

Date Issued	March 25, 2025	Status	Closed
Provider Name	RURAL AMERICA INITIATIVES		
Provider ID	010601775		
Provider Address	2112 S Valley Dr, Rapid City, SD 57703, USA		
Provider Contact	Anne Reddy		

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

Compliance Plan Action #1

Administrative Rule:

67:42:17:15

A child care provider shall maintain a record for each employee that includes:

- (1) The employee's name and date of birth;
- (2) The dates on which the employee began and ended employment;
- (3) Documentation of orientation and ongoing annual training, if the employee provides direct care and supervision of children;
- (4) A statement that:
 - (4a) Defines child abuse and neglect;
 - (4b) Sets forth the employee's responsibility to report all incidents of child abuse or neglect in accordance with SDCL 26-8A-3 and 26-8A-8; and
 - (4c) Is signed by the employee; and
- (5) The results of the background check.

All records required by this section must be reviewed and updated at least annually by the provider, made available to the department for verification of the contents, and retained by the provider for six months after the employee leaves the program.

Summary of Non-Compliance Finding:

One provider was missing a five year background rescreen.

Corrections to be Made:

The program will complete a five-year background rescreen for the provider and submit the results to the Office of Licensing & Accreditation.

Corrections Made:

Program completed a five year background screening on provider and submitted the results to the Office of Licensing & Accreditation.

Anticipated Completion Date:

March 14, 2025

Date Completed:

March 10, 2025

Compliance Plan Action #2

Administrative Rule:

67:42:17:42

A provider shall maintain a record for each child that includes:

- (1) The child's name and date of birth;
- (2) The parent or guardian's name and telephone number;
- (3) An emergency contact name and telephone number;
- (4) Parental permission for emergency medical treatment;
- (5) The names of individuals authorized to pick up the child;
- (6) Health information, including any allergies or special needs;
- (7) A current immunization record or, for a school-age program, the name of the child's school;
- (8) Parental permission for medication;
- (9) The child's attendance records;
- (10) The date of the child's enrollment; and
- (11) The date on which the child's enrollment ends.

The provider shall annually review and update each record required under this section, and make the child's record available to the department, upon request.

Summary of Non-Compliance Finding:

One child's record does not contain emergency contact information.

Corrections to be Made:

The program will obtain an emergency contact name and phone number for the child's record and submit the updated information to the Office of Licensing & Accreditation.

Corrections Made:

The program obtained an emergency contact name and phone number for the child's record and submitted to the Office of Licensing & Accreditation.

Anticipated Completion Date:

March 14, 2025

Date Completed:

March 14, 2025

Your signature below certifies you have read and understand the non-compliance findings and agree to make corrections to be compliant with the identified administrative rules.

Anne Reddy

Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

March 25, 2025

Date

The Department of Social Services, Office of Licensing and Accreditation has reviewed and accepted the above plan.

Andrea Neff

Printed Name of DSS Staff



2/27/2025, 12:02:32 PM

Signature of DSS Staff:

February 27, 2025

Date
