

Program Inspection Compliance Plan

Provider's Name: **Sprouts Community Daycare**

City: **Summit**

Provider Number: **011102493**

Inspector: **Julie Hermansen**

Date of Inspection: **08/30/2023**

Time of Inspection: **1:40 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

35. Does each child ' s record contain all required information? 67:42:17:42

Corrections To Be Made:	Agency Action:	
EB - Immunization Records ZC - Immunization Records BR - Immunization Records	Compliance Plan	
	Suggested Completion Date:	Actual Completion Date:
	09/28/2023	10/17/2023
	Status: Corrected	

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

Corrections To Be Made:	Agency Action:	
EL - CPR MZ - CPR	Compliance Plan	
	Suggested Completion Date:	Actual Completion Date:
	09/28/2023	10/20/2023
	Status: Corrected	

Tiffany Tschakert

Provider Signature

09/14/2023

Date

Julie Hermansen

Inspector Signature

09/14/2023

Date