

# Compliance Monitoring Report Compliance Plan

Provider's Name: **Little Tikes Daycare**

City: **Alexandria**

Provider Number: **014512098**

Inspector: **Deb Bigge**

Date of Visit/Report: **05/29/2019**

Time of Visit/Report: **11:37 AM**

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

## Miscellaneous Rule Violations

67:42:10:02.01 - Qualifications for individual responsible for program planning and staff supervision.

<p>Issue/Corrections To Be Made:</p> <p><b>Qualifications for individual responsible for program planning and staff supervision--This program does not currently have a person employed that meets the rule requirements.</b></p> <p><b>All licensed programs are to have an individual responsible for planning and implementing the program of the day care and for supervising staff.</b></p> <p><b>A corrective action plan has been implemented for the director of this program to obtain the qualifications required as outlined in rule or to have someone hired that meets the qualifications no later than 10/31/19.</b></p>	<p>Agency Action:</p> <p><b>Corrective Action Plan</b></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;"><b>10/31/2019</b></td> <td style="text-align: center;"><b>10/29/2019</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>10/31/2019</b>	<b>10/29/2019</b>
Suggested Completion Date:	Actual Completion Date:				
<b>10/31/2019</b>	<b>10/29/2019</b>				

**Jolene Kayser**

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Provider Signature

\_\_\_\_\_  
Date

**Deb Bigge**

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Inspector Signature

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Date