South Dakota Department of Social Services

DEPARTMENT OF SOCIAL SERVICES
OFFICE OF LICENSING & ACCREDITATION
700 GOVERNORS DRIVE
PIERRE, SD 57501
Phone: 605.773.3165
Web: dss.sd.gov

Corrective Action Plan

Date Issued	June 18, 2026	Status	Closed
Provider Name	LITTLE TIKES DAYCARE		
Provider Type	Child Care		
License #	1228974578		
Provider Address	512 Main St, Alexandria, SD 57311, USA		
Provider Contact	Miranda Steele, Little Tikes Board		

The following administrative rules have been found to be out of compliance. A corrective action plan is required to bring the provider into compliance. Continued non-compliance could lead to revocation of your license.

Corrective Action Plan #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:

During the Program Inspection conducted by the Office of Licensing & Accreditation (OLA) on April 21, 2026, it was determined that required documentation was missing from ten provider employee records. Missing information included signed mandatory reporter acknowledgment statements for four providers, verification of completed background check eligibility for eight providers, and documentation of required annual training for eight providers. Since the inspection, the program has submitted the required mandatory reporter acknowledgment statements and verification of background check eligibility. However, as of this date, documentation verifying completion of the required annual training remains outstanding for four providers.

Corrective Action:

The four providers need to complete missing annual training for the 2025 calendar year. Two providers must complete 10 hours of annual training, and two providers must complete 3 hours of annual training.

Supporting Evidence:

To verify compliance, training certificates must be submitted to OLA by July 21, 2026.

How Maintained:

Training records will be reviewed at the end of each calendar year to ensure that sufficient training has been completed.

Position Responsible:	Expected Completion Date:	Date Completed:
Miranda Steele, Director	July 21, 2026	September 11, 2026

Corrective Action Plan #2

Administrative Rule:

67:42:17:17

All providers shall, within ninety days after the date of employment, complete and obtain documentation of orientation training in the following areas:

(1) Prevention and control of infectious diseases;
(2) Prevention of sudden infant death syndrome and the use of safe sleep practices, if infant care is provided;
(3) Administration of medication;
(4) Prevention of and response to an emergency due to food allergies and other allergic reactions;
(5) Building and physical premises safety;
(6) Prevention of shaken baby syndrome and abusive head trauma, if infant care is provided;
(7) Emergency preparedness and response planning for an emergency resulting from a natural disaster or man-caused event;
(8) Handling and storage of hazardous materials and the appropriate disposal of biological contaminants;
(9) Precautions in transporting a child, if the program provides transportation;
(10) Recognition and reporting of child abuse and neglect;
(11) Pediatric first aid;
(12) Pediatric cardiopulmonary resuscitation; and

(13) Child development.

Before a provider may care for children without supervision, the provider must complete orientation training in each of the areas listed in this section.

Summary of Non-Compliance Finding:

During the Program Inspection conducted by the Office of Licensing & Accreditation (OLA) on April 21, 2026, it was determined that verification of completed orientation training was not on file for three providers. Since the inspection, the program has submitted verification of completed orientation training for two providers. However, as of this date, verification of completion remains outstanding for one provider, who has not yet completed one required orientation training topic.

Corrective Action:

The remaining orientation training topic must be completed by the provider.

Supporting Evidence:

To verify compliance, a copy of the orientation training certificate must be submitted to OLA by July 21, 2026.

How Maintained:

The program will review orientation training records within 90 days of each employee's hire date to ensure all required orientation training topics have been completed and documentation of completion is maintained in their file.

Position Responsible:	Expected Completion Date:	Date Completed:
Miranda Steele, Director	July 21, 2026	June 29, 2026

SIGNATURES

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.

Miranda Steele

Provider Name

Signature of Provider

June 23, 2026
Date

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

Deb Bigge
Printed Name of DSS Staff

Signature of DSS Staff:

June 18, 2026
Date

COMPLETION DETAILS

COMPLETION DATE: September 11, 2026

The Department of Social Services, Office of Licensing and Accreditation has reviewed the actions taken by the agency to resolve the above items and has accepted the above plan as completed.

Deb Bigge
Printed Name of DSS Staff

Signature of DSS Staff:

September 11, 2026
Date