



Corrective Action Plan

Date	August 18, 2026	Status	In Process
Issued			
Provider Name	Journey Kids Daycare Center		
Provider Type	Child Care		
License #	722194724		
Provider Address	804 S 5th St, Aberdeen, SD 57401, USA		
Provider Contact	Devin Hebeisen, Nicole Phillips		

The following administrative rules have been found to be out of compliance. A corrective action plan is required to bring the provider into compliance. Continued non-compliance could lead to revocation of your license.

Corrective Action Plan #1

Administrative Rule:

67:42:17:15

A child care provider shall maintain a record for each employee that includes:

- (1) The employee's name and date of birth;
- (2) The dates on which the employee began and ended employment;
- (3) Documentation of orientation and ongoing annual training, if the employee provides direct care and supervision of children;
- (4) A statement that:
 - (a) Defines child abuse and neglect;
 - (b) Sets forth the employee's responsibility to report all incidents of child abuse or neglect in accordance with SDCL 26-8A-3 and 26-8A-8; and
 - (c) Is signed by the employee; and
- (5) The results of the background check.

All records required by this section must be reviewed and updated at least annually by the provider, made available to the department for verification of the contents, and retained by the provider for six months after the employee leaves the program.

Summary of Non-Compliance Finding:

During a program inspection conducted by the Office of Licensing & Accreditation (OLA) on June 3, 2026, it was determined that one provider's 2025 annual training hours had not been completed. The provider had completed six hours of the required ten hours of annual training. In addition, one provider did not have current pediatric CPR certification. To date, verification of compliance has not been received.

Corrective Action:

Documentation verifying completion of the remaining six hours of annual training required for one provider to meet the 2025 annual training requirement must be obtained.

Documentation verifying completion of the required pediatric CPR certification for one provider must be obtained.

Supporting Evidence:

Documentation verifying completion of the remaining six hours of annual training for one provider must be submitted to OLA **by September 18, 2026.**

Documentation verifying completion of the required pediatric CPR certification for one provider must be submitted to OLA **by September 18, 2026.**

How Maintained:

Provider files will be reviewed quarterly to ensure each provider completes the required ten hours of annual training within the training year.

Provider files will be reviewed quarterly to ensure current pediatric CPR certification is maintained for each provider.

Position Responsible:

Devin Hebeisen

Expected Completion Date:

September 18, 2026

Date Completed:

Corrective Action Plan #2

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:

During a Facility Safety Inspection conducted by the Department of Public Safety on June 2, 2026, it was determined that documentation of a current fire alarm system inspection was not available. The most recent documentation provided was from the system's installation in early 2025. As of the date of this corrective action plan, verification of a current fire alarm system inspection by a qualified service technician has not been received.

Corrective Action:

The fire alarm system must be inspected by a qualified service technician **by September 30, 2026**.

Supporting Evidence:

To verify completion of the required annual fire alarm inspection, a copy of the inspection report must be submitted to the Office of Licensing & Accreditation.

How Maintained:

The provider will ensure the fire alarm system is inspected annually by a qualified service technician and will maintain a copy of the inspection report on site for review.

Position Responsible:
Devin Hebeisen

Expected Completion Date:
September 30, 2026

Date Completed:

Corrective Action Plan #3

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 a Facility Safety Inspection conducted by the Department of Public Safety on June 2, 2026, it was determined that documentation of a current annual heating and cooling system inspection was not available. As of the date of this corrective action plan, verification of current heating and cooling system inspections by a qualified service technician have not been received.

Corrective Action:

The heating and cooling systems must be inspected by a qualified service technician **by September 30, 2026**.

Supporting Evidence:

To verify completion of the required heating and cooling system inspections, a copy of the inspection report(s) must be submitted to the Office of Licensing & Accreditation.

How Maintained:

The provider will ensure the heating and cooling systems are inspected annually by a qualified service technician and will maintain a copy of the inspection report on site for review.

Position Responsible:

Devin Hebeisen

Expected Completion Date:

September 30, 2026

Date Completed:**SIGNATURES**

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.

Nicole Phillips

Provider Name



Signature of Provider

August 25, 2026

Date

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

Julie Hermansen

Printed Name of DSS Staff



8/18/2026, 2:46:08 PM

Signature of DSS Staff:

August 18, 2026

Date

COMPLETION DETAILS

COMPLETION DATE:

The Department of Social Services, Office of Licensing and Accreditation has reviewed the actions taken by the agency to resolve the above items and has accepted the above plan as completed.

Printed Name of DSS Staff

Signature of DSS Staff:

Date