

Program Inspection Licensed Day Care Programs Compliance Plan

Provider's Name: **St. Mary School**

City: **Sioux Falls**

Provider Number: **018042094**

Inspector: **Denise Ferguson**

Date of Inspection: **10/16/2018**

Time of Inspection: **3:04 PM**

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

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

<p>Corrections To Be Made:</p> <p>Written Emergency Preparedness and Response Plan needed.</p> <p>*Written Emergency Preparedness and Response Plan has been created and is available at the program.</p>	<p>Agency Action:</p> <p>Compliance Plan</p> <table style="width: 100%;"> <tr> <td style="width: 50%;">Suggested Completion Date:</td> <td style="width: 50%;">Actual Completion Date:</td> </tr> <tr> <td style="text-align: center;">11/16/2018</td> <td style="text-align: center;">11/09/2018</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	11/16/2018	11/09/2018
Suggested Completion Date:	Actual Completion Date:				
11/16/2018	11/09/2018				

Jordy Bosseler

Provider Signature

10/16/2018

Date

Denise Ferguson

Inspector Signature

10/16/2018

Date