Program Inspection
Compliance Plan

Provider's Name:	**USD Vucurevich Childrens Center**	City:	**Vermillion**	Provider Number:	**000097127**
Inspector:	**Rita Trager**	Date of Inspection:	**07/02/2024**	Time of Inspection:	**7:35 AM**

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

B. Provider Practices

19. Are medications returned to the parent when no longer needed or the medication has expired? 67:42:17:27

Corrections To Be Made:	Agency Action:	
Medications that are no longer needed to have not been returned to the parents. **Medications to be returned to the parents.** ***Correction: medications that were no longer needed have been returned to the parents.**	**Compliance Plan**	
	Suggested Completion Date:	Actual Completion Date:
	08/02/2024	**07/31/2024**
	Status: **Corrected**	

C. Posting Information/ Emergency Preparedness/ Record Keeping/ Provider Qualifications

35. Does each child ' s record contain all required information? 67:42:17:42

Corrections To Be Made:	Agency Action:	
LL - Immunization Records	**Compliance Plan**	
	Suggested Completion Date:	Actual Completion Date:
	08/02/2024	**07/31/2024**
	Status: **Corrected**	

39. Do employee records contain all required information? 67:42:17:15

Corrections To Be Made:	Agency Action:	
JJ - Central Registry Check **LM - Central Registry Check, Sex Offender Registry Check, FBI Check, DCI Check** **CS - Training**	**Compliance Plan**	
	Suggested Completion Date: **08/02/2024**	Actual Completion Date: **07/31/2024**
	Status: **Corrected**	

Dawna Anderson	**07/02/2024**	**Rita Trager**	**07/02/2024**
Provider Signature	Date	Inspector Signature	Date