

# Compliance Monitoring Report Compliance Plan

Provider's Name: **Apple Tree Valhalla**

City: **Sioux Falls**

Provider Number: **010605669**

Inspector: **Denise Ferguson**

Date of Visit/Report: **11/05/2019**

Time of Visit/Report: **4:50 PM**

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

## Miscellaneous Rule Violations

67:42:16:19 - Supervision.

Issue/Corrections To Be Made:	Agency Action:	
<b>Supervision - A child in care was not properly supervised.</b>	<b>Corrective Action Plan</b>	
<b>Program staff are responsible for the direct care, protection, guidance and supervision of every child in care.</b>	Suggested Completion Date:	Actual Completion Date:
<b>A corrective action plan has been implemented with the program to monitor compliance and ensure that children are properly supervised. Expected completion date is 4/30/20.</b>	<b>04/30/2020</b>	<b>04/30/2020</b>
	Status: <b>Corrected</b>	

\_\_\_\_\_  
Provider Signature

\_\_\_\_\_  
Date

**Denise Ferguson**

\_\_\_\_\_  
Inspector Signature

\_\_\_\_\_  
Date