# Program Inspection Licensed Day Care Programs Compliance Plan

Provider's Name: Faith Lutheran Day Care Center City: Pierre Provider Number: 015505944

Inspector: McKenzie Date of Inspection: 01/09/2020 Time of Inspection: 9:49 AM

**Hyronimus** 

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

## A. Program Activities, Schedule and Environment

2. Are activity plans developed and implemented that offer a variety of activities to meet the needs of various age groups? 67:42:10:10

Corrections To Be Made: Agency Action:

Current lesson plans are needed in all classrooms. Compliance Plan

CORRECTION: Provider submitted verification.

Suggested Actual

Completion Completion Date: Date:

01/23/2020 02/27/2020

Status: Corrected

8. Does the program have a written daily schedule? 67:42:10:10

Corrections To Be Made: Agency Action:

A daily schedule is needed in the Waddlers and Tadpole rooms.

Compliance Plan

CORRECTION: Provider submitted verification of daily schedules for Waddlers and Tadpole rooms.

Suggested Completion Completion

Date: Date:

01/23/2020 01/21/2020

Status: Corrected

## **B. Program Practices**

23. Are staff aware of their responsibility to report suspected child abuse and neglect directly to Law Enforcement, State's Attorney or to the Department? 67:42:10:22

Corrections To Be Made:

staff.

Agency Action:

All staff were not aware of the mandatory reporting requirements. The staff are all responsible for reporting concerns to the authorities.

**Compliance Plan** 

CORRECTION: Policy added to the employee handbook and reviewed with

Suggested Completion Date:

Actual Completion Date:

01/09/2020

02/03/2020

Status: Corrected

# G. Record Keeping, Posting Information and Fire & Tornado Drills

39. Does the program have documentation 4 fire drills and 1 tornado drill were conducted in the past year? 67:42:10:18

Corrections To Be Made:

requirements.

Agency Action:

There was not verification of documentation for 2019 fire and tornado drills.4 fire drills and 1 tornado drill need to be completed and documentated each year.

**Compliance Plan** 

CORRECTION: Provider submitted verification of 2 fire drills and 1 tornado drill beginning in July when they began their employment. The Provider has a clear understanding of the annual fire and tornado drill

Suggested Completion Date: Actual Completion Date:

01/09/2020

01/21/2020

Status: Corrected

40. Are staff records complete? 67:42:10:09 Note: Staff records are to be maintained at the facility for 6 months following the end of employment.

Corrections To Be Made: Agency Action:

**Compliance Plan** EA - Criminal Record Check, Timely Orientation, CPR, Training

**TB - Timely Orientation** 

Suggested Actual **DB - Central Registry Check, Timely Orientation** Completion **KC - Timely Orientation** Completion Date: Date:

**MC - Timely Orientation** 

TD - Central Registry Check, Criminal Record Check, Timely Orientation, 02/09/2020 03/03/2020

Status: Corrected

02/09/2020

02/18/2020

NF - Timely Orientation, Training

KG - Criminal Record Check, Timely Orientation

CJ - Timely Orientation, CPR

**KJ - Timely Orientation** 

AJ - Central Registry Check, Sex Offender Registry Check, Criminal

Record Check, Timely Orientation, CPR, Training

MK - Central Registry Check, Timely Orientation, Training

**CK - Timely Orientation, Training** 

**KL - Timely Orientation** 

LL - Timely Orientation

SL - Criminal Record Check, Timely Orientation, Training

SM - Criminal Record Check, Timely Orientation

**KM - Timely Orientation** 

**KP - Timely Orientation DS - Timely Orientation** 

AS - Training

**KS - Timely Orientation** 

MS - Timely Orientation

**DS - Timely Orientation** 

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

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

Statement, Timely Orientation, CPR, Training

41. Are children's records complete? 67:42:16:13 Note: Children's records are to be maintained at the facility for 6 months following the date care ceases.

Corrections To Be Made: Agency Action:

**Compliance Plan CC - Immunization Records** 

**BD - Enrollment Date, Emergency Permission, Immunization Records** 

Suggested Actual **LD - Immunization Records** Completion Completion **MD - Immunization Records** Date: Date:

**AG - Immunization Records GL - Enrollment Date** 

**MM - Immunization Records** 

AO - Enrollment Date, Immunization Records

AR - Enrollment Date, Emergency Contact, Immunization Records Status: Corrected

**CR - Immunization Records** 

**AS - Immunization Records** 

DT - Enrollment Date, Immunization Records

**CW - Enrollment Date, Emergency Permission** 

#### I. Written Procedures

44. Does the program have a written emergency preparedness and response plan in place which covers all areas required to include: evacuation; relocation; shelter-in-place; lock-down procedures; procedures for communication & reunification with families; continuity of operations; accommodation of infants & toddlers; children with disabilities & children with chronic medical conditions? 67:42:10:10

Corrections To Be Made:

Emergency preparedness plan needs to be updated due to a change in director. Emergency preparedness plan needs to be reviewed with all staff.

CORRECTION: Provider submitted an emergency preparedness and response plan and reviewed with staff.

Agency Action:

**Compliance Plan** 

Suggested Completion Date: Actual Completion Date:

02/09/2020 02/03/2020

Status: Corrected

# J. Written Program Policies

64. Policies related to requirement for immediate reporting of suspected child abuse or neglect to DSS or law enforcement and require staff to read and sign a statement which defines child abuse and neglect, and identifies reporting responsibilities and procedures as outlined in SDCL 26-8A-8? 67:42:10:10

Corrections To Be Made:

The written policy will be updated to state that staff will report their concerns to the authorities rather than to the director.

CORRECTION: Policy added to the employee handbook.

Agency Action:

**Compliance Plan** 

Suggested Completion Date:

Actual Completion Date:

02/09/2020

01/22/2020

Status: Corrected

70. Policies related to requirement that no staff member or volunteer will have a substantiated report of child abuse or neglect? 67:42:10:10

Corrections To Be Made: Agency Action: **Compliance Plan** There needs to be a policy that indicates that no staff member or volunteer will have a substantiated report of child abuse or neglect Suggested Actual Completion CORRECTION: Policy added to the employee handbook. Completion Date: Date: 02/09/2020 01/21/2020 Status: Corrected 71. Policies related to requirement that no staff member will have a conviction of a felony within the past

five years, a sex offense, a crime of violence, or a crime against children? 67:42:10:10

Corrections To Be Made: Agency Action:

There needs to be a policy that no staff member will have a conviction of a felony within the past five years, a sex offense, a crime of violence, or a crime against children.

CORRECTION: Policy added to the employee handbook.

Suggested Actual Completion Completion

Date: Date:

02/09/2020 01/21/2020

Status: Corrected

Compliance Plan

72. Policies related to requirement that no staff member's name will be located on the Sex Offender Registry? 67:42:10:10

Corrections To Be Made: Agency Action:

There needs to be a policy that no staff member's name will be located on the Sex Offender Registry.

CORRECTION: Policy added to the employee handbook.

**Compliance Plan** 

Suggested Actual Completion Completion Date: Date:

02/09/2020 01/21/2020

Status: Corrected

**Angela Schwartz** 01/09/2020 **McKenzie Hyronimus** 01/09/2020 **Provider Signature** Date Inspector Signature Date