

Program Inspection Licensed Day Care Programs Compliance Plan

Provider's Name: **Stepping Stones Preschool Center**

City: **Hartford**

Provider Number: **018042621**

Inspector: **Denise Ferguson**

Date of Inspection: **11/04/2019**

Time of Inspection: **9:30 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 and 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>LR - Timely Orientation</p>	<p>Agency Action:</p> <p>Compliance Plan</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;">12/04/2019</td> <td style="text-align: center;">11/05/2019</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	12/04/2019	11/05/2019
Suggested Completion Date:	Actual Completion Date:				
12/04/2019	11/05/2019				

H. Insurance

42. Does the facility have documentation the program has current liability insurance coverage?
67:42:16:16

Corrections To Be Made:

Documentation of current liability insurance coverage needed. Send current documentation to CCS.

***Documentation of current liability insurance received.**

Agency Action:

Compliance Plan

Suggested
Completion
Date:

Actual
Completion
Date:

12/04/2019

11/04/2019

Status: **Corrected**

Melissa Atkins

Provider Signature

11/04/2019

Date

Denise Ferguson

Inspector Signature

11/04/2019

Date