

Program Inspection Before & After School Center Compliance Plan

Provider's Name: **Kids Inc. - Hayward**

City: **Sioux Falls**

Provider Number: **018042545**

Inspector: **Stacie Ugofsky**

Date of Inspection: **09/16/2020**

Time of Inspection: **2:52 PM**

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

B. Program Practices

14. Does the program obtain written parental consent to administer medication that contains specific dates the medication is to be administered (view info. to verify)? 67:42:14:24

Corrections To Be Made:

Written parental consent to administer medication was not obtained for two medications.

Written parental consent to administer medication must contain the specific dates the medication is to be administered.

Correction: Written parental consent to administer medication was obtained for the two medications. Staff will ensure that written parental consent to administer medications is obtained before medications are administered by them.

Agency Action:

Compliance Plan

Suggested
Completion
Date:

09/20/2020

Status: **Corrected**

Actual
Completion
Date:

10/09/2020

Tera Breck

Provider Signature

09/16/2020

Date

Stacie Ugofsky

Inspector Signature

09/16/2020

Date