Program Inspection
Compliance Plan

Provider's Name:	**Oscar Howe Elementary CLC**	City:	**Sioux Falls**	Provider Number:	**018043139**
Inspector:	**Rita Trager**	Date of Inspection:	**09/13/2023**	Time of Inspection:	**3:00 PM**

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

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

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

Corrections To Be Made:	Agency Action:	
DP - C A/N Report Statement	**Compliance Plan**	
	Suggested Completion Date:	Actual Completion Date:
	08/31/2023	**10/04/2023**
	Status: **Corrected**	

E. Written Procedures

50. Is there a written emergency preparedness and response plan in place which covers all areas required to include: evacuation; relocation; shelter-in-place; lock-down procedures; procedures for communication & reunification with families; continuity of operations; and accommodation of infants & toddlers, children with disabilities and children with chronic medical conditions? 67:42:17:43

Corrections To Be Made: **Emergency preparedness plan (EPP) to be updated and submitted to OLA.** ***Correction: EPP received.**	Agency Action: **Compliance Plan** Suggested Completion Date: **09/30/2023** Actual Completion Date: **09/28/2023** Status: **Corrected**

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: **EPP to be reviewed and available to all staff including substitutes.** ***Correction: EPP requirement has been reviewed with the director and on site staff.**	Agency Action: **Compliance Plan** Suggested Completion Date: **09/30/2023** Actual Completion Date: **09/28/2023** Status: **Corrected**

Miranda Sullinger	**09/13/2023**	**Rita Trager**	**09/13/2023**
Provider Signature	Date	Inspector Signature	Date