

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: **07/17/2019**

Time of Inspection: **9:37 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

37. Do child records contain all required information? 67:42:16:13 Note: child records are to be retained for 6 months after the care of the child ceases.

<p>Corrections To Be Made:</p> <p>EP - Immunization Records</p>	<p>Agency Action:</p> <p>Compliance Plan</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Suggested Completion Date:</td> <td style="width: 50%;">Actual Completion Date:</td> </tr> <tr> <td style="text-align: center;">07/31/2019</td> <td style="text-align: center;">07/19/2019</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	07/31/2019	07/19/2019
Suggested Completion Date:	Actual Completion Date:				
07/31/2019	07/19/2019				

Mary Konvalin

Provider Signature

07/17/2019

Date

Rita Trager

Inspector Signature

07/17/2019

Date