Program Inspection
Compliance Plan

Provider's Name:	**Truks-N-Trykes @ Golden Gateway**	City:	**Sioux Falls**	Provider Number:	**018043066**
Inspector:	**Chandra VanHout**	Date of Inspection:	**11/30/2022**	Time of Inspection:	**9:28 AM**

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

B. Program Practices

23. Are staff aware of their responsibility to report suspected child abuse and neglect directly to Law Enforcement, State's Attorney or to the Department? 67:42:10:22

Corrections To Be Made:	Agency Action:	
Not all staff were fully aware of their responsibility to report suspected child abuse and neglect directly to Law Enforcement, State's Attorney or to the Department. **All staff must be aware of their responsibility to report suspected child abuse and negelct directly to Law Enforcement, State's Attorney or to the Department.** **Correction: the reporting procedures were reviewed with all staff.**	**Compliance Plan** Suggested Completion Date: **12/30/2022** Status: **Corrected**	Actual Completion Date: **12/31/2022**

G. Record Keeping, Posting Information and Fire & Tornado Drills

40. Are staff records complete? 67:42:10:09 Note: Staff records are to be maintained at the facility for 6 months following the end of employment.

Corrections To Be Made:

JJ - Three References, Central Registry Check, Sex Offender Registry Check, Criminal Record Check, C A/N Report Statement
MJ - Three References, Central Registry Check, Sex Offender Registry Check, Criminal Record Check, C A/N Report Statement
SK - Criminal Record Check
LN - CPR
JO - CPR
GP - CPR
OP - Sex Offender Registry Check, Criminal Record Check
NS - Timely Orientation
ES - Timely Orientation
CT - Timely Orientation
AV - Timely Orientation, CPR
VW - Timely Orientation, CPR

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
12/30/2022	**03/06/2023**

Status: **Corrected**

41. Are children's records complete? 67:42:16:13 Note: Children's records are to be maintained at the facility for 6 months following the date care ceases.

Corrections To Be Made:

TF - Immunization Records

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
12/30/2022	**12/16/2022**

Status: **Corrected**

Aleisa Fritz	**11/30/2022**	**Chandra VanHout**	**11/30/2022**
Provider Signature	Date	Inspector Signature	Date