Program Inspection Before & After School Center Compliance Plan

Provider's Name: SS. Peter & Paul OST Program City: Pierre Provider Number: 010610017

Inspector: McKenzie Date of Inspection: 01/28/2020 Time of Inspection: 3:47 PM

Hyronimus

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

B. Program Practices

11. Are medications stored inaccessible to children; in original container, with original label intact? 67:42:14:24

Corrections To Be Made: Agency Action:

Compliance Plan Epi pen is in drawer that is accessible to children.

CORRECTION: Epi pen was moved to a location inaccessible to children.

Suggested Actual Completion Completion Date: Date:

01/28/2020 02/05/2020

Status: Corrected

14. Does the program obtain written parental consent to administer medication that contains specific dates the medication is to be administered (view info. to verify)? 67:42:14:24

Corrections To Be Made: Agency Action:

Written permission for medication administration must be obtained for all medication.

CORRECTION: Written permission for medication administration was obtained for medication.

Compliance Plan

Suggested Actual Completion Completion Date: Date:

02/04/2020 02/05/2020

Status: Corrected

15. Is parental written consent for medication administration and staff documentation of administering the medication kept for six months (view info. to verify)? 67:42:14:24

Corrections To Be Made:

Written permission for medication administration must be obtained for all medication and must be kept for six months.

CORRECTION: Written permission for medication administration was obtained. The provider is aware the written permission must be obtained for six months.

Agency Action:

Compliance Plan

Suggested Completion Date:

Actual Completion Date:

02/04/2020

02/05/2020

Status: Corrected

16. Are staff and director aware of their responsibility to report suspected child abuse and neglect directly to Law Enforcement, the State's Attorney or to the Department? 67:42:14:14

Corrections To Be Made:

All staff must be aware of their responsibility to report suspected child abuse and neglect directly to Law Enforcement or Child Protection.

CORRECTION: Director advised all staff of their responbility to report suspected child abuse and neglect directly to Law Enforcement or Child Protection.

Agency Action:

Compliance Plan

Suggested Completion Date: Actual Completion Date:

02/04/2020

02/05/2020

Status: Corrected

G. Record Keeping, Posting Information, Fire/Tornado Drills

32. Does the facility have posted in a visible location a copy of the facility's latest Program \ul and\ulnone Facility Safety inspection? And if on a CAP, does facility have a copy of the plan available upon request? 67:42:16:17

Corrections To Be Made:

A copy of the facility's latest Program and Facility Safety inspection must be posted in a visible location.

CORRECTION: Provider posted a copy of the facility's latest Program and Facility Safety inspection.

Agency Action:

Compliance Plan

Suggested Completion Date:

Actual Completion Date:

01/28/2020

02/05/2020

Status: Corrected

33. Does the program have documentation 4 fire drills and 1 tornado drill were conducted in the past year? 67:42:14:28

Corrections To Be Made:

There was only 1 fire drill completed in the past year. Four fire drills and one tornado drill needs to be conducted each year.

CORRECTION: The Provider has a clear understanding of the annual fire and tornado drill requirements.

Agency Action:

Compliance Plan

Suggested Completion Date:

Actual Completion Date:

01/28/2020

01/28/2020

Status: Corrected Immediately

34. Do staff records contain all required information? 67:42:14:23 Note: staff records are to be maintained for 6 months following the end of employment.

Corrections To Be Made:

JC - Central Registry Check, Sex Offender Registry Check, Criminal Record Check, C A/N Report Statement, Timely Orientation, CPR, Training KE - Address & Phone Number, Three References, Central Registry Check, Sex Offender Registry Check, Criminal Record Check, C A/N Report

Statement, Timely Orientation, CPR, Training

KH - Address & Phone Number, Three References, Central Registry Check, Sex Offender Registry Check, Criminal Record Check, Timely Orientation,

CPR, Training

SM - Address & Phone Number, Three References, Central Registry Check,

Sex Offender Registry Check, Criminal Record Check, C A/N Report

Statement, Timely Orientation, CPR, Training

GP - Timely Orientation, Training

PP - Address & Phone Number, Central Registry Check, Timely

Orientation, CPR, Training

HS - Address & Phone Number, Central Registry Check, Timely

Orientation, Training

MS - Address & Phone Number, Three References, Central Registry Check,

Timely Orientation, CPR, Training

KV - Address & Phone Number, Three References, Timely Orientation,

Training

JW - Address & Phone Number, Central Registry Check, Sex Offender Registry Check, Criminal Record Check, C A/N Report Statement, Timely

Orientation, CPR, Training

Agency Action:

Corrective Action Plan

Suggested Completion

Date:

Actual Completion Date:

02/28/2020

05/13/2020

Status: Corrected

37. Do child records contain all required information? 67:42:16:13 Note: child records are to be retained for 6 months after the care of the child ceases.

Corrections To Be Made:

MB - Emergency Permission

AD - Emergency Permission

JF - Emergency Permission

BJ - Emergency Permission

AK - Emergency Permission AL - Emergency Permission

LS - Emergency Permission

MS - Emergency Permission

MS - Emergency Permission

QS - Emergency Permission

Agency Action:

Compliance Plan

Status: Corrected

Suggested Completion

Actual Completion

Date:

Date:

02/19/2020

02/28/2020

I. Written Procedures

41. Does program have a written plan for training staff? 67:42:14:13

The pro	ons To Be Made:		Agency Action:	
			9	
	gram does not have a written plan for trai	ning staff for 2020.	Compliance Plai	n
2020.	CTION: Provider subbmitted a written plan	n for training staff for	Suggested Completion Date:	Actual Completion Date:
			02/28/2020	02/13/2020
			Status: Correcte	ed
all areas procedui	e program have a written emergency required to include: evacuation; relo res for communication and reunificat es and children with chronic medical	ocation; shelter-in-place ion with families; conti	e; lock-down prod nuity of operation	cedures;
Correction	ons To Be Made:		Agency Action:	
respons needs to	vider does not have a written emergency e plan. A written emergency preparednes be completeed and reviewed with all sta CTION: Provider submitted verification of dness and response plan and review with	is and response plan iff. a written emergency	Compliance Plan Suggested Completion Date: 02/28/2020	Actual Completion Date: 02/13/2020
			Status: Correcte	ed
	01/28/2020	McKenzie Hyre	onimus	01/28/2020
Gay Pickner	U 1/20/2U2U	WICKELIZIE HYL		