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|------------------|--|--------|--------|
| Date Issued      | March 19, 2026                         | Status | Closed |
| Provider Name    | Little Stars Academy                   |        |        |
| Provider ID      | 1384856877                             |        |        |
| Provider Address | 828 8th St S, Brookings, SD 57006, USA |        |        |
| Provider Contact | Callie Schlechter                      |        |        |

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:**

At time of inspection, 15 child files were missing required documentation.

**Corrections to be Made:**

All child records must contain required information as outlined in ARSD 67:42:17:42.

**Corrections Made:**

Verifications received showing that all child files are updated and contain all required information.

**Anticipated Completion Date:**  
March 25, 2026

**Date Completed:**  
March 31, 2026

## Compliance Plan Action #2

### **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 time of inspection, four staff files were missing required information.

### **Corrections to be Made:**

Staff files must contain all required information as outlined in 67:42:17:15

### **Corrections Made:**

Verification received that provider files are updated and contain all required information.

**Anticipated Completion Date:**

March 25, 2026

**Date Completed:**

March 31, 2026

## Compliance Plan Action #3

### **Administrative Rule:**

67:42:17:21

A center or school-age program must maintain the following ratios:

- (1) Five children to one staff for children up to three years of age;
- (2) Ten children to one staff for children three through four years; and
- (3) Fifteen children to one staff for children five years and over.

Children of program employees must be included in determining the children to staff ratio.

**Summary of Non-Compliance Finding:**

During a complaint investigation conducted in conjunction with the annual program inspection, it was confirmed that the program was not in compliance with staff-to-child ratio requirements. At the time of the visit, four providers were present with 29 children, including 19 under age 3 (requiring a 1:5 ratio) and 10 children ages 3 and older (requiring a 1:10 ratio), resulting in a shortage of one provider. All children were in the main area or sleeping in classrooms, with providers monitoring infants as required.

**Corrections to be Made:**

The program must maintain a 1:5 staff-to-child ratio for children under age 3 and a 1:10 ratio for children ages 3–5. The Office of Licensing and Accreditation will conduct random, unannounced visits to ensure these requirements are met.

**Corrections Made:**

The staff-to-child ratio was corrected immediately with on-call staff. The director called in additional staff to address the shortage, and the program is in the process of hiring more staff to ensure ratios are maintained at all times.

**Anticipated Completion Date:**  
March 24, 2026

**Date Completed:**  
February 25, 2026

**Compliance Plan Action #4**

**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:**

Documentation showing the dates of required drills from the previous calendar year was not available at the time of the inspection.

**Corrections to be Made:**

Program 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 and document the dates of completion.

**Corrections Made:**

Documentation received of when required drills were practiced in previous calendar year.

**Anticipated Completion Date:**  
March 25, 2026

**Date Completed:**  
March 31, 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.**

Callie Schlechter  
Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

March 19, 2026  
Date

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

Ambuer Jaacks  
Printed Name of DSS Staff



3/13/2026, 2:04:50 PM  
Signature of DSS Staff:

March 13, 2026  
Date