

# Program Inspection Before & After School Center Compliance Plan

Provider's Name: **My Tea Tykes**

City: **Tea**

Provider Number: **018042238**

Inspector: **Rita Trager**

Date of Inspection: **07/17/2018**

Time of Inspection: **8:34 AM**

The items listed below are those that the provider was not in compliance with at the time of the inspection.

## G. Record Keeping, Posting Information, Fire/Tornado Drills

34. Do staff records contain all required information? 67:42:14:23 Note: staff records are to be maintained for 6 months following the end of employment.

Corrections To Be Made:

**MM - Criminal Record Check**

Agency Action:

**Compliance Plan**

Suggested  
Completion  
Date:

Actual  
Completion  
Date:

**08/09/2018**

**09/04/2018**

Status: **Corrected**

## Miscellaneous Rule Violations

61:15:05:07 - Interior finish.

Corrections To Be Made:

**Wall outside of Game Room to be in good repair**

Agency Action:

**Compliance Plan**

Suggested  
Completion  
Date:

Actual  
Completion  
Date:

**08/09/2018**

**09/04/2018**

Status: **Corrected**

67:42:03:11.09 - Insect and rodent control.

Corrections To Be Made: <b>Window in School Room is cracked. To be repaired or replaced.</b>	Agency Action: <b>Letter of Notification</b> Suggested Completion Date: <b>08/09/2018</b> Actual Completion Date: <b>10/29/2018</b> Status: <b>Corrected</b>
---	--

**Mary Konvalin**  
\_\_\_\_\_  
Provider Signature

**07/17/2018**  
\_\_\_\_\_  
Date

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

**07/17/2018**  
\_\_\_\_\_  
Date