

# Program Inspection Licensed Day Care Programs Compliance Plan

Provider's Name: **Building Blocks CC and LC**

City: **Brandon**

Provider Number: **018042534**

Inspector: **Rita Trager**

Date of Inspection: **11/08/2018**

Time of Inspection: **8:29 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 and Fire & Tornado Drills

40. Are staff records complete? 67:42:10:09 Note: Staff records are to be maintained at the facility for 6 months following the end of employment.

### Corrections To Be Made:

**AF - Criminal Record Check**  
**TG - Training**  
**KH - Criminal Record Check**  
**SJ - Criminal Record Check**  
**GK - Criminal Record Check**  
**HL - Criminal Record Check**  
**MM - Criminal Record Check**  
**MR - Criminal Record Check**  
**MS - Training**  
**MW - CPR, Training**

### Agency Action:

#### Compliance Plan

Suggested  
Completion  
Date:

**12/08/2018**

Status: **Corrected**

Actual  
Completion  
Date:

**12/10/2018**

**Beth Hanna**

Provider Signature

**11/08/2018**

Date

**Rita Trager**

Inspector Signature

**11/08/2018**

Date