# COMPLIANCE PLAN
## OFFICE OF LICENSING & ACCREDITATION

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| Date Issued | May 11, 2026 | Status | Closed |

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|---|---|
| Provider Name | ABIDING SAVIOR UNDER CHRIST'S CARE |
| Provider ID | 010605802 |
| Provider Address | 4100 S Bahnson Ave, Sioux Falls, SD 57103, USA |
| Provider Contact | Darin Dykstra |

**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:**

67:42:17:47

A child care provider shall immediately report any suspected abuse or neglect of a child to child protective services, law enforcement, or the States Attorney's office, and cooperate fully in the investigation of any incident.

**Summary of Non-Compliance Finding:**

Providers expressed uncertainty about the correct person or agency to contact when reporting suspected abuse or neglect.

**Corrections to be Made:**

The program will review mandatory reporting requirements with all providers, obtain updated signed Child Abuse and Neglect Statements, and submit them to the Office of Licensing and Accreditation.

**Corrections Made:**

The program reviewed mandatory reporting requirements with all providers, obtained updated signed Child Abuse and Neglect Statements, and submitted them to the Office of Licensing and Accreditation.

| **Anticipated Completion Date:** | **Date Completed:** |
|---|---|
| June 08, 2026 | May 21, 2026 |

### Compliance Plan Action #2

**Administrative Rule:**

67:42:17:19

Maximum group sizes are determined by individual room capacity and all space used must be approved for care by the department.

The provider shall ensure the number of children in care at any given time does not exceed the capacity identified on the license. Children of program employees must be included in the group size.

The provider shall ensure children to staff ratios are maintained in all settings, including large indoor and outdoor space; in spaces where more than twenty children are allowed, providers shall identify which children each provider is responsible to supervise; and when room capacity does not align with the ratio requirements, a maximum of three additional children may be included in the room capacity as long as ratios are maintained.

**Summary of Non-Compliance Finding:**

At the time of inspection, the floor plans for the gymnasium and playground had not been reviewed and approved by the department to determine the authorized capacities for those areas.

**Corrections to be Made:**

The program will provide updated floor plans to ensure accurate capacities for the gymnasium and playground.

**Corrections Made:**

The program provided updated floor plans to the Office of Licensing and Accreditation.

| **Anticipated Completion Date:** | **Date Completed:** |
|---|---|
| June 08, 2026 | June 05, 2026 |

## Compliance Plan Action #3

**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:**

Three child
files did not contain the required information outlined in ARSD 67:42:17:42.

**Corrections to be Made:**

The provider will obtain all information required to be included in the child's files.

**Corrections Made:**

The provider has gathered all necessary documentation for the child's files and submitted copies to the Office of

Licensing and Accreditation.

**Anticipated Completion Date:**
June 08, 2026

**Date Completed:**
May 21, 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.**

Rayna Lowe
Printed Name of Provider/Agency Contact

Signature of Provider/Agency Contact

May 11, 2026
Date

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

Teri Pieters
Printed Name of DSS Staff

5/8/2026, 10:21:19 AM
Signature of DSS Staff:

May 08, 2026
Date