

Date Issued	June 22, 2026	Status	Closed
Provider Name	SPROUTING IVY ACADEMY		
Provider ID	018042542		
Provider Address	5301 S Solberg Ave, Sioux Falls, SD 57108, USA		
Provider Contact	Angie Nearman		

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:

67:42:17:37

Center and school-age programs operating outside of a school building shall follow applicable construction and fire safety requirements, as outlined in chapters 61:15:05 and 61:15:06. School-age programs operating in a school building shall follow applicable construction and fire safety requirements, as outlined in chapters 61:15:01, 61:15:02, and 61:15:07.

A family day care home must have the following fire safety measures in place:

- (1) A working smoke detector must be located on each level of the home;
- (2) A fully charged, portable fire extinguisher, with a minimum 2A rating, as identified on the extinguisher label, must be kept in or within fifteen feet of the kitchen or food preparation area;
- (3) A carbon monoxide detector must be installed, according to the manufacturer's instructions, if a fuel burning appliance is present in the home;
- (4) Each level of the home must have at least two remote exits that shall remain clear of obstructions. One of these exits must be a standard-sized door, and the other may be either a standard-sized door or an unobstructed, operable window, having at least five square feet of openable space, with a minimum width of twenty inches and a minimum height of twenty-four inches; and
- (5) Whenever a portable space heater, a wood burning stove, or a fireplace is in use, the heater, stove, or fireplace must be inaccessible to children.

Summary of Non-Compliance Finding:

During the inspection, it was observed that a large paper mural covered more than 10% of the wall connected to the main entrance.

At the time of inspection, a carbon monoxide detector was not observed to be installed in accordance with the manufacturer's instructions.

Corrections to be Made:

The provider will ensure that combustible materials do not cover more than 10% of the wall connected to the main

entrance.

The provider will ensure that a carbon monoxide detector is obtained and installed according to the manufacturer's instructions.

Corrections Made:

Verification was received that the paper mural was removed on June 8, 2026.

Verification of the carbon monoxide detector was received on June 23, 2026.

Anticipated Completion Date:
June 26, 2026

Date Completed:
June 23, 2026

Compliance Plan Action #2

Administrative Rule:

67:42:17:39

For family day care providers, unused electrical outlets must have an outlet plug cover, have a tamper-resistant cover, or be made inaccessible to a child.

For center and school-age programs, unused electrical outlets must have a self-closing outlet cover or tamper-resistant cover.

Summary of Non-Compliance Finding:

At the time of inspection, it was observed that the Ant Room had a power strip located on the floor that was not tamper-resistant.

Corrections to be Made:

The provider will ensure that all unused electrical outlets have tamper-resistant covers.

Corrections Made:

Verification that the power strip was moved to an area inaccessible to children was received.

Anticipated Completion Date:
June 09, 2026

Date Completed:
June 08, 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:

During inspection, the diaper changing pad in the Grasshopper room was observed to have rips.

At the time of inspection, several rooms did not have sanitation bottles readily accessible near diaper changing stations, and several sanitizing bottles were not properly labeled throughout the center.

Corrections to be Made:

The provider will ensure that the diaper changing pad is maintained in good repair and easily cleanable.

The provider will ensure that all sanitizing spray bottles are clearly and appropriately labeled and available for use at diaper changing stations and throughout the program.

Corrections Made:

Verification was received that the diaper changing pad is in good repair.

Verification was received that all sanitizing spray bottles are clearly labeled.

Anticipated Completion Date:

June 09, 2026

Date Completed:

June 08, 2026

Compliance Plan Action #4

Administrative Rule:

67:42:17:32

All walls, ceilings, floors, and equipment must be easily cleanable, kept clean, and in good repair. Heating and cooling systems must maintain a temperature between sixty-five degrees Fahrenheit and seventy-five degrees Fahrenheit. For a child care center and school-age program, all heating and cooling systems must be inspected annually, by a certified technician.

Food preparation areas, including tables and countertops, must be made of a smooth, nonporous material, kept clean and sanitized, be free of cracks, and be in good repair. Center and school-age programs, in which more than twenty children are cared for, must provide a ventilation hood over all cooking areas. The hood must be appropriate for the type of appliance and intended use, as required in § 61:15:01:01.

Summary of Non-Compliance Finding:

At the time of inspection, documentation of the annual heating and cooling system inspection was not available.

During the inspection, the Dragonfly Room was observed storing several food products below the sink, and fly strips

were observed hanging from the ceiling in the kitchen where food was being prepared.

Corrections to be Made:

The provider will obtain documentation verifying completion of the annual heating and cooling system inspection.

The provider will ensure food products are stored away from potential contamination hazards and that pest control devices are not used in food preparation areas.

Corrections Made:

Verification of the annual heating and cooling inspection conducted in 2025 was submitted.

Verification demonstrating that food products are stored away from potential contamination hazards and that pest control devices have been removed was received.

Anticipated Completion Date:

June 09, 2026

Date Completed:

June 08, 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.

Angie Nearman-Hackett

Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

June 05, 2026

Date

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

Morgan Giraldo

Printed Name of DSS Staff



Signature of DSS Staff:

May 21, 2026

Date