

Date Issued	March 02, 2026	Status	Closed
Provider Name	John Harris CLC		
Provider ID	1125038381		
Provider Address	3501 E 49th St, Sioux Falls, SD 57103, USA		
Provider Contact	Kyle Hoffman		

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:

67:42:17:29

A provider shall have a written care plan for each child who has a known food allergy. The plan must contain instructions regarding any food allergens, steps to be taken to avoid that food, and a detailed treatment plan to be implemented if the child has an allergic reaction.

Summary of Non-Compliance Finding:

The program did not have a written care plan for a child in care with a known food allergy. Additionally, another allergy written care plan needed to be updated.

Corrections to be Made:

A provider shall have a written care plan for each child who has a known food allergy. The plan must contain instructions regarding any food allergens, steps to be taken to avoid that food, and a detailed treatment plan to be implemented if the child has an allergic reaction.

Corrections Made:

The program obtained and updated both written care plans for children in care with a known food allergy.

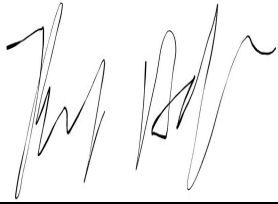
Anticipated Completion Date:
March 13, 2026

Date Completed:
March 02, 2026

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.

Kyle Hoffman

Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

March 02, 2026

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



2/25/2026, 8:53:58 AM

Signature of DSS Staff:

February 25, 2026

Date