

---

Date Issued	September 11, 2025	Status	Closed
Provider Name	<u>BOUCK-MOELLER, ASHELY</u>		
Provider ID	<u>018042948</u>		
Provider Address	<u>715 Ballard Ct, Vermillion, SD 57069, USA</u>		
Provider Contact	<u>ASHELY BOUCK-MOELLER</u>		

**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:**

67:42:17:24

Before a child may be admitted to a registered or licensed day care provider, the provider must require the child's parent or guardian to submit a statement, signed by a licensed physician, physician's assistant, certified nurse practitioner, or community health nurse, or an immunization record from the South Dakota Immunization Information System, showing that the child meets the minimum immunization requirements according to 45 C.F.R. § 98.41(a)(1)(i)(A), in effect on September 30, 2016.

The provider shall ensure that immunizations of all children are current.

For children who begin the series late or are more than one month behind in immunizations, the documentation must show progress toward achieving immunization requirements, as determined by a licensed physician, or other licensed practitioner. A grace period may be approved by the department for a child experiencing homelessness or a child in foster care.

A child is exempt from meeting the minimum age-specific immunization levels if:

- (1) The child's parent or guardian has certification from a licensed physician, or other licensed practitioner, stating that the physical condition of the child is such that an immunization would endanger the child's life or health; or
- (2) The child's parent or guardian has signed a written statement that the child is an adherent to a religious doctrine whose teachings are opposed to such immunizations.

If a child becomes ill while at a day care, the provider must separate the child from other children and notify the child's parents. If any child in the program contracts a communicable disease, the provider must notify the Department of Health. The program provider shall follow the Department of Health's recommendations for addressing a situation involving a communicable disease.

To prevent the spread of an infestation or infectious disease, a program shall provide an individual storage unit or container for each child's personal articles.

**Summary of Non-Compliance Finding:**

At the time of the inspection, two children did not have current immunization records on file.

**Corrections to be Made:**

Current immunization records to be obtained and copies provided to the Office of Licensing and Accreditation.

**Corrections Made:**

Copies of the updated immunization records received on 09-11-2025

**Anticipated Completion Date:**  
September 30, 2025

**Date Completed:**  
September 11, 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, the provider assistant was not aware of the emergency preparedness plan procedures.

**Corrections to be Made:**

The emergency preparedness plan procedure is to be reviewed with the provider assistant. Documentation of review is to be provided to the Office of Licensing and Accreditation.

**Corrections Made:**

A copy of the review statement was received.

**Anticipated Completion Date:**  
September 30, 2025

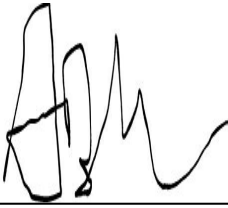
**Date Completed:**  
September 12, 2025

**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.**

Ashely Bouck-Moeller

Printed Name of Provider/Agency Contact

---



Signature of Provider/Agency Contact

September 11, 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

---



Signature of DSS Staff:

September 10, 2025

Date

---