

# Program Inspection Compliance Plan

Provider's Name: **Cubs LEAP OST**

City: **Chamberlain**

Provider Number: **010605401**

Inspector: **Sarah Deakins**

Date of Inspection: **10/29/2024**

Time of Inspection: **2:17 PM**

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

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

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

<p>Corrections To Be Made:</p> <p><b>MH - Central Registry Check, Sex Offender Registry Check, FBI Check, DCI Check, NCIC Check</b></p>	<p>Agency Action:</p> <p><b>Compliance Plan</b></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; text-align: center;">Suggested Completion Date:</td> <td style="width: 50%; text-align: center;">Actual Completion Date:</td> </tr> <tr> <td style="text-align: center;"><b>11/12/2024</b></td> <td style="text-align: center;"><b>11/12/2024</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>11/12/2024</b>	<b>11/12/2024</b>
Suggested Completion Date:	Actual Completion Date:				
<b>11/12/2024</b>	<b>11/12/2024</b>				

## F. Insurance

52. Does the program have proof of current liability insurance? 67:42:17:43

<p>Corrections To Be Made:</p> <p><b>Documentation for current liability insurance available was not available during the inspection.</b></p> <p><b>The program must have proof of current liability insurance available.</b></p> <p><b>Verification of current liability insurance received.</b></p>	<p>Agency Action:</p> <p><b>Compliance Plan</b></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; text-align: center;">Suggested Completion Date:</td> <td style="width: 50%; text-align: center;">Actual Completion Date:</td> </tr> <tr> <td style="text-align: center;"><b>11/12/2024</b></td> <td style="text-align: center;"><b>10/30/2024</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>11/12/2024</b>	<b>10/30/2024</b>
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**Linda Todd**

Provider Signature

**10/29/2024**

Date

**Sarah Deakins**

Inspector Signature

**10/29/2024**

Date