

# Program Inspection Before & After School Center Compliance Plan

Provider's Name: **EMBE Harrisburg Freedom OST** City: **Harrisburg**

Provider Number: **018042556**

Inspector: **Rita Trager**

Date of Inspection: **03/22/2018**

Time of Inspection: **1:50 PM**

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.

<p>Corrections To Be Made:</p> <p><b>AG - Sex Offender Registry Check, Criminal Record Check</b></p>	<p>Agency Action:</p> <p><b>Compliance Plan</b></p> <table style="width: 100%;"> <tr> <td style="width: 50%;">Suggested Completion Date:</td> <td style="width: 50%;">Actual Completion Date:</td> </tr> <tr> <td style="text-align: center;"><b>03/15/2018</b></td> <td style="text-align: center;"><b>03/20/2018</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>03/15/2018</b>	<b>03/20/2018</b>
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<b>03/15/2018</b>	<b>03/20/2018</b>				

## I. Written Procedures

42. Does the program have a written emergency preparedness and response plan in place which covers all areas required to include: evacuation; relocation; shelter-in-place; lock-down procedures; procedures for communication and reunification with families; continuity of operations, children with disabilities and children with chronic medical conditions? 67:42:14:16

Corrections To Be Made:

**Need to add information about children and or staff with disabilities.**

Agency Action:

**Compliance Plan**

Suggested  
Completion  
Date:

**04/16/2018**

Actual  
Completion  
Date:

**03/26/2018**

Status: **Corrected**

## Miscellaneous Rule Violations

67:42:03:19 - Handwashing.

Corrections To Be Made:

**Children must wash hands before eating snack. To start immediately.**

Agency Action:

**Compliance Plan**

Suggested  
Completion  
Date:

**03/22/2018**

Actual  
Completion  
Date:

**03/22/2018**

Status: **Corrected Immediately**

**Phyllis Appel**

Provider Signature

**03/22/2018**

Date

**Rita Trager**

Inspector Signature

**03/22/2018**

Date