

Program Inspection Compliance Plan

Provider's Name: **Marion School District Bear Care Program** City: **Marion**

Provider Number: **014512632**

Inspector: **Deb Bigge**

Date of Inspection: **12/06/2024**

Time of Inspection: **9:00 AM**

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

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

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

Corrections To Be Made:

LK - Enrollment Date, Information Sheet, Emergency Contact, Emergency Permission, Immunization Records
SL - Enrollment Date, Information Sheet, Emergency Contact, Emergency Permission, Immunization Records

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
12/20/2024	01/03/2025

Status: **Corrected**

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

Corrections To Be Made:

EB - Address & Phone Number, C A/N Report Statement
RS - Orientation Complete

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
12/20/2024	01/23/2025

Status: **Corrected**

42. Have providers and assistants completed orientation training within 90 days after the date of employment and before caring for children unsupervised? 67:42:17:17

Corrections To Be Made:

Verification of orientation training is needed for a provider who has unsupervised contact with children.

Orientation training must be complete within 90 days of hire and before a provider has unsupervised contact with children.

Verification of orientation training was received.

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
12/20/2024	01/23/2025

Status: **Corrected**



Provider Signature

Rita Schmidt

Name

12/06/2024

Date



Inspector Signature

Deb Bigge

Name

12/06/2024

Date