

Date Issued	October 16, 2025	Status	Closed
Provider Name	CYNTHIA ORSBORN		
Provider ID	010611115		
Provider Address	12 Anamosa St, Rapid City, SD 57701, USA		
Provider Contact	CYNTHIA ORSBORN		

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:

67:42:17:45

The following requirements apply to the transportation of a child:

- (1) A parent or guardian shall provide written permission for the transportation of their child;
- (2) The vehicle may not carry more people than its passenger capacity, as stated on the label affixed to the vehicle under 49 C.F.R. Parts 567 and 568, in effect on March 9, 2022;
- (3) The required staff-child ratio must be maintained when children are being transported;
- (4) The driver must be at least eighteen years of age and have a driver license to operate the vehicle being driven;
- (5) When a child is being transported in a vehicle other than a bus, the child must be restrained in a car seat, booster seat, or seat belt appropriate for the child's weight and age; and
- (6) Proof of liability insurance must be provided to the department, upon request, for any vehicle used for transporting children.

Summary of Non-Compliance Finding:

One child did not have a written permission for transportation.

Corrections to be Made:

Written permission must be on file. The provider must obtain permission for transportation and submit verification to the Office of Licensing and Accreditation.

Corrections Made:

Provider sent in verification that the permission for transportation had been obtained.

Anticipated Completion Date:
October 17, 2025

Date Completed:
October 17, 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:

3 children needed updated immunizations.

Corrections to be Made:

Provider must obtain current immunizations and submit verification to the Office of Licensing and Accreditation.

Corrections Made:

Immunizations were sent in to the Office of Licensing and Accreditation.

Anticipated Completion Date:

October 17, 2025

Date Completed:

October 17, 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.

Cynthia Orsborn

Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

October 16, 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



10/10/2025, 8:37:08 AM

Signature of DSS Staff:

October 10, 2025

Date
