

Date Issued	April 15, 2025	Status	Closed
Provider Name	HOFER, JANET		
Provider ID	010604618		
Provider Address	8100 W 48th St, Sioux Falls, SD 57106, USA		
Provider Contact	JANET HOFER		

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:

67:42:17:29

A provider shall have a written care plan for each child who has a known food allergy. The plan must contain instructions regarding any food allergens, steps to be taken to avoid that food, and a detailed treatment plan to be implemented if the child has an allergic reaction.

Summary of Non-Compliance Finding:

The provider did not have a written care plan for all children in care with a known food allergy.

Corrections to be Made:

A provider shall have a written care plan for each child who has a known food allergy. The plan must contain instructions regarding any food allergens, steps to be taken to avoid that food, and a detailed treatment plan to be implemented if the child has an allergic reaction.

Corrections Made:

The provider obtained a written care plan for all children in care with a known food allergy.

Anticipated Completion Date:

April 25, 2025

Date Completed:

April 21, 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:

Not all children records included the required information outlined in ARSD 67:42:17:42.

Corrections to be Made:

All children records need to include the required information outlined in 67:42:17:42.

Corrections Made:

All children records were updated to include the required information outlined in ARSD 67:42:17:42.

Anticipated Completion Date:

April 25, 2025

Date Completed:

April 21, 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.

Janet Hofer

Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

April 25, 2025

Date

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

Brooke Flemmer

Printed Name of DSS Staff



4/15/2025, 11:50:21 AM

Signature of DSS Staff:

April 15, 2025

Date