

Date Issued	June 02, 2026	Status	Closed
Provider Name	EMBE - SOUTH CHILDCARE		
Provider ID	010605399		
Provider Address	3510 W Ralph Rogers Rd, Sioux Falls, SD 57108, USA		
Provider Contact	Caitlin Rothschadl		

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:

67:42:17:33

A provider shall meet the following requirements regarding bathrooms:

- (1) Bathroom facilities must be easily accessible by children and providers;
- (2) Hot water for faucets normally used by children in care may not exceed one hundred twenty degrees Fahrenheit;
- (3) Toilets and hand sinks must be kept clean and in good repair; and
- (4) For child care centers and school-age programs:
 - (a) All bathrooms must have natural or mechanical ventilation;
 - (b) Separate bathrooms must be available for males and females;
 - (c) Ratios for toilet and hand sinks must align with the minimum standards for plumbing and plumbing systems published by the plumbing commission.

Except in a family day care, hand sinks must be in the same room, or an unobstructed room adjacent to the diaper changing area. A handwashing sink used after diapering and toileting may not be used for food preparation.

Summary of Non-Compliance Finding:

At the time of inspection, the bathroom sink in Creator's A was observed to have visible buildup and was not maintained in a clean condition.

During inspection, a storage room was observed to have paper towels and toilet paper stored on the floor next to a mop bucket and chemical supplies.

Corrections to be Made:

The provider will submit verification that the bathroom is cleaned and maintained in a sanitary condition.

The provider will ensure that paper products are stored in a manner that prevents cross-contamination with cleaning supplies.

Corrections Made:

Verification showing the cleanliness of the bathroom was received.

Verification of compliance was received.

Anticipated Completion Date:

June 12, 2026

Date Completed:

May 27, 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.

Caitlin Rothschadl

Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

June 02, 2026

Date

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

Morgan Giraldo

Printed Name of DSS Staff



5/26/2026, 12:25:07 PM

Signature of DSS Staff:

May 26, 2026

Date