COMPLIANCE PLAN
OFFICE OF LICENSING & ACCREDITATION

South Dakota Department of Social Services

Date Issued	April 11, 2025	Status	Closed

Provider Name	LAWSON, AMY
Provider ID	011515369
Provider Address	5417 S Donegal Ave, Sioux Falls, SD 57106, USA
Provider Contact	AMY LAWSON

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:

67:42:17:46

A provider shall complete pediatric first aid training every five years and maintain documentation of the training. A provider must be certified in pediatric cardiopulmonary resuscitation. The certification must include a hands-on skills test. A provider shall work under supervision until the provider has completed the training required by this section. The supervisor shall have completed their pediatric first aid training and be certified in pediatric cardiopulmonary resuscitation.

Summary of Non-Compliance Finding:

The provider did not have current CPR certification.

Corrections to be Made:

The provider should be certified in pediatric cardiopulmonary resuscitation.

Corrections Made:

The provider obtained current CPR certification.

Anticipated Completion Date:	Date Completed:
April 18, 2025	May 08, 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 record did not include all the required information outlined in ARSD 67:42:17:42.

Corrections to be Made:

All child records should include the required information outlined in ARSD 67:42:17:42.

Corrections Made:

All children records were updated to include all the required information outlined in ARSD 67:42:17:42.

Anticipated Completion Date:
May 02, 2025

Date Completed:
May 08, 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.

amy lawson
Printed Name of Provider/Agency Contact

Signature of Provider/Agency Contact

April 11, 2025
Date

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

Brooke Flemmer
Printed Name of DSS Staff

4/11/2025, 10:07:18 AM
Signature of DSS Staff:

April 11, 2025
Date