COMPLIANCE PLAN
OFFICE OF LICENSING & ACCREDITATION

South Dakota Department of Social Services

Date Issued	July 31, 2025	Status	In Process

Provider Name	Falls Academy/Brighter Transition
Provider ID	YC1032
Provider Address	46560 264th St, Sioux Falls, SD 57107
Provider Contact	Jasmine Ragusi

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:

61:15:01:01

The standards of fire safety set forth in the **International Building Code**, 2015 edition; **International Fire Code**, 2015 edition; and the **International Mechanical Code**, 2015 edition; and referenced standards, except as modified, amended, or deleted in this chapter, are the rules of the South Dakota Department of Public Safety authorized by SDCL 34-29B-2.

Summary of Non-Compliance Finding:

The Brighter Transitions Academy fire alarm system is disabled due to upgrades. A written letter for the contract work was provided and accurate. Under the terms of the contract due to the fire alarm system that is disabled a fire watch person has been identified is in compliance with the requirements of a fire watch duties.

The Falls Academy building fire alarm inspection is current, however the fire alarm panel is showing a trouble fault and the panel alarm has been silenced.

Due to the fire alarm system upgrades the fire doors on magnetic hold openers are held open by weights. Doors that are held open are for security and maintaining visual contact with students. The duties of a fire watch were reviewed regarding doors that are held open.

Corrections to be Made:

Address items above.

Corrections Made:

Items corrected.

Anticipated Completion Date:	Date Completed:
August 30, 2025	July 28, 2025

Compliance Plan Action #2

Administrative Rule:

67:42:11:39

Floors, walls, ceilings, doors, windows, and skylights must be easily cleanable and in good repair.

Summary of Non-Compliance Finding:

The ceiling in the Bay Area restroom(Brighter Transitions Academy main floor) has separated from the ceiling support and is hanging on the light fixture. The restroom is not in service but this limits access to a restroom in that area.

Observed 2 dorm door windows to hallway in the "Courage Hallway" that are broken.

Noted multiple areas of the block on the exterior walls that are deteriorating and flaking as a result of moisture getting into the block cavity from above. Presently it is cosmetic but will need to be accessed before it becomes a structural issue.

Corrections to be Made:

Address items above.

Corrections Made:

The bathroom is closed until the items are corrected. The facility is owned and maintained by the state. The agency has a made a request to state to address additional items.

Anticipated Completion Date:
June 30, 2025

Date Completed:

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.

Jasmine Ragusi
Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

June 25, 2025
Date

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

Kevin Kanta

Printed Name of DSS Staff



7/31/2025, 1:30:33 PM

Signature of DSS Staff:

July 28, 2025

Date