

Program Inspection Before & After School Center Compliance Plan

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

City: **Sioux Falls**

Provider Number: **018042547**

Inspector: **Shannon Terhark**

Date of Inspection: **06/14/2019**

Time of Inspection: **10:00 AM**

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

A. Program Activities, Schedule, Equipment and Supplies

2. Are activity plans in writing and posted in the facility? 67:42:14:15

<p>Corrections To Be Made:</p> <p>Activity plans are needed in the Rocking Reptile room.</p> <p>***The activity plans are completed and posted in the classroom.</p>	<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;">06/21/2019</td> <td style="text-align: center;">07/16/2019</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	06/21/2019	07/16/2019
Suggested Completion Date:	Actual Completion Date:				
06/21/2019	07/16/2019				

G. Record Keeping, Posting Information, Fire/Tornado Drills

34. Do staff records contain all required information? 67:42:14:23 Note: staff records are to be maintained for 6 months following the end of employment.

<p>Corrections To Be Made:</p> <p>JB - Training CD - CPR</p>	<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;">06/30/2019</td> <td style="text-align: center;">06/13/2019</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	06/30/2019	06/13/2019
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06/30/2019	06/13/2019				

37. Do child records contain all required information? 67:42:16:13 Note: child records are to be retained for 6 months after the care of the child ceases.

<p>Corrections To Be Made:</p> <p> CB - Emergency Permission LC - Emergency Permission RC - Emergency Permission WC - Emergency Contact WC - Emergency Permission BH - Emergency Permission ZH - Emergency Permission AJ - Emergency Permission EJ - Emergency Permission KJ - Emergency Permission NJ - Emergency Permission AL - Emergency Permission DM - Emergency Permission RM - Emergency Permission ER - Emergency Permission AS - Emergency Permission ES - Emergency Permission HS - Emergency Permission IS - Emergency Permission KS - Emergency Permission SS - Emergency Permission MU - Emergency Permission AV - Emergency Permission AW - Emergency Permission BW - Emergency Permission SW - Emergency Permission </p>	<p>Agency Action:</p> <p>Compliance Plan</p> <table border="0"> <tr> <td>Suggested Completion Date:</td> <td>Actual Completion Date:</td> </tr> <tr> <td>06/30/2019</td> <td>07/16/2019</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	06/30/2019	07/16/2019
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Katie Hartigan
 Provider Signature

06/14/2019
 Date

Shannon Terhark
 Inspector Signature

06/14/2019
 Date