# COMPLIANCE PLAN
## OFFICE OF LICENSING & ACCREDITATION

South Dakota Department of Social Services

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|---|---|---|---|
| Date Issued | July 07, 2026 | Status | Closed |

Provider Name HAPPY HEARTS
Provider ID 018028715
Provider Address 419 N Oaks Ave, Hartford, SD 57033, USA
Provider Contact Linda McMahon

**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:**

At the time of inspection, a file cabinet located in the office area was observed to obstruct the exit corridor, reducing the required 36-inch exit width to approximately 31 inches.

During inspection, the upstairs emergency exit window did not have the window crank attached, preventing the window from being readily opened for emergency egress.

At the time of inspection, documentation showing an annual inspection of the portable fire extinguisher was not available.

## Corrections to be Made:

The provider will ensure that all exit corridors remain free of obstructions and maintain a minimum exit width of 36 inches, including the exit corridor near the office area.

The provider will ensure that the upstairs emergency exit window is equipped with the necessary hardware and can be readily opened for emergency egress.

The provider will ensure that documentation showing an annual fire extinguisher inspection is obtained.

## Corrections Made:

Verification of all compliance items was received.

| **Anticipated Completion Date:** | **Date Completed:** |
| --- | --- |
| July 13, 2026 | July 13, 2026 |

**Compliance Plan Action #2**

## Administrative Rule:

67:42:17:32

All walls, ceilings, floors, and equipment must be easily cleanable, kept clean, and in good repair. Heating and cooling systems must maintain a temperature between sixty-five degrees Fahrenheit and seventy-five degrees Fahrenheit. For a child care center and school-age program, all heating and cooling systems must be inspected annually, by a certified technician.

Food preparation areas, including tables and countertops, must be made of a smooth, nonporous material, kept clean and sanitized, be free of cracks, and be in good repair. Center and school-age programs, in which more than twenty children are cared for, must provide a ventilation hood over all cooking areas. The hood must be appropriate for the type of appliance and intended use, as required in § 61:15:01:01.

## Summary of Non-Compliance Finding:

During inspection, documentation of the annual heating and cooling system inspection was not available.

## Corrections to be Made:

The provider will ensure that documentation of the annual heating and cooling inspection is obtained.

## Corrections Made:

Verification of compliance was received.

| **Anticipated Completion Date:** | **Date Completed:** |
| --- | --- |
| July 13, 2026 | July 13, 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.**

Linda McMahon
Printed Name of Provider/Agency Contact

July 07, 2026

Signature of Provider/Agency Contact | 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

6/23/2026, 9:52:43 AM

June 23, 2026

Signature of DSS Staff: | Date