

Date Issued	May 21, 2025	Status	Closed
Provider Name	BROOKINGS SCHOOL DISTRICT PRESCHOOL DAKOTA PRAIRIE		
Provider ID	011517636		
Provider Address	111 26th St S, Brookings, SD 57006, USA		
Provider Contact	Tanna Stadler		

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:**

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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:
  - (4a) Defines child abuse and neglect;
  - (4b) 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
  - (4c) 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:**

At time of inspection, 12 employee files did not contain all required information.

**Corrections to be Made:**

All employee files with missing information must be updated, and documentation of the updates must be submitted to the Office of Licensing & Accreditation for verification.

**Corrections Made:**

The Office of Licensing and Accreditation conducted a review of the employee files to verify all have been updated and contain required information.

**Anticipated Completion Date:**  
May 29, 2025

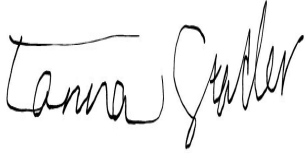
**Date Completed:**  
May 28, 2025

**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.**

Tanna Stadler

Printed Name of Provider/Agency Contact

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Signature of Provider/Agency Contact

May 21, 2025

Date

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

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Printed Name of DSS Staff

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Signature of DSS Staff:

May 20, 2025

Date

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