

Program Inspection Compliance Plan

Provider's Name: **Ipswich Tiger Post ECE Inc.**

City: **Ipswich**

Provider Number: **011100998**

Inspector: **Julie Hermansen**

Date of Inspection: **08/01/2024**

Time of Inspection: **12:03 PM**

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

Posting Information/ Emergency Preparedness/ Record Keeping/ Provider C. Qualifications

36. Do children ' s records include names of authorized individuals to pick up the children; health information including allergies or special needs; start and end date of enrollment? 67:42:17:42

<p>Corrections To Be Made:</p> <p>The children's records didn't include names of individuals authorized to pick up the children.</p> <p>The children's records need to include names of individuals authorized to pick up the children.</p> <p>Correction: The names of individuals authorized to pick up the children was added to children's records.</p>	<p>Agency Action:</p> <p>Compliance Plan</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;">08/21/2024</td> <td style="text-align: center;">08/08/2024</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	08/21/2024	08/08/2024
Suggested Completion Date:	Actual Completion Date:				
08/21/2024	08/08/2024				

39. Do employee records contain all required information? 67:42:17:15

<p>Corrections To Be Made:</p> <p>JB - CPR</p> <p>SD - DCI Check, Orientation Complete</p> <p>IF - Orientation Complete</p> <p>BG - Sex Offender Registry Check, FBI Check, DCI Check, NCIC Check</p> <p>MG - Orientation Complete, Training</p> <p>KG - Orientation Complete</p> <p>AH - DCI Check, Orientation Complete</p> <p>PL - DCI Check</p> <p>JS - DCI Check, CPR, Training</p>	<p>Agency Action:</p> <p>Compliance Plan</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;">08/31/2024</td> <td style="text-align: center;">09/30/2024</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	08/31/2024	09/30/2024
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Hannah Holsing

Provider Signature

08/01/2024

Date

Julie Hermansen

Inspector Signature

08/01/2024

Date