

Date Issued	June 03, 2025	Status	Closed
Provider Name	SCARBROUGH CENTER		
Provider ID	018030125		
Provider Address	2304 N Lackey Pl, Sioux Falls, SD 57107, USA		
Provider Contact	Robin Sjogren		

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:

67:42:17:27

Before any medication is administered to a child, permission of the parent or guardian must be documented and must include the name of the child, the name of the medication, and the dates, times, and dosage of the medication. The medication must be provided by the parent and kept in the original container, with the original label. The label for a prescription medication must contain the child's name, the amount and frequency of dosage, the expiration date, the physician or other licensed practitioner's name, and instructions for storage. The medication must be returned to the parent when no longer needed or expired. The provider shall document, in the child's record, any medication administered to a child and shall include the dose, the name of the child, the time and date administered, and the name of the person administering the medication. The documentation must be retained for at least six months and be made available to the child's parent upon request.

Summary of Non-Compliance Finding:

There were a couple medications kept on site that were not returned to parents when no longer needed.

Corrections to be Made:

The medication must be returned to the parent when no longer needed or expired.

Corrections Made:

Both medications that were no longer needed were returned to parents immediately.

Anticipated Completion Date:
June 20, 2025

Date Completed:
June 03, 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 child records included the required information outlined in ARSD 67:42:17:42.

Corrections to be Made:

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

Corrections Made:

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

Anticipated Completion Date:

June 20, 2025

Date Completed:

June 16, 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.

Robin Sjogren

Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

June 03, 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



Signature of DSS Staff:

June 03, 2025

Date