	Compliance Plan	
	Suggested Completion Date:	Actual Completion Date:
	09/07/2023	08/29/2023
	Status: Corrected	

Shelby Rieger

Provider Signature

08/28/2023

Date

Renee Strong

Inspector Signature

08/28/2023

Date