

# Program Inspection Compliance Plan

Provider's Name: **Faulkton Area OST Program**

City: **Faulkton**

Provider Number: **011102455**

Inspector: **Julie Hermansen**

Date of Inspection: **06/08/2023**

Time of Inspection: **2:11 PM**

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 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:	
<b>JG - Criminal Record Check AS - Training</b>	<b>Compliance Plan</b>	
	Suggested Completion Date:	Actual Completion Date:
	<b>06/29/2023</b>	<b>07/28/2023</b>
	Status: <b>Corrected</b>	

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:	
<b>WM - Information Sheet, Emergency Contact</b>	<b>Compliance Plan</b>	
	Suggested Completion Date:	Actual Completion Date:
	<b>06/29/2023</b>	<b>07/28/2023</b>
	Status: <b>Corrected</b>	

**April Sorensen**

Provider Signature

**06/08/2023**

Date

**Julie Hermansen**

Inspector Signature

**06/08/2023**

Date