

Date Issued	April 29, 2025	Status	Closed
Provider Name	GRUESCHOW, LEAH		
Provider ID	016527880		
Provider Address	3409 Arizona St, Rapid City, SD 57701, USA		
Provider Contact	LEAH GRUESCHOW		

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:

67:42:17:30

Providers shall post a weekly menu that indicates meals and snacks to be served that week.

Summary of Non-Compliance Finding:

The provider did not have the menu available and posted. Menus must be posted.

Corrections to be Made:

The provider will ensure that menus are posted and verification that this is completed must be submitted to OLA.

Corrections Made:

Provider submitted verification to OLA of her completed menu.

Anticipated Completion Date:

May 10, 2025

Date Completed:

April 29, 2025

Compliance Plan Action #2

Administrative Rule:

67:42:17:42

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

- (1) The child's name and date of birth;
- (2) The parent or guardian's name and telephone number;
- (3) An emergency contact name and telephone number;
- (4) Parental permission for emergency medical treatment;
- (5) The names of individuals authorized to pick up the child;
- (6) Health information, including any allergies or special needs;
- (7) A current immunization record or, for a school-age program, the name of the child's school;
- (8) Parental permission for medication;
- (9) The child's attendance records;
- (10) The date of the child's enrollment; and
- (11) The date on which the child's enrollment ends.

The provider shall annually review and update each record required under this section, and make the child's record available to the department, upon request.

Summary of Non-Compliance Finding:

One child's record was not up-to-date. Children's records must be current.

Corrections to be Made:

Children's records must be updated and verification must be sent to OLA

Corrections Made:

The child's record was updated and verification provided to OLA.

Anticipated Completion Date:

May 02, 2025

Date Completed:

April 29, 2025

Compliance Plan Action #3

Administrative Rule:

67:42:17:43

A provider shall have:

- (1) A written emergency preparedness and response plan for emergencies resulting from a natural disaster or a man-caused event;
- (2) A written plan for evacuation, relocation, shelter-in-place, or a lock-down, that includes accommodations for infants, toddlers, and children with disabilities or medical conditions;
- (3) A written procedure for communication and reunification with parents; and
- (4) A written procedure for the continuity of operations.

A provider shall practice the evacuation, shelter-in-place, and lock down procedures, outlined in the emergency preparedness and response plan, at least twice each calendar year. The provider shall document the dates on which the procedures are practiced. A provider shall communicate the emergency preparedness and response plan to each individual at the time the individual begins employment. Except for family day care, all child care providers shall have liability insurance. Proof of current liability insurance shall be made available to the department, upon request.

Summary of Non-Compliance Finding:

The provider did not have a copy of the emergency preparedness plan. The provider did not complete the required drills for 2024.

An emergency preparedness plan must be available and communicated to parents.

Provider must complete 2 fire drills, 2 shelter in place drills, and 2 lockdown drills on an annual basis.

Corrections to be Made:

Provider must submit complete an emergency preparedness plan and submit verification that it is complete to OLA.

Provider must submit the dates of emergency drills completed in 2024.

Corrections Made:

Provider submitted a copy of her current emergency preparedness plan along with her fire/tornado/lockdown drills for 2024. The provider indicated that the plan is shared and available to parents.

Anticipated Completion Date:

May 07, 2025

Date Completed:

April 29, 2025

Compliance Plan Action #4

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 verification that the pets had current immunizations. Pet immunizations must be up to date and on file.

Corrections to be Made:

Provider must submit pet immunizations to OLA.

Corrections Made:

Provider emailed copies of the pet immunizations to OLA on 3-18-25

Anticipated Completion Date:

March 28, 2025

Date Completed:

March 18, 2025

Compliance Plan Action #5

Administrative Rule:

67:42:17:35

Playgrounds for all child care settings must be safe, in good repair, and free of debris, trash, and weeds. Playground equipment must be installed according to the manufacturer's instructions and maintained in good repair. For a center program, a fence that measures at least four feet high is required around the center's outdoor play space. For a family day care or school-age program, a fence that measures at least forty-two inches high may be required to separate the outdoor play space, if the department determines a body of water, vehicular traffic, or other hazard poses a risk of injury or death to a child.

Summary of Non-Compliance Finding:

Stairs and deck in the playground area need boards replaced. Play area must be safe and in good repair.

Corrections to be Made:

The deck and stairs must be repaired and photo verification provided to OLA.

Corrections Made:

Provider submitted pictures of the boards that were replaced, and lattice board was installed on the sides preventing children from falling through.

Anticipated Completion Date:

May 08, 2025

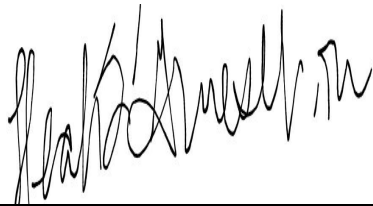
Date Completed:

April 29, 2025

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.

Leah S Grueschow

Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

April 29, 2025

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



5/1/2025, 7:33:07 AM

Signature of DSS Staff:

May 01, 2025

Date