

Date Issued	April 13, 2026	Status	Closed
Provider Name	Ashley Stadler		
Provider ID	852689830		
Provider Address	317 N Joseph Ave, Tea, SD 57064, USA		
Provider Contact	Ashley Stadler		

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:**

67:42:17:46

A provider shall complete pediatric first aid training every five years and maintain documentation of the training. A provider must be certified in pediatric cardiopulmonary resuscitation. The certification must include a hands-on skills test.

A provider shall work under supervision until the provider has completed the training required by this section. The supervisor shall have completed their pediatric first aid training and be certified in pediatric cardiopulmonary resuscitation.

**Summary of Non-Compliance Finding:**

The employee did not have documentation of current pediatric CPR certification.

**Corrections to be Made:**

Documentation of CPR certification to be provided to the Office of Licensing and Accreditation.

**Corrections Made:**

A copy of employee's CPR certification was received on 03-16-2026.

**Anticipated Completion Date:**  
April 14, 2026

**Date Completed:**  
March 16, 2026

### Compliance Plan Action #2

**Administrative Rule:**

67:42:17:38

The following must be inaccessible to a child:

- (1) Firearms;
- (2) Pellet guns, BB guns, and cap guns;
- (3) Matches and lighters;
- (4) Tobacco products;

- (5) Choking and strangulation hazards;
- (6) Items capable of being pulled or tipped onto a child;
- (7) A platform measuring more than thirty inches above ground level, unless surrounded by a railing that is at least thirty-six inches tall with no more than five inches between openings; and
- (8) Other hazardous condition as identified by the department.

The department may direct a provider to remove or correct a hazardous condition or circumstance not covered in this chapter, if the department considers the conditions or circumstances to have the potential to cause injury or illness to the children in care.

**Summary of Non-Compliance Finding:**

At the time of the inspection, there is a trampoline that is accessible to the daycare children.

**Corrections to be Made:**

Trampoline to be inaccessible to the children when not in use.

**Corrections Made:**

The provider has agreed to remove the ladder to the trampoline when it is not in use, so that children are not able to access it. This will begin immediately and will be followed moving forward.

**Anticipated Completion Date:**  
April 12, 2026

**Date Completed:**  
March 12, 2026

**Compliance Plan Action #3**

**Administrative Rule:**

67:42:17:44

All toxic or hazardous substances must be:

- (1) Inaccessible to children;
- (2) Used according to manufacturer's instructions;
- (3) Stored in the original or other labeled container; and
- (4) Disposed of according to manufacturer recommendations.

Bio-contaminants must be handled and disposed of properly.

Soiled diapers must be changed promptly, in a designated area, on a non-porous surface. The diaper changing area must be clean and disinfected with a sanitizing solution approved by the department. Soiled diapers must be kept in a leakproof, nonabsorbent container that is covered with a tight-fitting lid.

**Summary of Non-Compliance Finding:**

At the time of the inspection, diapers are not being changed on a non-porous surface. In addition, the diaper changing area is not being cleaned and disinfected with an approved sanitizing solution.

**Corrections to be Made:**

Diapers to be changed on a non-porous surface, and the area to be sanitized with a solution approved by the department.

**Corrections Made:**

At the time of the inspection, the cloth covering on the diaper changing pad was removed and the surface is smooth and non-porous. Provider was educated on the appropriate sanitizing solution for the area. They agreed to begin using this solution beginning immediately and moving forward.

**Anticipated Completion Date:**  
April 12, 2026

**Date Completed:**  
March 12, 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:**

At the time of the inspection, the provider did not have documented dates of required shelter-in-place and lock down drills as required.

**Corrections to be Made:**

Provider is to complete one shelter-in-place and one lock down drill within 30 days.

**Corrections Made:**

Dates of drills to be provided to the Office of Licensing and Accreditation.

**Anticipated Completion Date:**  
April 12, 2026

**Date Completed:**  
April 10, 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.**

Ashley Stadler

Printed Name of Provider/Agency Contact

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Signature of Provider/Agency Contact

March 13, 2026

Date

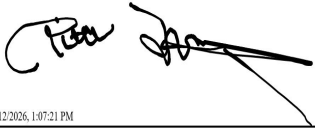
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**The Department of Social Services, Office of Licensing and Accreditation has reviewed and accepted the above plan.**

Rita Trager

Printed Name of DSS Staff

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Signature of DSS Staff:

March 12, 2026

Date

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