

Program Inspection Licensed Day Care Programs Compliance Plan

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

City: **Sioux Falls**

Provider Number: **010605674**

Inspector: **Denise Ferguson**

Date of Inspection: **11/07/2018**

Time of Inspection: **9:04 AM**

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

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

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.

<p>Corrections To Be Made:</p> <ul style="list-style-type: none"> GB - Immunization Records LB - Immunization Records OB - Immunization Records SB - Immunization Records MG - Immunization Records 	<p>Agency Action:</p> <p>Compliance Plan</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Suggested Completion Date:</td> <td style="width: 50%;">Actual Completion Date:</td> </tr> <tr> <td style="text-align: center;">12/07/2018</td> <td style="text-align: center;">11/29/2018</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	12/07/2018	11/29/2018
Suggested Completion Date:	Actual Completion Date:				
12/07/2018	11/29/2018				

Amy Hauff

Provider Signature

11/07/2018

Date

Denise Ferguson

Inspector Signature

11/07/2018

Date