COMPLIANCE PLAN
OFFICE OF LICENSING & ACCREDITATION

South Dakota Department of Social Services

Date Issued	April 29, 2025	Status	Closed
Provider Name	OUR HOUSE CHILD CARE, LLC.		
Provider ID	010610997		
Provider Address	611 US-14 suite 1, Fort Pierre, SD 57532, USA		
Provider Contact	Angie Anderson		

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 southeast exit to the playground only had a
19" width to the door. Tables and chairs restricted the width.
A 36" path must be maintained to this emergency exit.

Corrections to be Made:

The program needs to remove items that are blocking part of the southeast exit door.

Corrections Made:

Verification of the cleared exit was received by the Office of Licensing & Accreditation.

Anticipated Completion Date:	Date Completed:
May 01, 2025	April 29, 2025

Compliance Plan Action #2

Administrative Rule:

67:42:17:37

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(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
fire extinguishers were last inspected in June 2022. These must be
inspected annually.

Corrections to be Made:

Fire extinguishers must be inspected annually.

Corrections Made:

Provider has sent verification that the fire extinguishers have been inspected.

Anticipated Completion Date:	**Date Completed:**
May 01, 2025	May 27, 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.

Angie Anderson

Printed Name of Provider/Agency Contact

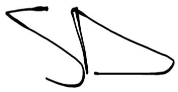
April 28, 2025

Signature of Provider/Agency Contact — Date

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

Sarah Deakins

Printed Name of DSS Staff



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Signature of DSS Staff:

April 25, 2025

Date