

Date Issued May 04, 2026 Status Closed

Provider Name Leola School District Daycare

Provider ID 1279545580

Provider Address 827 Leola Ave, Leola, SD 57456, USA

Provider Contact Kayla Casey

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:

67:42:17:15

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:

Three staff records were missing documentation of current CPR certification.
One staff record was missing documentation of the Level I Orientation training.

Corrections to be Made:

Provide documentation of current CPR certificate for the three staff records missing them.
Provider documentation of the Level I Orientation training the the staff record missing it.

Corrections Made:

Documentation of the current CPR for staff records needing verification is on file at the daycare.
The staff needing Level I Orientation training is no longer employed with the program.

Anticipated Completion Date:
May 06, 2026

Date Completed:
April 24, 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.

Kayla Casey
Printed Name of Provider/Agency Contact

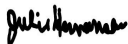


Signature of Provider/Agency Contact

April 09, 2026
Date

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

Julie Hermansen
Printed Name of DSS Staff



Signature of DSS Staff:

April 09, 2026
Date

4/9/2026, 3:40:53 PM