

# Complaint Inspection Compliance Plan

**Provider's Name:** Tiger Den Kiddie Care

**City:** Ipswich

**Provider Number:** 011102549

**Provider Type:** DCC

**Date Agency Action Issued:** 10/06/2022

The provider was found to not be in compliance with the following items.

## **67:42:10:07 - Staff-child ratio.**

### **Summary of Compliance Issue:**

Ratio – Staff to Child Ratio not maintained.

Program needs to maintain ratios at all times.

The Office of Licensing & Accreditation has implemented a Corrective Action Plan with the program and will continue to monitor until 12/31/22.

**Status:** Founded

**Agency Action:** Corrective Action Plan

## **67:42:03:23 - Sleeping arrangements.**

### **Summary of Compliance Issue:**

Safe Sleep – a safe sleep environment was not utilized with infants in care.

Blankets were immediately removed from the sleep environment.

Porogram staff will obtain additional training in this topic area no later than 12/30/22. The Office of Licensing & Accreditation has implemented a Corrective Action Plan with the program and will continue to monitor until 12/31/22.

**Status:** Founded

**Agency Action:** Corrective Action Plan

**67:42:10:09 - Staff records and hiring requirements.**

**Summary of Compliance Issue:**

Staff Records - A volunteer/substitute staff didn't have a completed staff record on file with the program.

The program will maintain a file on all staff including volunteers and substitutes.

The director will review all staff/volunteer/substitute files to ensure compliance is maintained. The Office of Licensing & Accreditation has implemented a Corrective Action Plan with the program and will continue to monitor until 12/31/22.

**Status:** Founded

**Agency Action:** Corrective Action Plan

**67:42:16:04 - Background check.**

**Summary of Compliance Issue:**

Background Check - A volunteer/substitute staff didn't have a background check on file with the program.

The program will maintain a file, including background checks, on all staff, volunteers and substitutes.

The director will review all staff/volunteer/substitute files to ensure compliance is maintained. The Office of Licensing & Accreditation has implemented a Corrective Action Plan with the program and will continue to monitor until 12/31/22.

**Status:** Founded

**Agency Action:** Corrective Action Plan