

Program Inspection Compliance Plan

Provider's Name: **Children's Castle**

City: **Pierre**

Provider Number: **015507510**

Inspector: **Sarah Deakins**

Date of Inspection: **09/08/2023**

Time of Inspection: **11:30 AM**

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

34. Does the provider have documentation showing two fire evacuation drills, two shelter-in-place drills, and two lockdown drills conducted in the past calendar year? 67:42:17:43

Corrections To Be Made:

At the time of the inspection there was no documentation showing two fire evacuation drills, 2 shelter-in-place drill, or two lockdown drills conducted in the past calendar year.

The provider will have documentation showing two fire evacuation drills, two shelter-in-place drills, and two lockdown drills conducted in the past calendar year.

Verification received showing documentation showing fire, lockdown, and shelter-in-place for the last calendar year.

Agency Action:

Compliance Plan

Suggested
Completion
Date:

09/22/2023

Actual
Completion
Date:

09/19/2023

Status: **Corrected**

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

Corrections To Be Made:

RB - Immunization Records

IB - Enrollment Date

KB - Enrollment Date

LB - Enrollment Date

AB - Emergency Contact, Immunization Records

ZC - Enrollment Date

KDH - Emergency Permission

SG - Immunization Records

EH - Emergency Permission, Immunization Records

CH - Enrollment Date, Immunization Records

SP - Immunization Records

AP - Enrollment Date

ZP - Enrollment Date

AT - Emergency Contact

Agency Action:

Compliance Plan

Suggested
Completion
Date:

12/21/2023

Actual
Completion
Date:

12/19/2023

Status: **Corrected**

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

Corrections To Be Made:	Agency Action:	
LB - CPR	Corrective Action Plan	
DM - CPR, Training	Suggested Completion Date:	Actual Completion Date:
AT - Central Registry Check, Sex Offender Registry Check, Training	12/08/2023	12/07/2023
TW - CPR, Training	Status: Corrected	

E. Written Procedures

50. Is there a written emergency preparedness and response plan in place which covers all areas required to include: evacuation; relocation; shelter-in-place; lock-down procedures; procedures for communication & reunification with families; continuity of operations; and accommodation of infants & toddlers, children with disabilities and children with chronic medical conditions? 67:42:17:43

Corrections To Be Made:	Agency Action:	
At the time if the inspection there was no written emergency preparedness and response plan.	Compliance Plan	
The program will have a written emergency preparedness and response plan available.	Suggested Completion Date:	Actual Completion Date:
The program's written emergency preparedness and response plan has been received.	09/22/2023	11/14/2023
	Status: Corrected	

Miscellaneous Rule Violations

67:42:17:37 - Construction and fire safety requirements

Corrections To Be Made:

All exits to the outside did not have lighted emergency exit signs above them.

The program will install a lighted emergency exit sign above the south door in the infant/toddler room.

Verification has been received that a lighted emergency exit sign above the south door of the infant/toddler room was installed.

Agency Action:

Compliance Plan

Suggested
Completion
Date:

09/22/2023

Actual
Completion
Date:

11/14/2023

Status: **Corrected**

Bethany Kirkie

Provider Signature

11/17/2023

Date

Sarah Deakins

Inspector Signature

11/17/2023

Date