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|------------------|-----------------------------------|--------|--------|
| Date Issued      | November 17, 2025                 | Status | Closed |
| Provider Name    | KIDSTOP - HERMOSA                 |        |        |
| Provider ID      | 016598185                         |        |        |
| Provider Address | 11 4th St, Hermosa, SD 57744, USA |        |        |
| Provider Contact | Erin Wilkins                      |        |        |

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:**

67:42:17:25

All equipment, utensils, kitchenware, dining tables, and food contact surfaces of equipment must be washed, rinsed, and sanitized after each meal. Toys capable of being placed in a child's mouth must be cleaned and sanitized daily, using a solution approved by the department.

All providers, program employees, and children shall wash their hands with soap, before preparing food or beverages, eating, handling food, or feeding a child, and after changing a diaper, using the toilet, helping a child use a toilet, or coming into contact with bodily fluid.

**Summary of Non-Compliance Finding:**

Toys that come in contact with bodily fluid are not being properly sanitized.

Staff and children were using hand sanitizer in lieu of washing hands with soap and water.

**Corrections to be Made:**

Toys that come in contact with bodily fluid must be sanitized daily in a dishwasher or by using a product approved by the Office of Licensing and Accreditation (OLA). A written plan of correction must be submitted to OLA for approval.

All employees and children must wash their hands with soap before preparing food or beverages, eating, handling food, or feeding a child, and after changing a diaper, using the toilet, helping a child use a toilet, or coming into contact with bodily fluid. A written plan of correction must be submitted to OLA for approval.

**Corrections Made:**

The program purchased tubs to sanitize toys if they come in contact with bodily fluid.

Providers and children will wash hands with soap and water. They will not be using hand sanitizer in lieu of soap and water.

The program submitted a written statement verifying all of the items above.

## Compliance Plan Action #2

### **Administrative Rule:**

67:42:17:24

Before a child may be admitted to a registered or licensed day care provider, the provider must require the child's parent or guardian to submit a statement, signed by a licensed physician, physician's assistant, certified nurse practitioner, or community health nurse, or an immunization record from the South Dakota Immunization Information System, showing that the child meets the minimum immunization requirements according to 45 C.F.R. § 98.41(a)(1)(i)(A), in effect on September 30, 2016.

The provider shall ensure that immunizations of all children are current.

For children who begin the series late or are more than one month behind in immunizations, the documentation must show progress toward achieving immunization requirements, as determined by a licensed physician, or other licensed practitioner. A grace period may be approved by the department for a child experiencing homelessness or a child in foster care.

A child is exempt from meeting the minimum age-specific immunization levels if:

- (1) The child's parent or guardian has certification from a licensed physician, or other licensed practitioner, stating that the physical condition of the child is such that an immunization would endanger the child's life or health; or
- (2) The child's parent or guardian has signed a written statement that the child is an adherent to a religious doctrine whose teachings are opposed to such immunizations.

If a child becomes ill while at a day care, the provider must separate the child from other children and notify the child's parents. If any child in the program contracts a communicable disease, the provider must notify the Department of Health. The program provider shall follow the Department of Health's recommendations for addressing a situation involving a communicable disease.

To prevent the spread of an infestation or infectious disease, a program shall provide an individual storage unit or container for each child's personal articles.

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

Individual storage spaces for children's personal belongings were not available.

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

To prevent the spread of an infestation or infectious disease, the program shall provide an individual storage unit or container for each child's personal articles. A written statement addressing the correction must be submitted to the Office of Licensing and Accreditation.

### **Corrections Made:**

The program has individual baskets that will be utilized to separate children's belongings. A statement was submitted

addressing this.

**Anticipated Completion Date:**  
November 28, 2025

**Date Completed:**  
December 02, 2025

### Compliance Plan Action #3

**Administrative Rule:**

67:42:17:31

An infant shall be fed according to the infant's schedule. The provider shall hold the infant's bottle when feeding the infant. The provider may not feed an infant by propping up the infant's bottle.

Food, including breast milk and formula, must be properly stored, kept at the proper temperature, and protected from potential contamination according to the preparing, feeding, and storing standards contained in **Caring for Our Children: National Health and Safety Performance Standards, 4th Edition**.

**Summary of Non-Compliance Finding:**

Fruits were being served to children without being properly washed.

**Corrections to be Made:**

Fresh produce should be rinsed and washed before served in an approved kitchen area. A written plan of correction must be submitted to OLA for approval.

**Corrections Made:**

The program submitted a written statement indicating that fruits and vegetables will be washed in the teachers lounge.

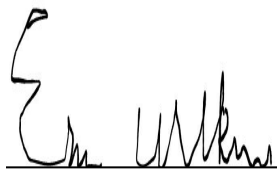
**Anticipated Completion Date:**  
January 16, 2026

**Date Completed:**  
December 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.**

Erin Wilkins

Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

November 17, 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

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11/17/2025, 3:42:30 PM

Signature of DSS Staff:

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November 17, 2025

Date

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