

Program Inspection Compliance Plan

Provider's Name: **Truks-N-Trykes Playcare**

City: **Sioux Falls**

Provider Number: **018042996**

Inspector: **Chandra VanHout**

Date of Inspection: **01/22/2024**

Time of Inspection: **10:19 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

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:

**One classroom had more children present than the licensed capacity.
Another classroom sometimes has more children attend than the licensed capacity.**

Individual room capacities must be maintained.

The program submitted a written plan to OLA explaining how individual room capacities will be maintained.

Agency Action:

Compliance Plan

Suggested
Completion
Date:

02/12/2024

Actual
Completion
Date:

02/13/2024

Status: **Corrected**

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

Corrections To Be Made:

Two written consents for administering medication to children did not include the dates for administration.

Written consent for administering medication shall include the child's name, name of medication and the dates, times, and dosage of the medication to be administered.

The program obtained dates for the Medication Authorization Forms.

Agency Action:

Compliance Plan

Suggested
Completion
Date:

01/29/2024

Actual
Completion
Date:

01/24/2024

Status: **Corrected**

Posting Information/ Emergency Preparedness/ Record Keeping/ Provider

C. Qualifications

32. Does the provider have a weekly menu posted, which includes meals and snacks to be served each week? 67:42:17:30

Corrections To Be Made:

The weekly menu was posted but did not include all meals to be served each week.

The weekly menu shall be posted, which includes meals and snacks to be served each week.

The program has a weekly menu showing all meals.

Agency Action:

Compliance Plan

Suggested
Completion
Date:

01/29/2024

Actual
Completion
Date:

01/24/2024

Status: **Corrected**

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

Corrections To Be Made:

MN - Orientation Complete

Agency Action:

Compliance Plan

Suggested
Completion
Date:

02/12/2024

Actual
Completion
Date:

01/24/2024

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:
Providers were not knowledgeable on the lockdown procedure.	Compliance Plan
All providers shall be knowledgeable on the emergency preparedness and response plan and procedure at the time employment begins.	Suggested Completion Date:
The program reviewed the lockdown procedure with all providers and have included the emergency preparedness and response plan within their orientation for new providers.	02/12/2024
	Actual Completion Date:
	02/19/2024
	Status: Corrected

Gerilyne Phaisaly

Provider Signature

01/22/2024

Date

Chandra VanHout

Inspector Signature

01/22/2024

Date