## Compliance Monitoring Report Compliance Plan

Provider's Name: The Learning Bridge City: Bridgewater Provider Number: 018038631

Inspector: **Deb Bigge** Date of Visit/Report: **06/24/2019** Time of Visit/Report: **4:42 PM** 

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

67:42:10:02.01 - Q	ualifications for individua	al responsible for progran	n planning and s	staff supervision
Issue/Corrections To Be Made:			Agency Action:	
Qualifications for individual responsible for program planning and staff supervision-This program does not currently have a person employed that meets the rule requirements.			Letter of Notification  Suggested Actual Completion Completion	
All licensed programs are to have an individual responsible for and implementing the program of the day care and for supervisit			Date:	Date: <b>09/04/2020</b>
A 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 12/31/2020.			Status: Corrected	
Sullivan		Deb Bigge		
Signature Date		Inspector Signature		Date