

Date Issued	July 28, 2025	Status	Closed
Provider Name	GOOD NEWS CHILDREN'S CENTER		
Provider ID	018038530		
Provider Address	1800 S Valley View Rd, Sioux Falls, SD 57106, USA		
Provider Contact	Tammy Westergaard		

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:

67:42:17:43

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:

During this inspection, it was observed that the east wing and the cafeteria contained excessive combustible materials on the walls and ceilings.

Additionally, the exit door (D) required more force than usual to open.

Corrections to be Made:

In corridors providing access to exits, combustible decorations must cover less than 10% of the wall area. The exit door will need to be adjusted to open without force.

Corrections Made:

The provider submitted evidence of the completed the items to OLA.

Anticipated Completion Date:
August 15, 2025

Date Completed:
August 06, 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.

Tammy Westergaard

Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

July 28, 2025

Date

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

Teri Pieters

Printed Name of DSS Staff



8/6/2025, 8:07:33 AM

Signature of DSS Staff:

August 06, 2025

Date