

# Program Inspection Compliance Plan

Provider's Name: **Campus Learning Center for Children**

City: **Sioux Falls**

Provider Number: **018026052**

Inspector: **Rita Trager**

Date of Inspection: **04/12/2023**

Time of Inspection: **8:01 AM**

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

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><b>EA - Central Registry Check, Sex Offender Registry Check, Criminal Record Check</b></p> <p><b>RB - Central Registry Check, Sex Offender Registry Check, Criminal Record Check</b></p> <p><b>LE - Central Registry Check, Sex Offender Registry Check, Criminal Record Check</b></p> <p><b>KF - CPR, Training</b></p> <p><b>CJ - Sex Offender Registry Check, Criminal Record Check</b></p> <p><b>MR - Central Registry Check, Sex Offender Registry Check, Criminal Record Check</b></p> <p><b>KR - Central Registry Check, Sex Offender Registry Check, Criminal Record Check</b></p> <p><b>MT - Central Registry Check, Sex Offender Registry Check, Criminal Record Check, CPR, Training</b></p>	<p>Agency Action:</p> <p><b>Compliance Plan</b></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;"><b>05/12/2023</b></td> <td style="text-align: center;"><b>08/10/2023</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>05/12/2023</b>	<b>08/10/2023</b>
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<b>05/12/2023</b>	<b>08/10/2023</b>				

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.

<p>Corrections To Be Made:</p> <p><b>SC - Immunization Records</b></p> <p><b>FH - Immunization Records</b></p> <p><b>AK - Immunization Records</b></p> <p><b>PK - Immunization Records</b></p> <p><b>SP - Immunization Records</b></p> <p><b>RS - Immunization Records</b></p>	<p>Agency Action:</p> <p><b>Compliance Plan</b></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;"><b>05/12/2023</b></td> <td style="text-align: center;"><b>04/28/2023</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>05/12/2023</b>	<b>04/28/2023</b>
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<b>05/12/2023</b>	<b>04/28/2023</b>				

**Judy Knadel**

Provider Signature

**04/12/2023**

Date

**Rita Trager**

Inspector Signature

**04/12/2023**

Date