

Program Inspection Compliance Plan

Provider's Name: **Sinte Gleska University Child
Care Center**

City: **Mission**

Provider Number: **015508238**

Inspector: **Andrea Neff**

Date of Inspection: **08/23/2022**

Time of Inspection: **12:00 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

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

<p>Corrections To Be Made:</p> <p>Program did not have documentation of 4 fire drills and 1 tornado drill for 2021.</p> <p>Program will need to complete and document 2 fire drills and 1 tornado drill toward the 2021 year.</p> <p>Correction: Program submitted documentation of completing 2 fire drills and 1 tornado drill.</p>	<p>Agency Action:</p> <p>Compliance Plan</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;">09/16/2022</td> <td style="text-align: center;">09/15/2022</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	09/16/2022	09/15/2022
Suggested Completion Date:	Actual Completion Date:				
09/16/2022	09/15/2022				

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.

<p>Corrections To Be Made:</p> <p>RR - Training JS - Training</p>	<p>Agency Action:</p> <p>Compliance Plan</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;">09/16/2022</td> <td style="text-align: center;">09/13/2022</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	09/16/2022	09/13/2022
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09/16/2022	09/13/2022				

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:	
KR - Immunization Records	Compliance Plan	
	Suggested Completion Date:	Actual Completion Date:
	09/16/2022	09/08/2022
	Status: Corrected	

I. Written Procedures

44. Does the program have 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; accommodation of infants & toddlers; children with disabilities & children with chronic medical conditions? 67:42:10:10

Corrections To Be Made:	Agency Action:	
Program did not have documentation of a written emergency preparedness and response plan.	Compliance Plan	
Program needs to write an emergency preparedness and response plan that covers all required areas.	Suggested Completion Date:	Actual Completion Date:
Correction: Provider submitted written emergency preparedness and response plan.	09/16/2022	09/30/2022
	Status: Corrected	

J. Written Program Policies

57. Policies related to requirement for prevention and response to emergencies due to food and allergic reactions? 67:42:10:10

Corrections To Be Made:	Agency Action:	
Program did not have a policy related to requirement for prevention and response to emergencies due to food and allergic reactions.	Compliance Plan	
Program needs to write a policy related to requirement for prevention and response to emergencies due to food and allergic reactions.	Suggested Completion Date:	Actual Completion Date:
Correction: Program submitted a written policy relating to the prevention and response to emergencies due to food and allergic reactions.	09/16/2022	09/13/2022
	Status: Corrected	

59. Policies related to requirement for prevention of shaken baby syndrome and abusive head trauma? 67:42:10:10

Corrections To Be Made:	Agency Action:	
Program did not have a policy related to requirement for prevention of shaken baby syndrome and abusive head trauma.	Compliance Plan	
Program needs to write a policy related to requirement for prevention of shaken baby syndrome and abusive head trauma.	Suggested Completion Date:	Actual Completion Date:
Correction: Program submitted a written policy related to requirement for prevention of shaken baby syndrome and abusive head trauma.	09/16/2022	09/13/2022
	Status: Corrected	

61. Policies related to an emergency preparedness and response plan? 67:42:10:10

Corrections To Be Made:	Agency Action:	
Program did not have a policy related to an emergency preparedness and response plan.	Compliance Plan	
Program needs to write a policy related to an emergency preparedness and response plan.	Suggested Completion Date:	Actual Completion Date:
Correction: Program submitted a written policy related to an emergency preparedness and response plan.	09/16/2022	09/30/2022
	Status: Corrected	

62. Policies related to requirement for handling and storage of hazardous material and the disposal of bio contaminants? 67:42:10:10

Corrections To Be Made:	Agency Action:	
Program did not have a written policy related to requirement for handling and storage of hazardous material and the disposal of bio contaminants.	Compliance Plan	
Program needs to write a policy related to requirement for handling and storage of hazardous material and the disposal of bio contaminants.	Suggested Completion Date:	Actual Completion Date:
Correction: Program submitted a written policy related to requirement for handling and storage of hazardous material and the disposal of bio contaminants.	09/16/2022	09/13/2022
	Status: Corrected	

66. Policies related to requirement for reporting changes or circumstances, within 24 hours, which may affect ability to comply with licensing rules i.e. new program location, building renovations or remodeling, suspected in-house child abuse or neglect, ownership change, employee felony convictions or new director? 67:42:10:10

Corrections To Be Made:	Agency Action:	
Programs policy relating to change of circumstance did not state they would report within 24 hours.	Compliance Plan	
Program needs to update the policy related to requirement for reporting changes or circumstances to add "within 24 hours."	Suggested Completion Date:	Actual Completion Date:
Correction: Program submitted an updated policy related to requirement for reporting changes or circumstances and add "within 24 hours."	09/16/2022	09/13/2022
	Status: Corrected	

69. Policy related to requiring volunteers used to fill staff member positions, to meet the requirements for the position they are filling? 67:42:10:10

Corrections To Be Made:	Agency Action:	
Program did not have a policy related to requiring volunteers used to fill staff member positions, to meet the requirements for the position they are filling.	Compliance Plan	
Program needs to write a policy related to requiring volunteers used to fill staff member positions, to meet the requirements for the position they are filling.	Suggested Completion Date:	Actual Completion Date:
Correction: Program submitted a written policy related to requiring volunteers used to fill staff member positions, to meet the requirements for the position they are filling.	09/16/2022	09/13/2022
	Status: Corrected	

71. Policies related to requirement that no staff member will have a conviction of a felony within the past five years, a sex offense, a crime of violence, or a crime against children? 67:42:10:10

Corrections To Be Made:	Agency Action:	
Program did not have a policy related to requirement that no staff member will have a conviction of a felony within the past five years, a sex offense, a crime of violence, or a crime against children.	Compliance Plan	
Program needs to write a policy related to requirement that no staff member will have a conviction of a felony within the past five years, a sex offense, a crime of violence, or a crime against children.	Suggested Completion Date:	Actual Completion Date:
Correction: Program submitted a written policy relating to requirement that no staff member will have a conviction of a felony within the past five years, a sex offense, a crime of violence, or a crime against children.	09/16/2022	09/13/2022
	Status: Corrected	

72. Policies related to requirement that no staff member's name will be located on the Sex Offender Registry? 67:42:10:10

Corrections To Be Made:	Agency Action:	
Program did not have a policy related to the requirement that no staff member's name will be located on the Sex Offender Registry.	Compliance Plan	
Program needs to write a policy related to the requirement that no staff member's name will be located on the Sex Offender Registry.	Suggested Completion Date:	Actual Completion Date:
Correction: Program submitted a written policy related to the requirement that no staff member's name will be located on the Sex Offender Registry.	09/16/2022	09/13/2022
	Status: Corrected	

Jamie Star Chief

 Provider Signature

10/11/2022

 Date

Andrea Neff

 Inspector Signature

10/11/2022

 Date