Program Inspection
Compliance Plan

Provider's Name:	**Little Explorers Childcare**	City:	**Sioux Falls**	Provider Number:	**018043236**
Inspector:	**Morgan Jensen**	Date of Inspection:	**01/02/2025**	Time of Inspection:	**9:00 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 Note: 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:

During the inspection there were 17 children with a total of 7 under the age of 3 with two staff members present. The provider preparing breakfast was assigned to work in the room, however, was not present.

The provider will ensure ratio is maintained at all times.

The provider corrected the issue immediately to ensure ratio was maintained.

Agency Action: **Compliance Plan**

Suggested Completion Date:	Actual Completion Date:
01/22/2025	**01/02/2025**

Status: **Corrected Immediately**

B. Provider Practices

25. Are child and family information, records, and photos kept confidential and not released to unauthorized individuals? Is written parental consent obtained before publicly sharing information, including photos? 67:42:17:16

Corrections To Be Made:

During the inspection children's files did not contain written parental consent for photo release.

The provider will ensure parental consent for photo release is documented and maintained.

The provider obtained documentation of parental consent for photo release.

Agency Action: **Compliance Plan**

Suggested Completion Date:	Actual Completion Date:
01/22/2025	**01/20/2025**

Status: **Corrected**

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

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

Corrections To Be Made:

DS - Immunization Records

Agency Action: **Compliance Plan**

Suggested Completion Date:	Actual Completion Date:
01/22/2025	**02/06/2025**

Status: **Corrected**

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

Corrections To Be Made:	Agency Action:
AA - CPR **OM - Orientation Complete, CPR**	**Compliance Plan** Suggested Completion Date: **01/22/2025** Actual Completion Date: **02/06/2025** Status: **Corrected**

D. Transportation

46. If transporting children, is written permission from each child's parent obtained? 67:42:17:45

Corrections To Be Made:	Agency Action:
At the time of inspection children files did not contain parental written permission for transportation. **The provider will ensure that parental written permission for transportation is documented and maintained.** **The provider obtained documentation of parental permission for transportation for all children.**	**Compliance Plan** Suggested Completion Date: **01/22/2025** Actual Completion Date: **01/20/2025** 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:
At the time of inspection, providers were not knowledgeable of the emergency preparedness and response procedures. **The provider will ensure that all staff are knowledgeable of emergency procedures.** **The provider informed all staff of the emergency preparedness and response plan and procedures.**	**Compliance Plan** Suggested Completion Date: **01/22/2025** Actual Completion Date: **01/20/2025** Status: **Corrected**

F. Insurance

52. Does the program have proof of current liability insurance? 67:42:17:43

Corrections To Be Made:	Agency Action:
At the time of inspection, the program did not have current documentation of liability insurance. **The provider will ensure current documentation of liability insurance is maintained.** **The provider obtained current documentation of liability insurance.**	**Compliance Plan** Suggested Completion Date: **01/22/2025** Actual Completion Date: **01/11/2025** Status: **Corrected**

Provider Signature

Daniel Christensen — Name
02/11/2025 — Date

Inspector Signature

Morgan Jensen — Name
02/11/2025 — Date