Program Inspection
Compliance Plan

Provider's Name:	**Lil' Hands Lil' Feet**	City:	**Sioux Falls**	Provider Number:	**018042824**
Inspector:	**Brooke Flemmer**	Date of Inspection:	**06/26/2024**	Time of Inspection:	**8:48 AM**

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

A. Staff-Child Ratio and Supervision of Children

1. Is the staff to child ratio maintained at all times, including during indoor and outdoor play? 67:42:17:21 N ote : Ratio is 1 staff to every 5 children age birth up to 3 years; 1 staff to every 10 children ages 3 and 4 years; and 1 staff to every 15 children 5 years and over.

Corrections To Be Made:	Agency Action:
There were16 children observed with one provider in the multi-purpose room. A 1:15 ratio is required for this age group. There were also 6 children with one provider in the infant classroom. A 1:5 ratio is required for this age group. **A center or school-age program must maintain the following ratios:** **(1) Five children to one staff for children up to three years of age;** **(2) Ten children to one staff for children three through four years; and** **(3) Fifteen children to one staff for children five years and over.** **Correction: A child in both classrooms were moved into another classroom that could accommodate the children.**	**Corrective Action Plan** Suggested Completion Date: **06/26/2024** Actual Completion Date: **06/26/2024** Status: **Corrected Immediately**

4. Are individual room capacities maintained, which was determined during the floor plan review? In spaces where there are more than 20 children, can the providers identify which children each provider is responsible to supervise? 67:42:17:19 Note: When room capacity does not align with the ratio requirements, a maximum of three additional children may be included in the room capacity as long as the ratios are maintained.

Corrections To Be Made:

There were 16 children observed in the multi-purpose room, which has an individual room capacity of 15 children.

Maximum group sizes are determined by individual room capacity.

Correction: A child was moved into another classroom that could accommodate the child.

Agency Action:

Corrective Action Plan

Suggested Completion Date:	Actual Completion Date:
06/26/2024	**06/26/2024**

Status: **Corrected Immediately**

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

There was a drop in child in care with a known food allergy, that did not have a written plan regarding their known food allergy.

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.

Correction: The program obtained a written care plan for all children in care with a known food allergy.

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
07/03/2024	**07/03/2024**

Status: **Corrected**

34. Does the provider have documentation showing two fire evacuation drills, two shelter-in-place drills, and two lockdown drills conducted in the past calendar year? 67:42:17:43

Corrections To Be Made:

The program has not conducted a lockdown drill in the past year.

A provider shall practice the evacuation, shelter-in-place, and lock down procedures, outlined in the emergency preparedness and response plan, at least twice each calendar year.

Correction: The program conducted a lockdown drill with all providers.

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
07/05/2024	**07/09/2024**

Status: **Corrected**

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

Corrections To Be Made:

DA - Immunization Records
SB - Immunization Records
YB - Emergency Permission
CJ - Immunization Records
OM - Immunization Records
DN - Immunization Records
NN - Immunization Records
AS - Immunization Records
CS - Enrollment Date
MS - Enrollment Date, Emergency Contact
HT - Immunization Records
OT - Immunization Records

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
07/17/2024	**07/22/2024**

Status: **Corrected**

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

Corrections To Be Made:

AA - Central Registry Check, Level II Complete
BA - Five Year Screen
SB - Out Of State
TB - CPR
ZB - CPR
JC - Out Of State
MD - CPR
MF - Out Of State
EG - Out Of State, C A/N Report Statement, Training
KG - Orientation Complete
ZM - Out Of State, C A/N Report Statement, Orientation Complete
JP - Out Of State
AS - Orientation Complete

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
07/17/2024	**09/05/2024**

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:

At the time of the inspection, not all providers and provider assistants were knowledgeable on the emergency preparedness and response plan and procedures.

A provider shall communicate the emergency preparedness and response plan to each provider at the time the individual begins employment.

Correction: The program reviewed all emergency preparedness and response plan and procedures with all provider and provider assistants.

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
07/10/2024	**07/09/2024**

Status: **Corrected**

Miscellaneous Rule Violations

61:15:05:05 - Exit requirements.

Corrections To Be Made:

At the time of the inspection, the exit pathway in the one-year-old room was obstructed and a deadbolt was on the exit door.

Center and school-age programs operating outside of a school building shall follow applicable construction and fire safety requirements, as outlined in chapters 61:15:05.

Correction: The exit pathway was cleared and the deadbolt was removed.

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
06/26/2024	**06/26/2024**

Status: **Corrected Immediately**

Brenda White	**06/26/2024**	**Brooke Flemmer**	**06/26/2024**
Provider Signature	Date	Inspector Signature	Date