

Program Inspection Compliance Plan

Provider's Name: **Bright Eyes Day Care**

City: **Sioux Falls**

Provider Number: **018042676**

Inspector: **Brooke Flemmer**

Date of Inspection: **03/11/2024**

Time of Inspection: **9:29 AM**

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

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

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

Corrections To Be Made:

AL - FBI Check, DCI Check, NCIC Check

AO - Sex Offender Registry Check, FBI Check, DCI Check, NCIC Check

Agency Action:

Compliance Plan

Suggested
Completion
Date:

04/01/2024

Actual
Completion
Date:

03/22/2024

Status: **Corrected**

Mandy Peterson

Provider Signature

03/11/2024

Date

Brooke Flemmer

Inspector Signature

03/11/2024

Date