

Date Issued	July 10, 2025	Status	Closed
Provider Name	STORES, SHANNON		
Provider ID	016598444		
Provider Address	1005 10th Ave, Belle Fourche, SD 57717, USA		
Provider Contact	SHANNON STORES		

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:

67:42:17:42

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:

Provider has eleven child records that are missing required information.

Provider does not update all children's records annually.

Corrections to be Made:

Provider will need to submit the required missing children's information and a written plan on how children's records will be updated annually to the Office of Licensing & Accreditation.

Corrections Made:

Provider submitted the required missing children's information and will ensure child records will be reviewed annually.

Anticipated Completion Date:

Date Completed:

Compliance Plan Action #2

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:

Provider did not have documentation for the two lock-down drills for 2024.

Corrections to be Made:

Provider will conduct two lock down drills and submit documentation to the Office of Licensing & Accreditation (OLA).

Corrections Made:

Provider submitted the missing emergency preparedness lock down drills to OLA.

Anticipated Completion Date:

July 17, 2025

Date Completed:

July 17, 2025

Compliance Plan Action #3

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:

Smoke detector in the basement is not working; it appears the battery is dead.

Corrections to be Made:

Provider will need to replace the batteries in the smoke detector located in the basement and ensure it is working properly.

Corrections Made:

Provider changed the batteries in the smoke detector located in the basement and ensured it is working properly.

Anticipated Completion Date:

July 17, 2025

Date Completed:

July 16, 2025

Compliance Plan Action #4

Administrative Rule:

67:42:17:32

All walls, ceilings, floors, and equipment must be easily cleanable, kept clean, and in good repair. Heating and cooling systems must maintain a temperature between sixty-five degrees Fahrenheit and seventy-five degrees Fahrenheit. For a child care center and school-age program, all heating and cooling systems must be inspected annually, by a certified technician.

Food preparation areas, including tables and countertops, must be made of a smooth, nonporous material, kept clean and sanitized, be free of cracks, and be in good repair. Center and school-age programs, in which more than twenty children are cared for, must provide a ventilation hood over all cooking areas. The hood must be appropriate for the type of appliance and intended use, as required in § 61:15:01:01.

Summary of Non-Compliance Finding:

Basement has a pet urine odor.

Corrections to be Made:

Provider will need to clean the basement to eliminate the pet urine odor and notify Office of Licensing & Accreditation that the issue has been addressed.

Corrections Made:

Provider shampooed the carpets in the basement helping to eliminate the pet urine smell.

Anticipated Completion Date:
July 17, 2025

Date Completed:
July 13, 2025

Compliance Plan Action #5

Administrative Rule:

67:42:17:39

For family day care providers, unused electrical outlets must have an outlet plug cover, have a tamper-resistant cover, or be made inaccessible to a child.

For center and school-age programs, unused electrical outlets must have a self-closing outlet cover or tamper-resistant cover.

Summary of Non-Compliance Finding:

Provider did not have all unused electrical outlets cover with an outlet plug cover.

Corrections to be Made:

Provider will need to cover all unused electrical outlets with an outlet plug cover and submit verification to the Office of Licensing & Accreditation.

Corrections Made:

Provider covered all unused electrical outlets with an outlet plug cover.

Anticipated Completion Date:
July 17, 2025

Date Completed:
July 13, 2025

Compliance Plan Action #6

Administrative Rule:

67:42:17:40

A pet, while permitted in the presence of children receiving care, must be current with its vaccinations, and have clean and sanitary living areas, at all times.

A pet with a history of aggressive behavior, which poses a risk to the safety of children, must be confined and kept away from children.

Summary of Non-Compliance Finding:

Provider did not have current pet vaccinations.

Corrections to be Made:

Provider will submit current pet vaccinations.

Corrections Made:

Provider submitted current vaccinations for all pets.

Anticipated Completion Date:
July 17, 2025

Date Completed:
July 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.

Shannon Stores

Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

July 07, 2025

Date

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

Andrea Neff

Printed Name of DSS Staff



7/3/2025, 10:54:11 AM

Signature of DSS Staff:

July 03, 2025

Date