Program Inspection Licensed Day Care Programs Compliance Plan

Provider's Name: Stepping Stones Child Care City: Pierre Provider Number: 010274633

Inspector: Tina Uecker Date of Inspection: 09/22/2022 Time of Inspection: 9:00 AM

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

G. Record Keeping, Posting Information, 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:

CL - Central Registry Check Compliance Plan

Suggested Actual
Completion Completion
Date: Date:

10/15/2022 10/05/2022

Status: Corrected

J. Written Program Policies

51. Policies related to requirement for separation of ill children and notification of parents if child is ill at the program? 67:42:10:10

Agency Action:

Compliance Plan

Program does not have a policy regarding the separation of ill children and notification of parents if the child becomes ill at the program. A policy needs to be developed and sent to the Office of Licensing and Accreditation.

Suggested Completion

Actual Completion Date:

*The program provided an updated policy to OLA.

Date: 10/15/2022

10/05/2022

Status: Corrected

52. Policies related to requirement for reporting contagious diseases to the Department of Health? 67:42:10:10

Corrections To Be Made:

The program's policy regarding reporting to contagious diseases to the Department of Health does not state who the program will report to. The policy must state that contagious diseases must be reported to the Department of Health.

*The program provided an updated policy to OLA.

Agency Action:

Compliance Plan

Suggested Completion Date:

Actual Completion Date:

10/15/2022

10/05/2022

Status: Corrected

53. Policies related to requirement for storage and administration of medication, including having written parent consent and documentation procedures? 67:42:10:10

Corrections To Be Made:

The program does not have a policy regarding medication that states that written parental consent will be obtained. The policy must developed at submitted to OLA.

*The program provided an updated policy to OLA.

Agency Action:

Compliance Plan

Suggested Completion Date:

Actual Completion Date:

10/15/2022

10/05/2022

Status: Corrected

54. Policies related to requirement for nutritional foods served? 67:42:10:10

The program does not have a policy stating that nutritional meals and foods will be served. A policy must be developed and submitted to OLA.

*The program provided an updated policy to OLA.

Agency Action:

Compliance Plan

Suggested Completion Date: Actual Completion Date:

10/15/2022

10/05/2022

Status: Corrected

64. Policies related to requirement for immediate reporting of suspected child abuse or neglect to DSS or law enforcement and require staff to read and sign a statement which defines child abuse and neglect, and identifies reporting responsibilities and procedures as outlined in SDCL 26-8A-8? 67:42:10:10

Corrections To Be Made:

The policy does not state that DSS or law enforcement will be notified in the case of suspected child abuse and neglect, nor does it state that staff must sign a statement that defines child abuse and neglect and identifies their reporting responsibility. The policy must be updated and include this information.

*The program provided an updated policy to OLA.

Agency Action:

Compliance Plan

Suggested Completion Date:

Actual Completion Date:

10/15/2022

10/05/2022

Status: Corrected

65. Policies related to requirement for preventing suspected in-house child abuse or neglect incidents from reoccurring while awaiting investigation outcome and evaluate the continued employability of any staff member involved in a CA/N allegation or incident? 67:42:10:10

Corrections To Be Made:

The program does not have a policy for preventing suspected in-house child abuse and neglect incidents from reoccurring while awaiting the investigation outcome and evaluate the continued employability of any staff member in a CA/N allegations. A policy must be developed.

*The program provided an updated policy to OLA.

Agency Action:

Compliance Plan

Suggested Completion Date:

Actual Completion Date:

10/15/2022

10/05/2022

Status: Corrected

67. Policies related to requirements for each child care worker to be at least 18 years of age and supervised by director/program planner; and secondary child care workers must be at least 14 years of age and work under the direct and constant supervision of an adult? 67:42:10:10

The program does not have a policy for each child care worker to be at least 18 years of age and supervised by director/program planner, and secondary child care workers must be at least 14 years of age and worker under the direct and constant supervision of an adult. A policy must be developed and submitted to OLA.

*The program provided an updated policy to OLA.

Agency Action:

Compliance Plan

Suggested Completion Date:

Actual Completion Date:

10/15/2022

10/05/2022

Status: Corrected

68. Policies related to requirement for describing that the person who plans center programming has specific education and experience? 67:42:10:10

Corrections To Be Made:

The program does not have a policy related to the requirement for describing that the person who plans center programming has a specific education. A policy must be developed.

*The program provided an updated policy to OLA.

Agency Action:

Compliance Plan

Suggested Completion Date:

Actual Completion Date:

10/15/2022

10/05/2022

Status: Corrected

69. Policy related to requiring volunteers used to fill staff member positions, to meet the requirements for the position they are filling? 67:42:10:10

Corrections To Be Made:

The program does not have a policy related to the requiring volunteers used to fill staff member positions, to meet the requirements for the position they are filling. A policy must be developed.

*The program provided an updated policy to OLA.

Agency Action:

Compliance Plan

Suggested Completion Date:

Actual Completion Date:

10/15/2022

10/05/2022

Status: Corrected

70. Policies related to requirement that no staff member or volunteer will have a substantiated report of child abuse or neglect? 67:42:10:10

The program does not have a policy related to the requirement that no staff member or volunteer will have a sustanitated report of child abuse and neglect. A policy must be developed and submitted to OLA.

*The program provided an updated policy to OLA.

Agency Action:

Compliance Plan

Suggested Completion Date: Actual Completion Date:

10/15/2022

10/05/2022

Status: Corrected

71. Policies related to requirement that no staff member will have a conviction of a felony within the past five years, a sex offense, a crime of violence, or a crime against children? 67:42:10:10

Corrections To Be Made:

The program does not have a policy related to the requirement that no staff member will have a conviction of a felony with the past 5 years, a sex offense, a crime of violence, or a crime against children. A policy must be created and submitted to OLA.

*The program provided an updated policy to OLA.

Agency Action:

Compliance Plan

Suggested Completion Date:

Actual Completion Date:

10/15/2022

10/05/2022

Status: Corrected

72. Policies related to requirement that no staff member's name will be located on the Sex Offender Registry? 67:42:10:10

Corrections To Be Made:

The program does not have a policy related to the requirement that no staff member's name will be located on the sex offender registry. A policy must be developed and submitted to OLA

*The program provided an updated policy to OLA.

Agency Action:

Compliance Plan

Suggested Completion Date:

Actual Completion Date:

10/15/2022

10/05/2022

Status: Corrected

Miscellaneous Rule Violations

67:42:03:21 - Other hazardous conditions.

Corrections To Be Made: Agency Action: **Compliance Plan** Children had access and ate in the kitchen. Children can not have access to the kitchen. Suggested Completion Actual Completion *Gates were installed in the kitchen so children can not have access. Date: Date: 10/15/2022 10/05/2022 Status: Corrected **Mary Pease** 09/27/2022 **Tina Uecker** 09/27/2022

Inspector Signature

Date

Date

Provider Signature