

# Program Inspection Before & After School Center Compliance Plan

Provider's Name: **SNICKLEFRITZ SOUTH KIDS CLUB**

City: **Harrisburg**

Provider Number: **018042942**

Inspector: **Rita Trager**

Date of Inspection: **09/09/2020**

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.

## A. Program Activities, Schedule, Equipment and Supplies

2. Are activity plans in writing and posted in the facility? 67:42:14:15

<p>Corrections To Be Made:</p> <p><b>Need updated activity plan for September</b> *Updated plan observed at the center on 09/17/2020</p>	<p>Agency Action:</p> <p><b>Compliance Plan</b></p> <table border="0"> <tr> <td style="padding-right: 20px;">Suggested Completion Date:</td> <td>Actual Completion Date:</td> </tr> <tr> <td style="padding-right: 20px;"><b>09/15/2020</b></td> <td><b>09/17/2020</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>09/15/2020</b>	<b>09/17/2020</b>
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<b>09/15/2020</b>	<b>09/17/2020</b>				

## J. Written Program Policies

57. Is there written policies related to prevention and response to an emergency due to a food or allergic reaction? 67:42:14:16

<p>Corrections To Be Made:</p> <p><b>Need written plan for food allergies for enrolled children that have them</b> *Plan observed on 09/17/2020</p>	<p>Agency Action:</p> <p><b>Compliance Plan</b></p> <table border="0"> <tr> <td style="padding-right: 20px;">Suggested Completion Date:</td> <td>Actual Completion Date:</td> </tr> <tr> <td style="padding-right: 20px;"><b>09/15/2020</b></td> <td><b>09/17/2020</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>09/15/2020</b>	<b>09/17/2020</b>
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**Karli Dubro**

Provider Signature

**09/10/2020**

Date

**Rita Trager**

Inspector Signature

**09/10/2020**

Date