

Date Issued	October 01, 2025	Status	Closed
Provider Name	Oahe Family YMCA		
Provider ID	015500848		
Provider Address	900 E Church St, Pierre, SD 57501, USA		
Provider Contact	Lisa Maunu		

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:**

At the time of the inspection, there were several child records missing information such as current immunizations, emergency contacts, and an allergy plan.

#### **Corrections to be Made:**

Child records must include all the above information.

#### **Corrections Made:**

Verification of all missing child records has been received.

**Anticipated Completion Date:**  
September 17, 2025

**Date Completed:**  
September 23, 2025

## Compliance Plan Action #2

### **Administrative Rule:**

67:42:17:46

A provider shall complete pediatric first aid training every five years and maintain documentation of the training. A provider must be certified in pediatric cardiopulmonary resuscitation. The certification must include a hands-on skills test.

A provider shall work under supervision until the provider has completed the training required by this section. The supervisor shall have completed their pediatric first aid training and be certified in pediatric cardiopulmonary resuscitation.

### **Summary of Non-Compliance Finding:**

At the time of the inspection, the program had two staff members needing pediatric CPR certification.

### **Corrections to be Made:**

All staff must have pediatric CPR certification with a hands-on skills test within 90 days of employment.

### **Corrections Made:**

Verification has been received.

**Anticipated Completion Date:**  
September 10, 2025

**Date Completed:**  
September 30, 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 the inspection, the program had several staff members needing orientation training, ongoing annual training, and start dates.

**Corrections to be Made:**

Providers must maintain employee records that contain the above information.

**Corrections Made:**

Verification received.

**Anticipated Completion Date:**

September 10, 2025

**Date Completed:**

September 29, 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:**

At the time of the inspection, the program did not have a weekly lunch or snack menu posted.

**Corrections to be Made:**

Providers must post the weekly lunch or snack menu.

**Corrections Made:**

Verification of lunch and snack menu's has been received.

**Anticipated Completion Date:**

September 10, 2025

**Date Completed:**

September 12, 2025

**Compliance Plan Action #5**

**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:**

At the time of the inspection, there was no documentation of the drills conducted in 2024.

**Corrections to be Made:**

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.

**Corrections Made:**

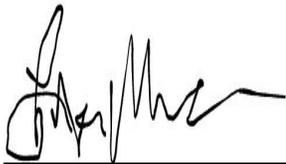
Verification of drills conducted has been received.

**Anticipated Completion Date:**  
September 10, 2025

**Date Completed:**  
September 08, 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.**

Lisa Maunu  
Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

October 01, 2025

Date

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

Sarah Deakins  
Printed Name of DSS Staff



8/29/2025, 5:34:33 PM  
Signature of DSS Staff:

August 29, 2025

Date