

# Program Inspection Licensed Day Care Programs Compliance Plan

Provider's Name: **Imagination Station Preschool**      City: **Black Hawk**      Provider Number: **016598698**  
 Inspector: **Lori Janssen**      Date of Inspection: **06/01/2020**      Time of Inspection: **8:19 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

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.

<p>Corrections To Be Made:</p> <p><b>AB - CPR</b>  <b>EF - Central Registry Check, Sex Offender Registry Check, Criminal Record Check, Timely Orientation, CPR</b></p>	<p>Agency Action:</p> <p><b>Compliance 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>06/30/2020</b></td> <td style="text-align: center;"><b>06/24/2020</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>06/30/2020</b>	<b>06/24/2020</b>
Suggested Completion Date:	Actual Completion Date:				
<b>06/30/2020</b>	<b>06/24/2020</b>				

**Sammi Moen**  
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 Provider Signature

**06/01/2020**  
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 Date

**Lori Janssen**  
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 Inspector Signature

**06/01/2020**  
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 Date