

Date Issued	July 13, 2026	Status	In Process
Provider Name	Oahe Family YMCA		
Provider ID	015500848		
Provider Address	900 E Church St, Pierre, SD 57501, USA		
Provider Contact	Lisa Maunu		

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:

67:42:17:39

For family day care providers, unused electrical outlets must have an outlet plug cover, have a tamper-resistant cover, or be made inaccessible to a child.

For center and school-age programs, unused electrical outlets must have a self-closing outlet cover or tamper-resistant cover.

Summary of Non-Compliance Finding:

At the time of the inspection, several outlets in the nap room and multi-purpose room do not have tamper resistant or self closing outlets.

Corrections to be Made:

All unused electrical outlets must be self-closing or tamper-resistant.

Corrections Made:

Anticipated Completion Date:

July 27, 2026

Date Completed:

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:

At the time of the inspection, there was no documentation of an annual heating system inspection.

Corrections to be Made:

The program must have annual heating and cooling inspections and documentation must be available.

Corrections Made:

Anticipated Completion Date:

July 27, 2026

Date Completed:

Compliance Plan Action #3**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 the inspection, exit lights in the classroom are not self illuminated. It was also noted that all but one of the emergency lights worked at the time of the inspection.

Corrections to be Made:

All exit lights must self-illuminate and emergency lights be operational.

Corrections Made:

Anticipated Completion Date:

July 27, 2026

Date Completed:

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.

Lisa Maunu

Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

July 13, 2026

Date

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

Sarah Deakins

Printed Name of DSS Staff



7/10/2026, 3:18:47 PM

Signature of DSS Staff:

July 10, 2026

Date