

# Program Inspection Compliance Plan

Provider's Name: **Unki Takoja Oti Daycare Center**    City: **Eagle Butte**

Provider Number: **015401867**

Inspector: **Julie Hermansen**    Date of Inspection: **11/17/2023**

Time of Inspection: **2:13 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

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

<p>Corrections To Be Made:</p> <ul style="list-style-type: none"> <li>LA - Immunization Records</li> <li>KB - Immunization Records</li> <li>JB - Immunization Records</li> <li>EC - Immunization Records</li> <li>DC - Immunization Records</li> <li>MC - Immunization Records</li> <li>MD - Immunization Records</li> <li>HH - Immunization Records</li> <li>RH - Immunization Records</li> <li>APP - Immunization Records</li> <li>KR - Immunization Records</li> <li>AS - Immunization Records</li> <li>LS - Immunization Records</li> <li>SS - Immunization Records</li> <li>DS - Immunization Records</li> <li>OS - Immunization Records</li> <li>WTL - Immunization Records</li> </ul>	<p>Agency Action:</p> <p><b>Compliance Plan</b></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Suggested Completion Date:</td> <td style="width: 50%;">Actual Completion Date:</td> </tr> <tr> <td style="text-align: center;"><b>12/08/2023</b></td> <td style="text-align: center;"><b>12/05/2023</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>12/08/2023</b>	<b>12/05/2023</b>
Suggested Completion Date:	Actual Completion Date:				
<b>12/08/2023</b>	<b>12/05/2023</b>				

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

Corrections To Be Made:

**HH - Sex Offender Registry Check, Training**  
**KI - Sex Offender Registry Check**  
**JL - Sex Offender Registry Check, CPR**

Agency Action:

**Compliance Plan**

Suggested  
Completion  
Date:

Actual  
Completion  
Date:

**12/08/2023**

**02/21/2024**

Status: **Corrected**

**Candace Hollow Horn**

Provider Signature

**11/17/2023**

Date

**Julie Hermansen**

Inspector Signature

**11/17/2023**

Date