

Date Issued	October 27, 2025	Status	Closed
Provider Name	LAURA WILDER ELEMENTARY CLC		
Provider ID	018043144		
Provider Address	2300 S Lyndale Ave, Sioux Falls, SD 57105, USA		
Provider Contact	Saundra Larson		

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:

67:42:17:30

Providers shall post a weekly menu that indicates meals and snacks to be served that week.

Summary of Non-Compliance Finding:

At the time of the inspection, the posted menu was not for the current week.

Corrections to be Made:

Current menu to be posted at the site.

Corrections Made:

The current menu was posted at the end of the inspection.

Anticipated Completion Date:

November 20, 2025

Date Completed:

October 20, 2025

Compliance Plan Action #2

Administrative Rule:

67:42:17:27

Before any medication is administered to a child, permission of the parent or guardian must be documented and must include the name of the child, the name of the medication, and the dates, times, and dosage of the medication.

The medication must be provided by the parent and kept in the original container, with the original label. The label for a prescription medication must contain the child's name, the amount and frequency of dosage, the expiration date, the physician or other licensed practitioner's name, and instructions for storage. The medication must be returned to the parent when no longer needed or expired.

The provider shall document, in the child's record, any medication administered to a child and shall include the dose, the name of the child, the time and date administered, and the name of the person administering the medication. The documentation must be retained for at least six months and be made available to the child's parent upon request.

Summary of Non-Compliance Finding:

At the time of the inspection, two children were listed as needing medication for medical conditions. However, a supply of the medications were not available at the site.

Another child had medication at the program, but it is unclear if the medication is still needed, as the permission form has expired.

Corrections to be Made:

Medications for the two children to be provided at the site and permission to administer medication forms to be completed and documentation provided to the Office of Licensing and Accreditation.

If the medication is no longer needed, it is to be returned to the parent. If the medication is still needed, an updated permission form is to be completed by the parent. Documentation to be provided to the Office of Licensing and Accreditation.

Corrections Made:

Documentation from two parents received that they choose not to supply the medication for the program. The other child has not attended the program since the inspection.

Anticipated Completion Date:
November 20, 2025

Date Completed:
October 31, 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.

Saundra Larson

Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

October 24, 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



10/24/2025, 7:42:26 AM

Signature of DSS Staff:

October 24, 2025

Date