

Program Inspection Compliance Plan

Provider's Name: **ONE HEART CHILD
DEVELOPMENT CENTER**

City: **Rapid City**

Provider Number: **016597834**

Inspector: **Tina Uecker**

Date of Inspection: **04/23/2024**

Time of Inspection: **8:30 AM**

Provider was found to be in full compliance

Eve Flanigan

Provider Signature

06/14/2024

Date

Tina Uecker

Inspector Signature

06/14/2024

Date