

Date Issued January 06, 2026 Status Closed

Provider Name MENNING, ROSEMARY

Provider ID 011509518

Provider Address 709 S Wisconsin St, Mitchell, SD 57301, USA

Provider Contact ROSEMARY MENNING

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:

At the time of the inspection the provider was unable to locate the drills conducted in 2024.

Corrections to be Made:

The provider will ensure drill dates for the previous calendar year are available during the inspection.

Corrections Made:

Verification received.

Anticipated Completion Date:

January 06, 2026

Date Completed:

January 05, 2026

Compliance Plan Action #2

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 was one child missing an updated immunization record.

Corrections to be Made:

The provider will ensure all required documents are in each child's record.

Corrections Made:

Verification has been received.

Anticipated Completion Date:

December 26, 2025

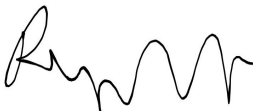
Date Completed:

December 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.

Rosemary Menning

Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

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



12/8/2025, 9:43:08 AM

Signature of DSS Staff:

December 08, 2025

Date