

Program Inspection Compliance Plan

Provider's Name: **B&G Club Fred Assam**

City: **Sioux Falls**

Provider Number: **018042409**

Inspector: **Brooke Flemmer**

Date of Inspection: **06/07/2024**

Time of Inspection: **9:45 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>There was not written consent obtained from a child's parents for a medication to be administered.</p> <p>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.</p> <p>Correction: Written consent was obtained from each child's parent for medications to be administered.</p>	<p>Agency Action:</p> <p>Compliance Plan</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;">06/19/2024</td> <td style="text-align: center;">06/14/2024</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	06/19/2024	06/14/2024
Suggested Completion Date:	Actual Completion Date:				
06/19/2024	06/14/2024				

16. Is medication administered to each child documented, which includes the child ' s name, dose, time, date given, and name of the individual administering the medication? 67:42:17:27

<p>Corrections To Be Made:</p> <p>Medication that was administered to a child was not documented with the required information.</p> <p>The provider shall document, in the child's record, any medication administered to a child and shall include the dose, the name of the child, the time and date administered, and the name of the person administering the medication.</p> <p>Correction: The requirement outlined in ARSD 67:42:17:27 have been reviewed with providers, and documentation will be maintained when medication is administered to a child</p>	<p>Agency Action:</p> <p>Compliance Plan</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;">06/19/2024</td> <td style="text-align: center;">06/17/2024</td> </tr> </table> <p>Status: Corrected</p>	Suggested Completion Date:	Actual Completion Date:	06/19/2024	06/17/2024
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19. Are medications returned to the parent when no longer needed or the medication has expired?
67:42:17:27

Corrections To Be Made:	Agency Action:	
There were multiple medications that were expired or not returned to the parent when no longer needed.	Compliance Plan	
The medication must be returned to the parent when no longer needed or expired.	Suggested Completion Date:	Actual Completion Date:
Correction: All medications that was expired or no longer needed was returned to the parents.	06/19/2024	06/14/2024
	Status: Corrected	

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

Corrections To Be Made:	Agency Action:	
The program did not have a written care plan for a child with a known food allergy. Additionally, the program had a written treatment plan for a child in care with a known allergy, but the treatment plan included a medication that was not available to the provider.	Compliance Plan	
A provider shall have a written care plan for each child who has a known food allergy. The plan must contain instructions regarding any food allergens, steps to be taken to avoid that food, and a detailed treatment plan to be implemented if the child has an allergic reaction.	Suggested Completion Date:	Actual Completion Date:
Correction: The program obtained a written care plan for the child with a known food allergy.	06/19/2024	06/25/2024
	Status: Corrected	

35. Does each child ' s record contain all required information? 67:42:17:42

Corrections To Be Made:	Agency Action:	
CD - Enrollment Date LD - Enrollment Date	Compliance Plan	
	Suggested Completion Date:	Actual Completion Date:
	06/21/2024	06/27/2024
	Status: Corrected	

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

Corrections To Be Made:	Agency Action:	
CH - Five Year Screen MH - DCI Check MT - Level II Complete	Compliance Plan	
	Suggested Completion Date:	Actual Completion Date:
	07/03/2024	07/10/2024
	Status: Corrected	

E. Written Procedures

51. Are all providers and provider assistants knowledgeable on the emergency preparedness and response plan and procedure at the time employment begins? 67:42:17:43

Corrections To Be Made:	Agency Action:	
At the time of the inspection, not all providers and provider assistants were knowledgeable on the emergency preparedness and response plan and procedures.	Compliance Plan	
A provider shall communicate the emergency preparedness and response plan to each provider at the time the individual begins employment.	Suggested Completion Date:	Actual Completion Date:
Correction: The program's emergency preparedness and response plans were reviewed with all providers.	06/21/2024	06/14/2024
	Status: Corrected	

Chase Harms

Provider Signature

06/07/2024

Date

Brooke Flemmer

Inspector Signature

06/07/2024

Date