

# Program Inspection Compliance Plan

Provider's Name: **B&G Club 57th St. Learning Center**

City: **Sioux Falls**

Provider Number: **018042257**

Inspector: **Brooke Flemmer**

Date of Inspection: **05/31/2024**

Time of Inspection: **10:32 AM**

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

## B. Provider Practices

15. Is written consent obtained from each child ' s parent before administering all prescription and non-prescription medication? Does the consent include the child ' s name, name of medication and the dates, times, and dosage of the medication to be administered? 67:42:17:27

<p>Corrections To Be Made:</p> <p><b>There was not written consent obtained from a child's parents for a medication to be administered.</b></p> <p><b>Before any medication is administered to a child, written permission from the parent or guardian must be obtained and must include the name of the child, the name of the medication, and the dates, times, and dosage of the medication.</b></p> <p><b>Correction: Written consent was obtained from children's parents for medication to be administered.</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>06/10/2024</b></td> <td style="text-align: center;"><b>06/14/2024</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>06/10/2024</b>	<b>06/14/2024</b>
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19. Are medications returned to the parent when no longer needed or the medication has expired? 67:42:17:27

<p>Corrections To Be Made:</p> <p><b>There were medications at the program that were not returned to the parent when no longer needed.</b></p> <p><b>All medication must be returned to the parent when no longer needed or expired.</b></p> <p><b>Correction: Medications that were no longer needed were returned to the parents.</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>06/07/2024</b></td> <td style="text-align: center;"><b>06/14/2024</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>06/07/2024</b>	<b>06/14/2024</b>
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**Posting Information/ Emergency Preparedness/ Record Keeping/ Provider**

**C. Qualifications**

33. If a child in care has a known food allergy, does the provider have a written plan which includes instructions regarding food allergens, steps to be taken to avoid the food, and a detailed treatment plan to be implemented if the child has an allergic reaction? 67:42:17:29

<p>Corrections To Be Made:</p> <p><b>Children in care with a known food allergy did not have a written plan including the required information.</b></p> <p><b>A child in care with a known food allergy shall have a written plan which includes instructions regarding food allergens, steps to be taken to avoid the food, and a detailed treatment plan.</b></p> <p><b>Correction: The program obtained a written care plan for all children in care with a known food allergy</b></p>	<p>Agency Action:</p> <p><b>Compliance Plan</b></p> <table border="0"> <tr> <td>Suggested Completion Date:</td> <td>Actual Completion Date:</td> </tr> <tr> <td><b>06/10/2024</b></td> <td><b>06/14/2024</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>06/10/2024</b>	<b>06/14/2024</b>
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35. Does each child ' s record contain all required information? 67:42:17:42

<p>Corrections To Be Made:</p> <p><b>AC - Immunization Records</b>  <b>SC - Immunization Records</b>  <b>DF - Immunization Records</b>  <b>EF - Immunization Records</b>  <b>GF - Immunization Records</b>  <b>SK - Emergency Contact</b></p>	<p>Agency Action:</p> <p><b>Compliance Plan</b></p> <table border="0"> <tr> <td>Suggested Completion Date:</td> <td>Actual Completion Date:</td> </tr> <tr> <td><b>06/14/2024</b></td> <td><b>06/14/2024</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>06/14/2024</b>	<b>06/14/2024</b>
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39. Do employee records contain all required information? 67:42:17:15

<p>Corrections To Be Made:</p> <p><b>NA - Out Of State</b>  <b>CL - Out Of State</b>  <b>EM - Five Year Screen</b>  <b>KM - Level II Complete</b>  <b>EM - CPR</b></p>	<p>Agency Action:</p> <p><b>Compliance Plan</b></p> <table border="0"> <tr> <td>Suggested Completion Date:</td> <td>Actual Completion Date:</td> </tr> <tr> <td><b>07/03/2024</b></td> <td><b>07/22/2024</b></td> </tr> </table> <p>Status: <b>Corrected</b></p>	Suggested Completion Date:	Actual Completion Date:	<b>07/03/2024</b>	<b>07/22/2024</b>
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**Bridget Hanson**

Provider Signature

**05/31/2024**

Date

**Brooke Flemmer**

Inspector Signature

**05/31/2024**

Date