

Comments: The Assistant Care Giver's medical is expired.	
Failed - Health and Safety Training, Staff Checklist Comments: The Assistant Care Giver's Health and Safety Training is missing.	9/21/2025
Failed - Health and Safety Training, Staff Checklist Comments: The substitute's Health and Safety Training is missing.	9/21/2025
Failed - Health and Safety Training, Staff Checklist Comments: The substitute's Health and Safety Training is missing.	9/21/2025
Failed - Infant -Child CPR Certification, Staff Checklist Comments: A substitute's CPR Certification is missing.	10/1/2025
Failed - Infant -Child First Aid Certificate, Staff Checklist Comments: A substitute's First Aid Certificate is missing.	10/1/2025
Failed - Ongoing Training, Staff Checklist Comments: The substitute is missing 5 hours of Ongoing Training.	9/21/2025
Failed - Health and Safety Training, Staff Checklist Comments: The substitute is missing Health and Safety Training.	9/21/2025
All of the children are not entered into Arise., Ad Hoc Comments: NA	9/10/2025

INSTRUCTIONS TO LICENSEE: Column 2, Date Corrected by Licensee, is to be completed by the facility representative after each deficiency is corrected. The facility representative must put the date of correction and his/her initials in Column 2. This form must be returned to the Department of Human Resources on or before NA, as verification that deficiencies have been corrected.

NOTICE: Any misleading or any false statements or reports made to the Department and/or failure to correct the listed deficiencies can be the basis for adverse action. None of these requirements are to be interpreted to allow anyone to operate in violation of Performance Standards. A facility licensed by the Department must always meet Performance Standards applicable to that facility. It is the responsibility of the licensee to operate in compliance with Performance Standards.

J. Mathis
Signature of Facility Representative

10-15-2025
Date