

Program Inspection Licensed Day Care Programs Compliance Plan

Provider's Name: **John Paul II Child Care Center**

City: **Mitchell**

Provider Number: **014512311**

Inspector: **Deb Bigge**

Date of Inspection: **04/26/2018**

Time of Inspection: **9:30 AM**

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

B. Program Practices

18. Does the facility obtain written parental consent to administer medications that includes specific dates the medication is to be administered (view info. to verify) ? 67:42:10:15

Corrections To Be Made:

Medication consent form to be completed every time medication is administered.

Agency Action:

Compliance Plan

Suggested
Completion
Date:

04/27/2018

Actual
Completion
Date:

04/27/2018

Status: **Corrected**

E. Nutrition and Meal Planning

33. Is a weekly menu posted that records actual food served? 67:42:10:13

Corrections To Be Made:

Weekly menu to be posted in visible location.

Agency Action:

Compliance Plan

Suggested
Completion
Date:

04/27/2018

Actual
Completion
Date:

04/27/2018

Status: **Corrected**

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

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:
SB - Training BD - Training	Compliance Plan
	Suggested Completion Date:
	Actual Completion Date:
	05/03/2018
	04/27/2018
	Status: Corrected

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:
HH - Immunization Records KM - Emergency Permission TW - Immunization Records	Compliance Plan
	Suggested Completion Date:
	Actual Completion Date:
	05/04/2018
	05/15/2018
	Status: Corrected

Robin Cahoy

Provider Signature

04/27/2018

Date

Deb Bigge

Inspector Signature

04/27/2018

Date