## Program Inspection Compliance Plan

Provider's Name:	Faith Lutheran Day C	Care Center	City:	Pierre	Provider Number:	015505944
Inspector:	Shannon Terhark	Date of Inspe	ection:	08/02/2022	Time of Inspection:	1:03 PM

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:	Agency Action:	
Lesson plans are needed in the Waddler and Toddler rooms.	Compliance Plan	
Activity plans need to be developed and implemented that offer a variety of activities to meet the needs of various age groups.	Suggested Completion Date:	Actual Completion Date:
The lesson plans are completed and posted in the Waddler and Toddler classrooms.	08/09/2022	09/01/2022
	Status: Corrected	

8. Does the program have a written daily schedule? 67:42:10:10

Agency Action:	
Compliance Plan	
Suggested Completion	Actual Completion
Date:	Date:
09/02/2022	09/01/2022
Status: Corrected	
	Compliance Plan Suggested Completion Date: 09/02/2022

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:	
Corrections To Be Made: DB - CPR GH - Three References, Timely Orientation, CPR KJ - Three References GK - Three References, CPR AK - Three References, Timely Orientation, CPR VK - Three References, Timely Orientation, CPR DL - Timely Orientation, CPR AL - Three References, Criminal Record Check BL - Three References BT - Timely Orientation, CPR MV - Three References, Criminal Record Check, C A/N Report Statement	Agency Action: Compliance Plan Suggested Completion Date: 09/02/2022 Status: Corrected	Actual Completion Date: <b>10/21/2022</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:	
DA - Immunization Records	Compliance Plan	
LB - Immunization Records AC - Information Sheet, Emergency Contact BD - Enrollment Date, Immunization Records VH - Immunization Records	Suggested Completion Date:	Actual Completion Date:
MK - Immunization Records PK - Immunization Records	09/02/2022	09/08/2022
SK - Immunization Records RL - Immunization Records	Status: Corrected	
EM - Emergency Contact, Immunization Records JU - Enrollment Date		
JU - Immunization Records BW - Immunization Records		
WW - Immunization Records		

Mandy Vogel

08/02/2022

Date

Shannon Terhark Inspector Signature 08/02/2022

Date

**Provider Signature**