



Corrective Action Plan

Date Issued November 04, 2025 Status Closed

Provider Name	<u>Ark Academy</u>
Provider Type	<u>Child Care</u>
License #	<u>1951028960</u>
Provider Address	<u>3309 E 26th St, Sioux Falls, SD 57103, USA</u>
Provider Contact	<u>Hollie Scott , Jordyn Brown</u>

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:

67:42:17:26

A nap mat, blanket, or other sleep surface, other than the floor, for children over one year of age must be available for each child during nap time.

A sleep surface must be maintained in good repair.

A provider shall follow the safe sleep practices contained in **Caring for Our Children: National Health and Safety Performance Standards, 4th Edition**, for infants under the age of one.

Summary of Non-Compliance Finding:

During a complaint investigation conducted by the Office of Licensing & Accreditation (OLA) on October 31, 2025, two infants were observed sleeping with blankets, and five infants were observed sleeping on nap mats on their stomachs, propped on Boppy pillows. During a subsequent monitoring visit on November 4, 2025, an infant was observed sleeping in a swing with a blanket.

Corrective Action:

1. Providers will ensure all children under one year of age are placed in a safe sleep environment in accordance with the safe sleep requirements outlined in *Caring for Our Children: National Health and Safety Performance Standards*,

4th Edition.

2. All sleep areas will remain free of blankets, bottles, stuffed animals, toys, pillows, pacifier clips/strings, bibs, and other loose items. Infants will be placed to sleep on a firm, flat, non-inclined sleep surface.
3. The director will review safe sleep requirements with all providers **by December 3, 2025**.
4. All providers who provide care to infants—whether on a routine or occasional basis, including the director—will complete the *Safe Sleep Ambassador* training **by December 12, 2025**.
5. Technical assistance to support the implementation of safe sleep practices in classrooms providing infant care will be scheduled with Sanford Children's Child Services **by November 28, 2025**.
6. The program's safe sleep policy will be reviewed and updated, as needed, to ensure it effectively addresses safe sleep practices. Technical assistance from *Sanford Children's Child Services* may be utilized to enhance the policy.

Supporting Evidence:

1. The Licensing Specialist verified on December 12, 2025, that each provider's personnel file contains a signed Safe Sleep Acknowledgment form.
2. The Licensing Specialist verified the completion certificates for the Safe Sleep Ambassador training during the on-site monitoring visit on December 12, 2025.
3. The Licensing Specialist confirmed during a monitoring visit that Sanford Children's Child Services was providing technical assistance on December 3, 2025.
4. The program provided evidence that all providers have reviewed the updated Safe Sleep Policy on January 27, 2026.

How Maintained:

Position Responsible:
Hollie Scott, Owner/director

Expected Completion Date:
February 27, 2026

Date Completed:
January 27, 2026

Corrective Action Plan #2

Administrative Rule:

67:42:17:13

All child care providers, program employees age fourteen and older, and family day care household members age eighteen and older, shall meet federal background check requirements. An individual may not provide care, or work in a child care setting, if the individual's background check reveals:

- (1) A crime that indicates harmful behavior towards children;
- (2) A crime of violence, as defined in SDCL 22-1-2, or in a similar statute from another state;
- (3) A sex crime pursuant to SDCL chapters 22-22 or 22-24A, SDCL 22-22A-3, or similar statutes from another state;
- (4) A felony conviction for domestic abuse, physical assault, battery, kidnapping, or arson;
- (5) Any other felony conviction, within the preceding five years; or
- (6) A substantiated report of child abuse or neglect.

A family day care provider may not provide care in the provider's home, if any household member's background check reveals any item listed in this section.

A background check is required at least once every five years.

Summary of Non-Compliance Finding:

During a complaint investigation conducted by the Office of Licensing & Accreditation (OLA) on October 31, 2025, it was determined that individuals were working in the program without a cleared background check; 16 of the 26 providers did not have a cleared background check on file. The program was advised that individuals are not permitted to work without a cleared background check.

During a monitoring visit on November 4, 2025, an employee without a cleared background check was observed working with children, despite prior guidance from OLA that this is not permitted.

Corrective Action:

A child care provider will not be permitted to work in a caregiving capacity until a background check eligibility letter is received, confirming completion of a FBI check, DCI check, Central Registry Screening, Sex Offender Check, and National Crime Information Screening.

Supporting Evidence:

1. The director submitted a copy of the signed acknowledgment statement, confirming their understanding of and agreement to comply with the requirements of ARSD 67:42:17:13, and reviewed it with the licensing specialist on November 25, 2025.
2. The representative from OLA will conduct an on-site training session with the director and staff responsible for record-keeping on December 12, 2025, to review employee record requirements.
3. The Office of Licensing and Accreditation confirmed during its monitoring visits that the employee records were in compliance.

How Maintained:

Position Responsible:
Hollie Scott, director/owner

Expected Completion Date:
February 27, 2026

Date Completed:
January 29, 2026

Corrective Action Plan #3

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 a complaint investigation conducted by the Office of Licensing & Accreditation (OLA) on October 31, 2025, it was determined that four providers who had been employed for more than 90 days had not completed orientation training, including pediatric CPR certification.

Corrective Action:

1. Within 90 days of employment or before assuming an unsupervised role with children, all providers will complete orientation training, including Pediatric CPR certification.
2. The 13 required orientation training topics, including Pediatric CPR certification, will be completed by the four providers requiring the documentation.
3. OLA will conduct monitoring visits over a 90-day period to verify that all providers working with children have completed orientation, including Pediatric CPR certification, within 90 days of employment or before assuming an unsupervised role with children.

Supporting Evidence:

1. During monitoring visits, the Office of Licensing and Accreditation confirmed that all providers working with children have completed orientation and Pediatric CPR certification within 90 days of starting or before working unsupervised.
2. The director signed an acknowledgment statement confirming their understanding of and agreement to comply with the requirements of ARSD 67:42:17:17 to OLA by November 25, 2025.
3. A representative from OLA conducted an on-site training with the director and any staff responsible for recordkeeping to review employee file requirements by November 25, 2025.

How Maintained:

Position Responsible:
Hollie Scott, Director/Owner

Expected Completion Date:
February 27, 2026

Date Completed:
February 05, 2026

Corrective Action Plan #4

Administrative Rule:

67:42:17:07

The owner and director are responsible for the day-to-day operation of the program, including the supervision of staff

and compliance with all licensing standards.

Summary of Non-Compliance Finding:

During recent monitoring visits conducted by the Office of Licensing & Accreditation (OLA) , it was determined that the program allowed individuals to work without a cleared background check and did not consistently follow safe sleep practices, despite prior guidance and previous citations. The director did not adequately monitor or enforce these requirements.

Corrective Action:

1. The director/owner will ensure adherence to all child care licensing requirements in ARSD 67:42:17.
2. The Director will participate in the online *QRIS Leadership Series*, **beginning no later than December 1, 2025** with completion required **by December 19, 2025**.
3. Following completion of the *QRIS Leadership Series*, the director will meet with Sanford Children's Child Services to review the training materials and address any questions arising from the training series. This review will be completed **by December 23, 2025**.
4. The Director will participate in ongoing technical assistance provided by Sanford Children's Child Services and implement recommendations.
5. A representative from OLA will conduct a licensing regulation overview training with the director and assistant director **by December 12, 2025**.

Supporting Evidence:

1. The director and assistant director provided copies of the completed QRIS Leadership Series training on January 12, 2026.
2. The Office of Licensing and Accreditation confirmed that the program and Sanford Children's Child Services have implemented technical assistance and the recommendations.
3. The Office of Licensing and Accreditation representative conducted a licensing regulation overview training with the director and the assistant director on December 12, 2025.

How Maintained:

Position Responsible:
Hollie Scott, Owner/Director

Expected Completion Date:
February 27, 2026

Date Completed:
February 12, 2026

Corrective Action Plan #5

Administrative Rule:

67:42:17:20

A center provider supervising children must be in the same room with the children or on the playground with the children, and must be able to see or hear the children, at all times.

If children are in a school-age program, the provider must be able to hear or see the children, at all times, and must be close enough to intervene at all times.

Summary of Non-Compliance Finding:

During a monitoring visit by the Office of Licensing & Accreditation (OLA) on November 24, 2025, a five-year-old child was observed to be unsupervised in the multi-purpose room on the main level for approximately 8 minutes. The child remained inside the building without supervision while providers and the other children from the classroom were on the playground, and staff did not account for the child's return to the building.

Corrective Action:

- The Director will develop and implement a written plan to ensure children are always properly supervised, including during transitions. The program will work with Sanford Children's CHILd Services, who will provide technical assistance in reviewing the supervision and transition policy by January 9, 2026.
- The Director will meet with all providers by January 16, 2026, to review the program's supervision plan and provide guidance to ensure the policies are consistently followed.
- All classroom providers and program administration will participate in the "Supervision and Transitions Made Simple" training provided by Sanford Children's CHILd Services by January 30, 2026.
- Sanford Children's Child Services will provide an initial technical assistance meeting for the Bears' four- and five-year-old classroom by December 31, 2025. Any recommendations identified through the technical assistance process will be reviewed and implemented by the providers

Supporting Evidence:

- The Director has updated and implemented the supervision policy and, on February 23, 2026, provided documentation indicating that the plan was reviewed with all providers.
- All classroom providers and program administration participated in the "Supervision and Transitions Made Simple" training provided by Sanford Children's CHILd Services on January 27, 2026.
- Sanford Children's Child Services provided an initial technical assistance meeting for the Bears' four- and five-year-old classroom on December 18, 2026, and will continue technical assistance until no longer needed.

How Maintained:

Position Responsible:
Hollie Scott, owner/director

Expected Completion Date:
February 27, 2026

Date Completed:
February 23, 2026

Corrective Action Plan #6

Administrative Rule:

67:42:17:22

A program that serves twenty or fewer children, and routinely operates a mixed age group, shall meet a ratio of ten children to one staff. Each provider may care for a maximum of four children under the age of two, with no more than two children under the age of one.

A center program that serves more than twenty children in a mixed age group, must:

- (1) Maintain a ratio of five children to one staff, if the group includes three or more children under the age of three; and
- (2) In all other circumstances, maintain the children to staff ratio that is based on the age range of the majority of children in the group.

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

Summary of Non-Compliance Finding:

During a monitoring visit by the Office of Licensing & Accreditation (OLA) on November 24, 2025, it was found that the staff-child ratio was not maintained with the grouping of children while on the playground. There were fourteen two-year-old's, four three-year-old's, and one five-year-old child with two providers. Four providers were required to maintain the staff-child ratio.

Corrective Action:

- The program administration will ensure that staff-to-child ratios are consistently maintained in full compliance with ARSD 67:42:17:21 and 67:42:17:22.
- Providers must immediately notify the director or person in charge if a classroom is out of ratio or approaching ratio limits.
- The Director will develop and implement a plan to ensure staff-to-child ratios are maintained at all times. The plan will include steps for staff and directors to follow if ratios are not met. The director will work with Sanford Children’s CHILD Services, who will provide technical assistance to review the ratio policy by January 9, 2026.
- The Director will meet with all classroom providers by January 16, 2026, to review the program's policies and provide guidance to ensure that staff-to-child ratios are maintained at all times.

Supporting Evidence:

- The program uploaded the updated written staff-child ratio policy and plan to the Office of Licensing and Accreditation on February 23, 2026
- The director met with all classroom providers on January 13, 2026, to review the updated staff-child ratio policy and provide documentation to the Office of Licensing and Accreditation.
- During the compliance monitoring visits by the Office of Licensing and Accreditation, the program has consistently maintained staff-to-ratios.

How Maintained:

Position Responsible:
Hollie Scott, owner/director

Expected Completion Date:
February 27, 2026

Date Completed:
March 03, 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.

Hollie Scott

Provider Name

Hollie Scott

Signature of Provider

December 11, 2025

Date

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

Teri Pieters

Printed Name of DSS Staff



11/21/2025, 2:47:29 PM

Signature of DSS Staff:

November 21, 2025

Date

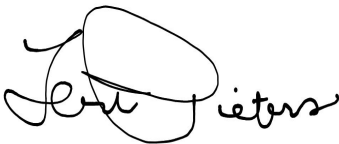
COMPLETION DETAILS

COMPLETION DATE: March 03, 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.

Teri Pieters

Printed Name of DSS Staff



3/3/2026, 8:59:36 AM

Signature of DSS Staff:

March 03, 2026

Date