

Date Issued	January 26, 2026	Status	Closed
Provider Name	CARE AT AXTELL		
Provider ID	018043063		
Provider Address	201 N W Ave, Sioux Falls, SD 57104, USA		
Provider Contact	Maci Howard		

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:

67:42:17:27

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 inspection, an expired medication for a child no longer enrolled had not been returned to the parents.

Corrections to be Made:

The provider will ensure the expired medication is properly disposed of.

Corrections Made:

The provider ensured the expired medication was properly disposed of at the time of the inspection on January 12, 2026.

Anticipated Completion Date:
February 02, 2026

Date Completed:
January 12, 2026

Compliance Plan Action #2

Administrative Rule:

67:42:17:47

A child care provider shall immediately report any suspected abuse or neglect of a child to child protective services, law

enforcement, or the States Attorney's office, and cooperate fully in the investigation of any incident.

Summary of Non-Compliance Finding:

During the inspection, a staff member was unable to identify the appropriate agency to which concerns of child abuse or neglect should be reported.

Corrections to be Made:

The provider will ensure that all staff are knowledgeable about their roles and responsibilities as mandated reporters of child abuse and neglect.

Corrections Made:

The provider received on-site education regarding the role of a mandated reporter, and the program implemented signage displaying the child protection phone number in a staff-accessible area for future reference.

Anticipated Completion Date:
February 02, 2026

Date Completed:
January 12, 2026

Compliance Plan Action #3

Administrative Rule:

67:42:17:15

A child care provider shall maintain a record for each employee that includes:

- (1) The employee's name and date of birth;
- (2) The dates on which the employee began and ended employment;
- (3) Documentation of orientation and ongoing annual training, if the employee provides direct care and supervision of children;
- (4) A statement that:
 - (a) Defines child abuse and neglect;
 - (b) Sets forth the employee's responsibility to report all incidents of child abuse or neglect in accordance with SDCL 26-8A-3 and 26-8A-8; and
 - (c) Is signed by the employee; and
- (5) The results of the background check.

All records required by this section must be reviewed and updated at least annually by the provider, made available to the department for verification of the contents, and retained by the provider for six months after the employee leaves the program.

Summary of Non-Compliance Finding:

At the time of inspection, two staff members did not have documentation of current CPR certification, two staff members did not have Level I Orientation training certificates available, and annual training hour documentation was not available for one staff member.

Corrections to be Made:

The provider will ensure that all required documentation for each staff member is obtained.

Corrections Made:

Verification of compliance was received.

Anticipated Completion Date:
February 02, 2026

Date Completed:
January 29, 2026

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.

Maci Howard

Printed Name of Provider/Agency Contact


Signature of Provider/Agency Contact

January 12, 2026
Date

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

Morgan Giraldo

Printed Name of DSS Staff


1/12/2026, 1:40:02 PM

Signature of DSS Staff:

January 12, 2026
Date