

# Program Inspection Before & After School Center Compliance Plan

Provider's Name: **Douglas School - Francis Case** City: **Box Elder**

Provider Number: **016598591**

Inspector: **Tina Uecker**

Date of Inspection: **04/29/2019**

Time of Inspection: **3:00 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.

Corrections To Be Made:

**SB - Three References, C A/N Report Statement**

Agency Action:

### Compliance Plan

Suggested  
Completion  
Date:

**05/01/2019**

Actual  
Completion  
Date:

**05/20/2019**

Status: **Corrected**

**Deanne Mulvehill**

Provider Signature

**04/29/2019**

Date

**Tina Uecker**

Inspector Signature

**04/29/2019**

Date