COMPLIANCE PLAN
OFFICE OF LICENSING & ACCREDITATION

South Dakota Department of Social Services

Date Issued	November 13, 2025	Status	Closed

Provider Name	KLINSKI, MARSA
Provider ID	018042517
Provider Address	5409 W 45th St, Sioux Falls, SD 57106, USA
Provider Contact	MARSA KLINSKI

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:

Not all children records included the required information outlined in ARSD 67:42:17:42.

Corrections to be Made:

All children records need to include the required information outlined in 67:42:17:42.

Corrections Made:

All children records were updated to include the required information outlined in ARSD 67:42:17:42.

Anticipated Completion Date:	Date Completed:
November 28, 2025	November 19, 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:

The provider did have documentation of the dates in which the six required drills were conducted in 2024.

Corrections to be Made:

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.

Corrections Made:

The provider is aware that two evacuation, two shelter-in-place, and two lock down drills need to be conducted each calendar year, along with retaining the documentation of the dates the drills were conducted.

Anticipated Completion Date:
November 28, 2025

Date Completed:
November 19, 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.

Marsa Klinski

Printed Name of Provider/Agency Contact

November 13, 2025

Signature of Provider/Agency Contact | Date

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

Brooke Flemmer

Printed Name of DSS Staff

11/12/2025, 7:58:42 AM

November 12, 2025

Signature of DSS Staff: | Date