South Dakota Department of Social Services

**DEPARTMENT OF SOCIAL SERVICES**
OFFICE OF LICENSING & ACCREDITATION
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# Corrective Action Plan

Date Issued June 26, 2026 Status In Process

| | |
|---|---|
| Provider Name | Ark Academy |
| Provider Type | Child Care |
| License # | 1951028960 |
| Provider Address | 3309 E 26th St, Sioux Falls, SD 57103, USA |
| Provider Contact | Hollie Scott |

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:**

67:42:17:20

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 the complaint investigation conducted by the Office of Licensing & Accreditation (OLA), a preschool-aged child of a program employee was observed without direct supervision on the stairway for approximately two minutes. At the time of the observation, the classroom providers and the remaining children were in the second-floor tumble area and were unaware that the child was no longer with the group.
Although the child remained inside the facility, the child was not under the direct supervision of a provider.

Previous history:

A corrective action plan was previously implemented following an OLA monitoring visit on November 24, 2025, after a five-year-old child was found unsupervised in the multi-purpose room for several minutes. Despite prior corrective action, the program has failed to maintain direct supervision of children, resulting in a repeated violation of supervision requirements.

**Corrective Action:**

- By **July 17, 2026,**the owner/director will develop and implement a written supervision oversight plan to ensure children remain under direct supervision at all times, including during transitions, movement throughout the facility, and when employees' own children are present in the program.
- The owner/director or designee will conduct at least one unannounced supervision observation each week for a period of three months in each classroom and common areas to monitor provider compliance with direct supervision requirements.
- The director/owner will implement documented accountability procedures for providers who fail to maintain direct supervision, including coaching, retraining, and progressive disciplinary action when warranted.
- Since the occurrence, the director/owner provided training to all providers during a staff meeting on active supervision practices, including maintaining visual and auditory awareness of every child, conducting face-to-name checks during transitions, and ensuring providers always know each child's location.This training was held on Tuesday June 30, 2026**.**
- The owner/director and management team will collaborate with Sanford Children's Child Services to receive consultation, technical assistance, training, and support to strengthen supervision practices, develop effective management oversight strategies, reinforce staff accountability, and ensure sustained compliance with licensing requirements.

**Supporting Evidence:**

- A copy of the written supervision oversight plan, including procedures for active supervision, accountability during transitions, and expectations for employees supervising their own children, will be submitted to OLA.
- Weekly supervision observation logs completed by the owner/director or designee documenting the date, time, classroom observed, findings, and any coaching or corrective action taken.
- Documentation of any coaching, retraining, or disciplinary action implemented in response to identified supervision concerns.
- A copy of the training agenda, training materials, and signed attendance records verifying all providers completed the active supervision training.

**How Maintained:**

- The owner/director will maintain and enforce the written supervision oversight plan and review it with all new staff during orientation and with existing staff at least annually and whenever revisions are made.
- The owner/director will maintain documentation of supervision observations, coaching, retraining, and any disciplinary actions taken to address supervision concerns.
- Providers will consistently implement active supervision practices by maintaining continuous visual and auditory awareness of children, conducting face-to-name checks during transitions, and ensuring each child's location is known at all times.
- The owner/director will review each supervision incident to identify contributing factors, implement additional corrective measures when necessary, and take steps to prevent future lapses in supervision.
- The program will continue to utilize training and technical assistance from Sanford Children's CHILD Services, as needed, to strengthen active supervision practices and maintain compliance with licensing requirements.
- The Office of Licensing and Accreditation will conduct monitoring visits over the next three months to verify continued compliance with direct supervision requirements and the implementation of the program's corrective action plan.

| Position Responsible: | Expected Completion Date: | Date Completed: |
|---|---|---|
| Hollie Scott, owner/director | October 09, 2026 | |

## Corrective Action Plan #2

**Administrative Rule:**

67:42:17:19

Maximum group sizes are determined by individual room capacity and all space used must be approved for care by the department.

The provider shall ensure the number of children in care at any given time does not exceed the capacity identified on the license. Children of program employees must be included in the group size.

The provider shall ensure children to staff ratios are maintained in all settings, including large indoor and outdoor space; in spaces where more than twenty children are allowed, providers shall identify which children each provider is responsible to supervise; and when room capacity does not align with the ratio requirements, a maximum of three additional children may be included in the room capacity as long as ratios are maintained.

**Summary of Non-Compliance Finding:**

During a complaint investigation conducted by the Office of Licensing & Accreditation (OLA), 21 children were observed in the tumble area, exceeding the established individual room capacity of 18 children. Because the group size exceeded 20 children, providers were required to maintain identification and accountability for all children assigned to their supervision; however, providers were unable to demonstrate their awareness of assigned children at the time of the observation.

**Corrective Action:**

- The owner/director will ensure that room capacity limits are clearly defined, posted, and consistently enforced in all program areas, including the tumble area, to prevent exceeding licensed capacity.
- By **July 17, 2026**, the owner/director will develop a written plan describing procedures for maintaining approved room capacities and ensuring each child is assigned to a designated provider whenever group size exceeds 20 children.
- By **July 17, 2026,**the owner/director will develop and implement a primary care assignment system for all groups of 20 or more children. The system will identify each child's assigned provider during arrivals, departures, combined classroom activities, and outdoor play. Documentation of primary care assignments will be completed and maintained for review by OLA.
- By **July 24, 2026,** the owner/director will ensure all providers are trained on approved room capacity requirements and primary care assignment procedures prior to implementation. Training completion will be documented through signed attendance records or training acknowledgments.
- The owner/director or designee will conduct and document weekly unannounced observations to verify compliance with approved room capacity limits and provider-to-child assignment procedures whenever group size exceeds 20 children. The observation log will include the date, classroom name, licensed room capacity, number of providers

and children present, and verification of whether providers are knowledgeable of the children assigned to them when group size exceeds 20 children. Identified noncompliance will require immediate corrective action.
- The program will collaborate with Sanford Children's Child Services to provide consultation, technical assistance, and support with policy development and implementation of room capacity and primary care assignment procedures.

**Supporting Evidence:**

- Posted room capacity signage addressing approved room capacity limits.
- Written plan submitted to OLA outlining procedures for maintaining approved room capacities and provider-to-child assignments when group size exceeds 20 children.
- Primary care assignment rosters and daily attendance records identifying each child's assigned provider when group size exceeds 20 children, available for review by OLA upon request.
- Training documentation, including agenda, sign-in sheets, or training acknowledgments, verifying all providers completed training on approved room capacity requirements and primary care assignment procedures.
- Weekly management observation logs documenting compliance with approved room capacity limits and provider-to-child assignments when group size exceeds 20 children, including findings and any corrective actions taken, available for review by OLA.

**How Maintained:**

- Primary care assignment documentation will be completed each time group size exceeds 20 children and maintained for review by OLA.
- Providers will consistently implement approved room capacity limits and primary care assignment procedures during all indoor and outdoor group activities.
- The owner/director or designee will conduct and document ongoing unannounced observations to verify compliance with approved room capacity limits and address deficiencies immediately when identified.
- Observation logs and primary care assignment records will be reviewed regularly by the owner/director or designee to identify trends and ensure corrective action is implemented as needed.
- All documentation will be maintained and made available to OLA upon request.
- OLA will conduct follow-up monitoring visits over the next three months to verify implementation and compliance.

| Position Responsible: | Expected Completion Date: | Date Completed: |
|---|---|---|
| Hollie Scott, director/owner | October 09, 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

July 09, 2026

Signature of Provider | 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

7/7/2026, 11:53:30 AM

July 07, 2026

Signature of DSS Staff: | Date

## COMPLETION DETAILS

**COMPLETION DATE:**

**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.**

Printed Name of DSS Staff

Signature of DSS Staff: | Date