

# Program Inspection Compliance Plan

Provider's Name: **St. Elizabeth Seton Child Care** City: **Rapid City**

Provider Number: **016523547**

Inspector: **Andrea Neff** Date of Inspection: **05/20/2024**

Time of Inspection: **8:20 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

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

Corrections To Be Made:

**MH - Orientation Complete**  
**OT - Orientation Complete**

Agency Action:

### Compliance Plan

Suggested  
Completion  
Date:

**06/07/2024**

Actual  
Completion  
Date:

**06/21/2024**

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:

**Provider did not have an up-to-date emergency preparedness and response plan available.**

**Provider will need to submit an up-to-date emergency preparedness and response plan covering all required areas as listed in 67:42:17:43.**

**Correction: Provider submitted a current emergency preparedness and response plan covering all required areas as listed in 67:42:17:43.**

Agency Action:

**Compliance Plan**

Suggested  
Completion  
Date:

Actual  
Completion  
Date:

**06/07/2024**

**06/05/2023**

Status: **Corrected**

**Jana Thies**

Provider Signature

**05/20/2024**

Date

**Andrea Neff**

Inspector Signature

**05/20/2024**

Date