

Program Inspection Compliance Plan

Provider's Name: **Creative Kids**

City: **Rapid City**

Provider Number: **016599380**

Inspector: **Andrea Neff**

Date of Inspection: **04/26/2023**

Time of Inspection: **9:42 AM**

The items listed below are those that the provider was not in compliance with at the time of the inspection.

B. Program Practices

11. Do staff ensure children are given direct care, protection, supervision, and guidance through active involvement or direct supervision? 67:42:16:19

Corrections To Be Made:

One child was observed sleeping in the nap room while staff were on either the porch or playground. Child was not supervised. Nap room did have a video monitor but camera was not directed to where the child was sleeping.

Children need to be supervised at all times. Program will need to submit a written plan on how supervision will be enforced and ensure all children have direct care, protection and supervision.

Correction: During the inspection, the Provider ensured supervision of the sleeping child. A corrective action plan has been implemented with the program and the Office of Licensing & Accreditation will continue to monitor for compliance.

Agency Action:

Corrective Action Plan

Suggested
Completion
Date:

08/31/2023

Actual
Completion
Date:

08/31/2023

Status: **Corrected**

E. Nutrition and Meal Planning

33. Is a weekly menu posted that records actual food served? 67:42:10:13

Corrections To Be Made:	Agency Action:	
Program did not have a menu posted.	Compliance Plan	
Program will submit a written menu to OLA and post the weekly menu.	Suggested Completion Date:	Actual Completion Date:
Correction: Program submitted a written menu, which has also been posted for viewing.	05/17/2023	05/17/2023
	Status: Corrected	

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:	
EH - Three References, C A/N Report Statement, Timely Orientation, CPR, Training	Corrective Action Plan	
GK - Training	Suggested Completion Date:	Actual Completion Date:
KR - Three References, Sex Offender Registry Check, Criminal Record Check, C A/N Report Statement, CPR, Training	06/27/2023	07/14/2023
TS - Three References, C A/N Report Statement, Timely Orientation, CPR, Training	Status: Corrected	
FS - Training		
JS - Sex Offender Registry Check, Criminal Record Check, Training		
KS - Three References		
KT - Address & Phone Number, Three References, C A/N Report Statement, Timely Orientation, CPR, Training		

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:	
OG - Immunization Records	Compliance Plan	
KG - Immunization Records	Suggested Completion Date:	Actual Completion Date:
JM - Emergency Contact, Immunization Records	05/17/2023	05/15/2023
LM - Enrollment Date, Immunization Records	Status: Corrected	
RR - Immunization Records		
KS - Immunization Records		
CS - Immunization Records		
HS - Immunization Records		
ET - Immunization Records		
WW - Immunization Records		

H. Insurance

42. Does the facility have documentation the program has current liability insurance coverage?
67:42:16:16

Corrections To Be Made:	Agency Action:	
Liability insurance certificate on file has expired.	Compliance Plan	
Program will submit the current liability insurance certificate to OLA.	Suggested Completion Date:	Actual Completion Date:
Correction: Provider submitted a current liability insurance certificate.	05/17/2023	05/12/2023
	Status: Corrected	

I. Written Procedures

45. Does the program provide a written Staff Training Plan? 67:42:10:06

Corrections To Be Made:	Agency Action:	
Provider did not have a written staff training plan.	Compliance Plan	
Provider will need to submit a written staff training plan of how staff will get their required annual training.	Suggested Completion Date:	Actual Completion Date:
Correction: Provider submitted a written staff training plan.	05/17/2023	05/12/2023
	Status: Corrected	

Miscellaneous Rule Violations

61:15:01 - Fire Safety Standards

Corrections To Be Made:

Fire exit in infant room was propped open and a swing was sitting in doorway. Fire exits can not be blocked and doors can not be propped opened.

Provider moved the swing and closed the door during the inspection.

Agency Action:

Compliance Plan

Suggested
Completion
Date:

Actual
Completion
Date:

04/26/2023

04/26/2023

Status: **Corrected Immediately**

Kim Stackenwalt

Provider Signature

04/26/2023

Date

Andrea Neff

Inspector Signature

04/26/2023

Date