COMPLIANCE PLAN
OFFICE OF LICENSING & ACCREDITATION

South Dakota Department of Social Services

Date Issued	May 16, 2025	Status	Closed
Provider Name	JFK ELEMENTARY CLC		
Provider ID	018043138		
Provider Address	4501 S Holbrook Ave, Sioux Falls, SD 57106, USA		
Provider Contact	Caitlyn Dikoff		

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:

67:42:17:42

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:

At the time of the inspection, one child is missing a medication form and one child is missing parental permission for medical treatment.

Corrections to be Made:

Forms to be updated to include required information and copy of updated forms to be provided to Office of Licensing and Accreditation.

Corrections Made:

05-16-25 Updated forms received on this date.

Anticipated Completion Date:	**Date Completed:**
May 30, 2025	May 16, 2025

Compliance Plan Action #2

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:

At the time of the inspection two new staff on-site were unaware of the emergency preparedness and response plan. In addition, the provider did not practice the appropriate number or required emergency drills.

Corrections to be Made:

Program to complete one fire drill and one lockdown drill prior to the end of the school year which is 05-21-25. Dates of drills completed to be provided to Office of Licensing and Accreditation.

Provider is to review the emergency preparedness plan with all staff. Date of review to be provided to the Office of Licensing and Accreditation.

Corrections Made:

A fire drill and a tornado drill were completed on 05/14/2025.

The provider reviewed the emergency preparedness plan with all staff on 05/14/2025.

Anticipated Completion Date:
May 30, 2025

Date Completed:
May 30, 2025

Compliance Plan Action #3

Administrative Rule:

67:42:17:18

All providers must obtain annual training in the topic areas identified in 45 C.F.R. § 98.41, in effect on September 30, 2016, or as identified by the department. Training must be documented and relevant to the provider's position as determined by the department. Training may include on-site or online classes. Pediatric cardiopulmonary resuscitation renewal may not be included in annual training.

Each director and provider of center and school-age programs counted in staff-child ratios shall complete ten hours of annual training.

Each provider of family day care counted in staff-child ratios shall complete six hours of annual training.

Orientation training hours qualify as annual training hours for each provider in the year the training was completed.

Every five years, all providers shall complete additional, advanced training in each of the training areas listed in § 67:42:17:17.

Summary of Non-Compliance Finding:

At the time of the inspection, one staff had not completed Level II Health & Safety training.

Corrections to be Made:

Documentation of completed Level II training to be provided to the Office of Licensing and Accreditation.

Corrections Made:

05-30-2025 Documentation of completed training was received on this date.

Anticipated Completion Date:
May 30, 2025

Date Completed:
May 16, 2025

Compliance Plan Action #4

Administrative Rule:

67:42:17:13

All child care providers, program employees age fourteen and older, and family day care household members age eighteen and older, shall meet federal background check requirements. An individual may not provide care, or work in a child care setting, if the individual's background check reveals:

(1) A crime that indicates harmful behavior towards children;
(2) A crime of violence, as defined in SDCL 22-1-2, or in a similar statute from another state;
(3) A sex crime pursuant to SDCL chapters 22-22 or 22-24A, SDCL 22-22A-3, or similar statutes from another state;
(4) A felony conviction for domestic abuse, physical assault, battery, kidnapping, or arson;
(5) Any other felony conviction, within the preceding five years; or
(6) A substantiated report of child abuse or neglect.

A family day care provider may not provide care in the provider's home, if any household member's background check reveals any item listed in this section.

A background check is required at least once every five years.

Summary of Non-Compliance Finding:

At the time of the inspection, one staff is missing the completed background check and one staff is missing a completed background check after 5 years of employment.

Corrections to be Made:

Documentation of completed background checks to be provided to the Office of Licensing and Accreditation.

Corrections Made:

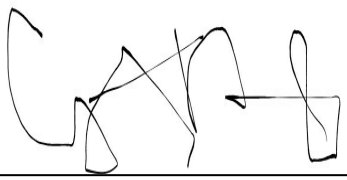
05-23-25 Completed background check for initial check was received.

05-30-25 Five year check no longer required as staff person is no longer employed with the program

Anticipated Completion Date:	**Date Completed:**
May 28, 2025	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.

Caitlyn Dikoff
Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

May 16, 2025
Date

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

Rita Trager

Printed Name of DSS Staff

5/16/2025, 7:36:42 AM

Signature of DSS Staff:

May 16, 2025

Date