

Date Issued	October 08, 2025	Status	Closed
Provider Name	IBACH, STEPHANIE		
Provider ID	018042586		
Provider Address	48280 SD-42, Brandon, SD 57005, USA		
Provider Contact	STEPHANIE IBACH		

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:

Not all children records included the required information outlined in ARSD 67:42:17:42.

Corrections to be Made:

All children records need to include the required information outlined in 67:42:17:42.

Corrections Made:

All children records were updated to include the required information outlined in ARSD 67:42:17:42.

Anticipated Completion Date:
October 24, 2025

Date Completed:
October 14, 2025

Compliance Plan Action #2

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:

At the time of the inspection, there were not medication authorization forms for a child's emergency response medications and there was an expired medication that was not returned to the child's parent.

Corrections to be Made:

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 returned to the parent when no longer needed or expired

Corrections Made:

All medication authorization forms for child's emergency response medications were obtained and the expired medication was returned to the child's parent.

Anticipated Completion Date:
October 24, 2025

Date Completed:
October 14, 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.

Stephanie Ibach
Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

October 08, 2025
Date

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

Brooke Flemmer

Printed Name of DSS Staff



10/8/2025, 9:38:03 AM

Signature of DSS Staff:

October 08, 2025

Date