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|------------------|------------------------------------------|--------|--------|
| Date Issued      | June 16, 2026                            | Status | Closed |
| Provider Name    | Christina Morgan                         |        |        |
| Provider ID      | 663323563                                |        |        |
| Provider Address | 1161 Beadle Ct, Box Elder, SD 57719, USA |        |        |
| Provider Contact | Christina Morgan                         |        |        |

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:**

67:42:17:37

Center and school-age programs operating outside of a school building shall follow applicable construction and fire safety requirements, as outlined in chapters 61:15:05 and 61:15:06. School-age programs operating in a school building shall follow applicable construction and fire safety requirements, as outlined in chapters 61:15:01, 61:15:02, and 61:15:07.

A family day care home must have the following fire safety measures in place:

- (1) A working smoke detector must be located on each level of the home;
- (2) A fully charged, portable fire extinguisher, with a minimum 2A rating, as identified on the extinguisher label, must be kept in or within fifteen feet of the kitchen or food preparation area;
- (3) A carbon monoxide detector must be installed, according to the manufacturer's instructions, if a fuel burning appliance is present in the home;
- (4) Each level of the home must have at least two remote exits that shall remain clear of obstructions. One of these exits must be a standard-sized door, and the other may be either a standard-sized door or an unobstructed, operable window, having at least five square feet of openable space, with a minimum width of twenty inches and a minimum height of twenty-four inches; and
- (5) Whenever a portable space heater, a wood burning stove, or a fireplace is in use, the heater, stove, or fireplace must be inaccessible to children.

**Summary of Non-Compliance Finding:**

The provider did not have a 2A rated fire extinguisher.

The provider did not have a smoke detector in the basement.

The provider did not have a carbon monoxide detector.

**Corrections to be Made:**

The provider must have a 2A rated fire extinguisher and verification that one has been installed must be submitted to

the Office of Licensing and Accreditation.

A smoke detector must be installed in the basement and verification must be submitted to the Office of Licensing and Accreditation.

A carbon monoxide detector must be installed and a verification must be submitted to the Office of Licensing and Accreditation.

**Corrections Made:**

The provider installed a smoke detector in the basement and a carbon monoxide detector and verification was submitted to the Office of Licensing and Accreditation.

A 2A rated fire extinguisher was purchased and verification was submitted to the Office of Licensing and Accreditation.

**Anticipated Completion Date:**  
June 26, 2026

**Date Completed:**  
June 16, 2026

**Compliance Plan Action #2**

**Administrative Rule:**

67:42:17:40

A pet, while permitted in the presence of children receiving care, must be current with its vaccinations, and have clean and sanitary living areas, at all times.

A pet with a history of aggressive behavior, which poses a risk to the safety of children, must be confined and kept away from children.

**Summary of Non-Compliance Finding:**

Provider did not have proof of pet immunizations.

**Corrections to be Made:**

Provider must submitted the pet immunizations to the Office of Licensing and Accreditation.

**Corrections Made:**

Pet immunizations were updated and verification was submitted to the Office of Licensing and Accreditation.

**Anticipated Completion Date:**  
June 26, 2026

**Date Completed:**  
June 16, 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.**

Christina L Morgan

Printed Name of Provider/Agency Contact

Christina  
Morgan

\_\_\_\_\_  
Signature of Provider/Agency Contact

\_\_\_\_\_  
June 15, 2026

\_\_\_\_\_  
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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6/16/2026, 3:46:35 PM

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Signature of DSS Staff:

\_\_\_\_\_  
June 16, 2026

\_\_\_\_\_  
Date