Program Inspection
Compliance Plan

Provider's Name:	**Crow Creek Early Head Start**	City:	**Fort Thompson**	Provider Number:	**010607154**
Inspector:	**Rita Trager**	Date of Inspection:	**09/20/2022**	Time of Inspection:	**8:33 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 and Environment

2. Are activity plans developed and implemented that offer a variety of activities to meet the needs of various age groups? 67:42:10:10

Corrections To Be Made:

Activity plan to be developed.

***Correction: The activity plan has been developed and submitted to OLA.**

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
10/18/2022	**09/26/2022**

Status: **Corrected**

G. Record Keeping, Posting Information and Fire & Tornado Drills

38. Does the program post in a visible location a copy of the latest Program and Facility Safety Inspections and Child Care Licensing Inspection Summary? And if on a CAP, does the program have a copy of the plan available at request? 67:42:16:17

Corrections To Be Made:

Copy of latest Program and Facility Safety inspections to be posted.

***Correction: The current inspections are posted in the facility.**

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
10/18/2022	**10/11/2022**

Status: **Corrected**

39. Does the program have documentation 4 fire drills and 1 tornado drill were conducted in the past year? 67:42:10:18

Corrections To Be Made:	Agency Action:	
Complete one fire drill and submit documentation to OLA. ***Correction: A fire drill was completed.**	**Compliance Plan**	
	Suggested Completion Date:	Actual Completion Date:
	10/18/2022	**10/11/2022**
	Status: **Corrected**	

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:	
RG - Three References, Sex Offender Registry Check, Criminal Record Check, C A/N Report Statement **PM - Central Registry Check, Sex Offender Registry Check, Criminal Record Check** **LM - CPR, Training** **PS - Three References, Sex Offender Registry Check, Criminal Record Check, C A/N Report Statement** **TS - Three References, C A/N Report Statement** **RT - Three References, Sex Offender Registry Check, Criminal Record Check, C A/N Report Statement** **SW - Three References, C A/N Report Statement**	**Compliance Plan**	
	Suggested Completion Date:	Actual Completion Date:
	10/31/2022	**10/31/2022**
	Status: **Corrected**	

Miscellaneous Rule Violations

67:42:11:02 - Playground area -- Group care centers, residential treatment centers, day care programs, and intensive residential treatment centers.

Corrections To Be Made:	Agency Action:	
There is a large hole in the middle of the playground area which is a fall hazard. Hole needs to be filled in. **The fence is in need of repair at the infant/toddler area. Fence to be in good repair** ***Correction: Fence has been repaired and the hole in the playground has been filled in.**	**Compliance Plan** Suggested Completion Date: **10/31/2022** Status: **Corrected**	 Actual Completion Date: **12/08/2022**

Penny Marsh	**09/20/2022**	**Rita Trager**	**09/20/2022**
Provider Signature	Date	Inspector Signature	Date