

# Family Day Care Inspection Compliance Plan

Provider's Name: **Penny Baker**

City: **Sioux Falls**

Provider Number: **018042935**

Inspector: **Rita Trager**

Date of Inspection: **07/12/2024**

Time of Inspection: **7:55 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

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:

**Provder does not have documentation of one lock down drill conducted in the past calendar year.**

**Documentation of one lock down drill to be provided to Office of License and Accreditation.**

**\*Correction: documentation received.**

Agency Action:

**Compliance Plan**

Suggested  
Completion  
Date:

**08/11/2024**

Actual  
Completion  
Date:

**07/24/2024**

Status: **Corrected**

## C. Health and Safety Features of the Home- Indoor Environmental Observations

78. Is there documentation showing pets have current vaccination records? 67:42:17:40

Corrections To Be Made:

**There is no documentation showing pets have current vaccination records.**

**Documentation of current vaccination records for cats to be provided to Office of Licensing and Accreditation.**

**\*Correction: copies of pet vaccination records recieved.**

Agency Action:

**Compliance Plan**

Suggested  
Completion  
Date:

**08/11/2024**

Actual  
Completion  
Date:

**07/24/2024**

Status: **Corrected**

**Penny Baker**  
\_\_\_\_\_  
Provider Signature

**07/12/2024**  
\_\_\_\_\_  
Date

**Rita Trager**  
\_\_\_\_\_  
Inspector Signature

**07/12/2024**  
\_\_\_\_\_  
Date