

Date Issued	March 18, 2025	Status	Closed
Provider Name	REDEEMING ROOTS		
Provider ID	014512626		
Provider Address	1101 Broadway Ave Suite 123, Yankton, SD 57078, USA		
Provider Contact	Kody Frick		

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:

67:42:17:37

Center and school-age programs operating outside of a school building shall follow applicable construction and fire safety requirements, as outlined in chapters 61:15:05 and 61:15:06. School-age programs operating in a school building shall follow applicable construction and fire safety requirements, as outlined in chapters 61:15:01, 61:15:02, and 61:15:07.

A family day care home must have the following fire safety measures in place:

- (1) A working smoke detector must be located on each level of the home;
- (2) A fully charged, portable fire extinguisher, with a minimum 2A rating, as identified on the extinguisher label, must be kept in or within fifteen feet of the kitchen or food preparation area;
- (3) A carbon monoxide detector must be installed, according to the manufacturer's instructions, if a fuel burning appliance is present in the home;
- (4) Each level of the home must have at least two remote exits that shall remain clear of obstructions. One of these exits must be a standard-sized door, and the other may be either a standard-sized door or an unobstructed, operable window, having at least five square feet of openable space, with a minimum width of twenty inches and a minimum height of twenty-four inches; and
- (5) Whenever a portable space heater, a wood burning stove, or a fireplace is in use, the heater, stove, or fireplace must be inaccessible to children.

Summary of Non-Compliance Finding:

The east door has a deadbolt and was locked during the inspection.

Corrections to be Made:

The deadbolt must be removed and all exit doors must be openable from the inside at all times.

Corrections Made:

Verification was received that the deadbolt was removed.

Anticipated Completion Date:
March 19, 2025

Date Completed:
May 11, 2025

Compliance Plan Action #2

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:

An allergy plan is not on file for a child with a known food allergy.

Corrections to be Made:

A written care plan is needed for all known food allergies.

Corrections Made:

Verification of a completed allergy plan was received.

Anticipated Completion Date:

March 19, 2025

Date Completed:

March 19, 2025

Compliance Plan Action #3

Administrative Rule:

67:42:17:43

A provider shall have:

- (1) A written emergency preparedness and response plan for emergencies resulting from a natural disaster or a man-caused event;
- (2) A written plan for evacuation, relocation, shelter-in-place, or a lock-down, that includes accommodations for infants, toddlers, and children with disabilities or medical conditions;
- (3) A written procedure for communication and reunification with parents; and
- (4) A written procedure for the continuity of operations.

A provider shall practice the evacuation, shelter-in-place, and lock down procedures, outlined in the emergency preparedness and response plan, at least twice each calendar year. The provider shall document the dates on which the procedures are practiced. A provider shall communicate the emergency preparedness and response plan to each individual at the time the individual begins employment. Except for family day care, all child care providers shall have liability insurance. Proof of current liability insurance shall be made available to the department, upon request.

Summary of Non-Compliance Finding:

No emergency drills have been completed.

Corrections to be Made:

One evacuation, one shelter-in-place and one lockdown drill must be completed within the next month.

Corrections Made:

Verification of completed drills was received.

Anticipated Completion Date:

April 12, 2025

Date Completed:

April 21, 2025

Compliance Plan Action #4

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:

Information was either incomplete or needs to be updated in 11 children's files.

Corrections to be Made:

All required information must be on file for every child in care.

Corrections Made:

Corrections were not completed within the designate timeframe; a Corrective Action Plan was implemented to assist the program with achieving compliance.

Anticipated Completion Date:

April 12, 2025

Date Completed:

May 12, 2025

Compliance Plan Action #5

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:

Information was incomplete for 11 provider files.

Corrections to be Made:

All required information must be on file for all providers.

Corrections Made:

Corrections were not completed within the designated timeframe; a Corrective Action Plan was implemented to assist the program with achieving compliance.

Anticipated Completion Date:

April 12, 2025

Date Completed:

May 12, 2025

Compliance Plan Action #6

Administrative Rule:

67:42:17:17

All providers shall, within ninety days after the date of employment, complete and obtain documentation of orientation training in the following areas:

- (1) Prevention and control of infectious diseases;
- (2) Prevention of sudden infant death syndrome and the use of safe sleep practices, if infant care is provided;
- (3) Administration of medication;
- (4) Prevention of and response to an emergency due to food allergies and other allergic reactions;
- (5) Building and physical premises safety;
- (6) Prevention of shaken baby syndrome and abusive head trauma, if infant care is provided;
- (7) Emergency preparedness and response planning for an emergency resulting from a natural disaster or man-caused event;
- (8) Handling and storage of hazardous materials and the appropriate disposal of biological contaminants;
- (9) Precautions in transporting a child, if the program provides transportation;
- (10) Recognition and reporting of child abuse and neglect;
- (11) Pediatric first aid;
- (12) Pediatric cardiopulmonary resuscitation; and
- (13) Child development.

Before a provider may care for children without supervision, the provider must complete orientation training in each of the areas listed in this section.

Summary of Non-Compliance Finding:

Six providers did not complete all orientation training topics within 90 days of beginning employment.

Corrections to be Made:

All remaining orientation training topics must be completed within a month.

Corrections Made:

Corrections were not completed within the designated timeframe; a Corrective Action Plan was implemented to assist the program with achieving compliance.

Anticipated Completion Date:

April 12, 2025

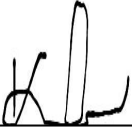
Date Completed:

May 12, 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.

Koty Frick

Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

March 18, 2025

Date

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

Deb Bigge

Printed Name of DSS Staff



3/13/2025, 4:49:50 PM

Signature of DSS Staff:

March 13, 2025

Date
