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Date Issued	July 01, 2025	Status	Closed
Provider Name	EMBE - SOUTH CHILDCARE		
Provider ID	010605399		
Provider Address	3510 W Ralph Rogers Rd, Sioux Falls, SD 57108, USA		
Provider Contact	Sarah Meagher		

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**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:**

During the inspection, one child's medication was missing an authorization form, one medication form listed two medications on the same form, and two children's medication authorization forms did not have a start date.

At the time of inspection, a child's medication was not kept in the original container with the original label.

At the time of inspection, an expired medication had not been returned to the parents.

**Corrections to be Made:**

The provider will ensure that proper documentation for the children's medications is obtained.

The provider will ensure the child's medication is kept in the original container, with the original label.

The provider will ensure that expired or unused medications are returned to the parents.

**Corrections Made:**

The provider submitted current documentation for the children's medications on 5/19/2025.

The provider submitted documentation of the proper labeling of children's medications on 5/19/2025.

The provider returned the expired medication to the child's parents on 5/19/2025.

**Anticipated Completion Date:**  
June 13, 2025

**Date Completed:**  
June 13, 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:**

During inspection, a child's written allergy care plan did not contain all required information.

**Corrections to be Made:**

The provider will ensure that the child's written allergy care plan contains all required information.

**Corrections Made:**

The provider submitted a written allergy care plan containing all required information for the child with known food allergies to OLA.

**Anticipated Completion Date:**  
May 23, 2025

**Date Completed:**  
May 19, 2025

**Compliance Plan Action #3**

**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:
  - (a) Defines child abuse and neglect;

- (b) 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
  - (c) 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:**

At the time of inspection, 3 employee files did not contain Level II Orientation, 2 employee records did not contain current background checks, and one employee record did not contain current CPR.

**Corrections to be Made:**

The provider will ensure all required annual training, background checks, and current CPR certification are obtained for each staff member.

**Corrections Made:**

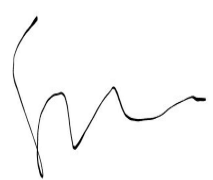
The provider submitted current documentation of all required information for each staff member on 05/28/2025.

**Anticipated Completion Date:**  
June 13, 2025

**Date Completed:**  
June 13, 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.**

Sarah Meagher  
 \_\_\_\_\_  
 Printed Name of Provider/Agency Contact



\_\_\_\_\_  
 Signature of Provider/Agency Contact

June 18, 2025  
 \_\_\_\_\_  
 Date

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

Morgan Jensen

Printed Name of DSS Staff

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5/5/2025, 3:40:33 PM

Signature of DSS Staff:

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May 05, 2025

Date

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