Program Inspection Licensed Day Care Programs Compliance Plan

Provider's Name:	Truks-N-Trykes 3	City:	Sioux Falls	Provider Number:	018042842
Inspector:	Shannon Terhark	Date of Inspection:	01/29/2019	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

Compliance Plan		
Compliance Plan		
Suggested Completion Date: 01/29/2019	Actual Completion Date: 01/29/2019	
C D D	ompletion	

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:	
DL - Central Registry Check, Sex Offender Registry Check, Criminal Record Check, C A/N Report Statement BM - Three References LM - Three References, Central Registry Check, Sex Offender Registry Check, Criminal Record Check JR - Criminal Record Check, Timely Orientation, CPR	Compliance Plan Suggested Completion Date: 02/28/2019 Status: Corrected	Actual Completion Date: 04/02/2019

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:		
JB - Immunization Records RB - Enrollment Date, Emergency Permission, Immunization Records	Compliance Plan		
WB - Immunization Records ZB - Immunization Records SD - Immunization Records	Suggested Completion Date:	Actual Completion Date:	
LE - Immunization Records MF - Immunization Records RF - Immunization Records	02/28/2019	03/21/2019	
PG - Enrollment Date, Immunization Records GH - Immunization Records	Status: Corrected	ł	
AK - Immunization Records JK - Emergency Contact, Immunization Records KL - Enrollment Date, Immunization Records			
ON - Immunization Records ER - Immunization Records JS - Enrollment Date, Immunization Records			
SS - Enrollment Date, Immunization Records AT - Enrollment Date			
CT - Immunization Records HT - Immunization Records JT - Immunization Records			
OV - Immunization Records			

Sarah Johnson	01/29/2019	Shannon Terhark	01/29/2019
Provider Signature	Date	Inspector Signature	Date