Program Inspection
Compliance Plan

Provider's Name:	**Holy Spirit School**	City:	**Sioux Falls**	Provider Number:	**018042093**
Inspector:	**Rita Trager**	Date of Inspection:	**11/14/2023**	Time of Inspection:	**2:30 PM**

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

C. Posting Information/ Emergency Preparedness/ Record Keeping/ Provider Qualifications

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

Corrections To Be Made:

LB - Out Of State
KB - Five Year Screen
CD - Training
SF - Orientation Complete, Training
SF - Orientation Complete, Training
AS - Sex Offender Registry Check, FBI Check, DCI Check, NCIC Check
SS - Central Registry Check, Sex Offender Registry Check, FBI Check, DCI Check, NCIC Check
HW - Orientation Complete, Training

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
11/28/2023	**12/05/2023**

Status: **Corrected**

42. Have providers and assistants completed orientation training within 90 days after the date of employment and before caring for children unsupervised? 67:42:17:17

Corrections To Be Made:

Four staff do not have documentation that orientation training was completed within 90 days of hire. Documentation to be provided to the Office of Licensing and Accreditation (OLA)

***Correction: Documentation has been submitted to OLA that training was completed.**

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
11/28/2023	**11/28/2023**

Status: **Corrected**

Susan Moe	11/14/2023	Rita Trager	11/14/2023
Provider Signature	Date	Inspector Signature	Date