

Program Inspection Compliance Plan

Provider's Name: **Centerville OST Program**

City: **Centerville**

Provider Number: **010501773**

Inspector: **Deb Bigge**

Date of Inspection: **08/08/2024**

Time of Inspection: **9:38 AM**

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

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 program does not provide meals, only snacks.

A snack menu noting the options available for children to choose from needs to be posted.

The snack menu was posted.

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
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08/23/2024	08/16/2024
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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:

Documentation of sufficient tornado and lockdown drills completed within the past year was not available.

The Provider will complete one tornado and one lockdown drill in the next month.

Verification of completed drills was received.

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
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09/09/2024	09/16/2024
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Status: **Corrected**

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

Corrections To Be Made:

AP - Enrollment Date, Information Sheet, Emergency Contact, Emergency Permission, Immunization Records

HP - Enrollment Date, Information Sheet, Emergency Contact, Emergency Permission, Immunization Records

KP - Enrollment Date, Information Sheet, Emergency Contact, Emergency Permission, Immunization Records

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
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08/23/2024	10/07/2024
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Status: **Corrected**

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

Corrections To Be Made:

SE - Sex Offender Registry Check, Training

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
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08/16/2024	08/16/2024
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Status: **Corrected**

45. Is the individual responsible for planning and implementing the program at least 18 years of age and is the required education or work experience maintained? 67:42:17:09

Corrections To Be Made:

The individual designated as meeting the program administrator requirements does not regularly work at the program.

The program administrator must be on site for a sufficient number of the program's operating hours to provide oversight.

A Corrective Action Plan was implemented to allow additional time for the program to identify a program administrator who meets all requirements of the position.

Agency Action:

Corrective Action Plan

Suggested Completion Date:	Actual Completion Date:
11/15/2024	10/16/2024

Status: **Corrected**

F. Insurance

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

Corrections To Be Made:

Verification of current liability insurance is needed.

Proof of current insurance is to be on file at the program.

Verification of current insurance information was received.

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
08/23/2024	10/07/2024

Status: **Corrected**

53. If transportation is provided, does the program have proof of liability insurance for the vehicle(s) used to transport children? 67:42:17:45

Corrections To Be Made:

Submit verification of current vehicle insurance.

Proof of current insurance is to be on file at the program.

Verification of current insurance information was received.

Agency Action:

Compliance Plan

Suggested Completion Date:	Actual Completion Date:
08/23/2024	10/07/2024

Status: **Corrected**

Miscellaneous Rule Violations

67:42:17:33 - Bathroom and sink requirements

Corrections To Be Made:

The bathroom located within the main room used by the program does not have a handsink within the bathroom. A handsink is located outside of the bathroom but is not accessible without opening a door.

Unobstructed access to a handwashing sink is required in a bathroom. The sink must be within the same space as the toilet and must be accessible without opening a door or other barrier.

A Corrective Action Plan was implemented to allow additional time for the program to correct this issue. A bathroom outside of the main meeting area will be used until the issue is corrected; this is not a feasible permanent solution as it requires the program to modify their supervision plan.

Agency Action:

Corrective Action Plan

Suggested Completion Date:	Actual Completion Date:
12/31/2024	12/31/2024

Status: **Corrected**



Provider Signature

Liz Peterson

Name

08/15/2024

Date



Inspector Signature

Deb Bigge

Name

08/15/2024

Date