

Date Issued	August 19, 2025	Status	Closed
Provider Name	<u>Kelsey Baker</u>		
Provider ID	<u>1329973893</u>		
Provider Address	<u>820 N Ames St, Spearfish, SD 57783, USA</u>		
Provider Contact	<u>Kelsey Baker</u>		

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:

No child records were reviewed during the inspection.

Corrections to be Made:

Provider will need to submit all current children records to the Office of Licensing & Accreditation for review.

Corrections Made:

The provider submitted verification that all children's records were updated and complete.

Anticipated Completion Date:
September 01, 2025

Date Completed:
September 26, 2025

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 an emergency preparedness plan.

Corrections to be Made:

An emergency preparedness plan must be developed and submitted to the Office of Licensing and Accreditation.

Corrections Made:

Provider developed an emergency preparedness plan and submitted a copy to the Office of Licensing and Accreditation.

Anticipated Completion Date:

September 01, 2025

Date Completed:

September 11, 2025

Compliance Plan Action #3

Administrative Rule:

67:42:17:38

The following must be inaccessible to a child:

- (1) Firearms;
- (2) Pellet guns, BB guns, and cap guns;
- (3) Matches and lighters;
- (4) Tobacco products;
- (5) Choking and strangulation hazards;
- (6) Items capable of being pulled or tipped onto a child;
- (7) A platform measuring more than thirty inches above ground level, unless surrounded by a railing that is at least

thirty-six inches tall with no more than five inches between openings; and
(8) Other hazardous condition as identified by the department.

The department may direct a provider to remove or correct a hazardous condition or circumstance not covered in this chapter, if the department considers the conditions or circumstances to have the potential to cause injury or illness to the children in care.

Summary of Non-Compliance Finding:

Provider has two outside play structures that have a climbing wall with no hand-rails; both are more than thirty inches above ground level.

Corrections to be Made:

Provider will need to install hand-rails on both structures and submit proof to the Office of Licensing & Accreditation.

Corrections Made:

Provider installed handrails on both play structures and sent pictures to the Office of Licensing and Accreditation.

Anticipated Completion Date:
September 01, 2025

Date Completed:
September 02, 2025

Compliance Plan Action #4

Administrative Rule:

67:42:17:30

Providers shall post a weekly menu that indicates meals and snacks to be served that week.

Summary of Non-Compliance Finding:

The provider did not have menus.

Corrections to be Made:

Menus must be developed and submitted to the Office of Licensing and Accreditation.

Corrections Made:

Provider submitted verification of her menu to the Office of Licensing and Accreditation.

Anticipated Completion Date:
September 01, 2025

Date Completed:
September 02, 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.

Kelsey baker

Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

August 19, 2025

Date

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

Tina Uecker

Printed Name of DSS Staff



8/19/2025, 2:19:38 PM

Signature of DSS Staff:

August 19, 2025

Date