



Date: November 29, 2023

To: Capital Area Counseling Service
2001 Eastgate Avenue
Pierre, SD 57501

From: Cassandra Deffenbaugh, Administrator
Department of Health
Office of Health Care Facilities Licensure and Certification
Division of Healthcare Access and Quality Health protection.
Licensure and Certification
600 East Capitol Avenue
Pierre, SD 57501

Re: Compliance Survey November 13, 2023

By: Craig Holden, Medical Facilities Engineer

Facility type: Mental Health

STANDARDS: Administrative Rules of South Dakota (ARSD) 67:62 – Mental Health

- National Fire Protection Association Code 101 Life Safety Code (LSC), 2012 Edition, Chapters 1-10 inclusive and Chapter 33
- National Fire Protection Association Code 101 Life Safety Code, 2012 Ed, chapters 1-10 inclusive and chapter 39.
- Americans with Disabilities Act Accessibilities Guidelines (ADAAG)

CC: Muriel J. Nelson, Program Manager
Office of Licensing and Accreditation
Department of Social Services

Bed Capacity: NA
Census: NA

A compliance survey for the above referenced codes and standards was conducted on November 13, 2023 with Lara Williams and Mark Smith of Capital Area Counseling Service. The purpose of this survey was to evaluate the operation to determine compliance with the above ARSDs and LSC references.

We request that you provide this office with your plan of correction stating the completion date for the corrections, the corrective action you have taken, or the plan of correction that you intend to make. **The plan must be submitted to the following email address no later than December 9, 2023: DOHOLCPoC@state.sd.us.** Please retain a copy of the correction plan for your own records.



DEPARTMENT OF LICENSURE & ACCREDITATION

LICENSURE & SAFETY: Health Protection | Licensure & Certification | Medical Cannabis
ACCREDITATION & REPORTING: Vital Records | Health Data & Reporting
Accreditation & Quality | Legal

1. Outpatient Services – Business Occupancy

2001 Eastgate Avenue, Pierre SD

- a. The fire sprinkler backflow preventer was installed in an improper orientation (upside down vertical position) per the 8/23/23 annual sprinkler inspection by Building Sprinkler.
- b. Quarterly sprinkler flow tests were not being performed (the system was a glycol system).
- c. There was no documentation of boiler inspection certifications.
- d. Two doors were held open with rubber floor wedges.
- e. The storage room in the lower level was over 100 square feet in area and held combustible items (cardboard boxes, wooden office furniture). The door to the egress corridor was not self-closing.
- f. The shower room hose in the lower level was not equipped with a vacuum breaker. The hose could be capped off or have a vacuum breaker installed.

2. Outpatient Services – Business Occupancy

115 S. Huron Avenue
Pierre, SD 57501

- g. No items noted.

3. Bridgeway Group Home – Residential Board and Care – 16 beds

210 W. Pleasant
Pierre, SD 57501

- h. There were no grab bars provided in the client toilet rooms that would aid clients with disabilities.

4. Betty's Place – Residential Board and Care (not in use)

803 N. Euclid Avenue
Pierre, SD 57501

The building was not in use - no inspection was conducted.

Plan of Corrections:

1. Outpatient Services – Business Occupancy

2001 Eastgate Avenue, Pierre SD

- a. The fire sprinkler backflow preventer was installed in an improper orientation (upside down vertical position) per the 8/23/23 annual sprinkler inspection by Building Sprinkler.
 - a. **Date of Correction: Completed**
 - b. **Plan of Correction: See Attachment #1 – Fire Sprinkler Backflow Manual. Page 2, paragraph 2 states “Series C200 and C300 may be installed in either horizontal or vertical position as long as the backflow assembly is installed in accordance with the direction of**



**the flow arrow on the assembly and the local water authority approves the installation.”
The City of Pierre have not adopted a code beyond the state code.**

- b. Quarterly sprinkler flow tests were not being performed (the system was a glycol system).
 - a. **Date of Correction: Starting quarterly flow tests in February 2024.**
 - b. **Plan of Correction: Building Sprinkler, Inc will be conducting quarterly sprinkler flow tests.**
- c. There was no documentation of boiler inspection certifications.
 - a. **Date of Correction: 12/11/23**
 - b. **Plan of Correction: State boiler inspector is coming 12/11/23, and will assess our needs to order to be in compliance, and conduct an inspection if needed.**
- d. Two doors were held open with rubber floor wedges.
 - a. **Date of Correction: 1/1/24**
 - b. **Plan of Correction: Removed floor wedges from doors in corridor and will install magnetic holders.**
- e. The storage room in the lower level was over 100 square feet in area and held combustible items (cardboard boxes, wooden office furniture). The door to the egress corridor was not self-closing.
 - a. **Date of Correction: Completed 12/4/23.**
 - b. **Plan of Correction: Installed two self-closing hinges on door.**
- f. The shower room hose in the lower level was not equipped with a vacuum breaker. The hose could be capped off or have a vacuum breaker installed.
 - a. **Date of Correction: Completed 12/1/23.**
 - b. **Plan of Correction: A vacuum breaker has been installed on the shower hose.**

2. Bridgeway Group Home – Residential Board and Care – 16 beds
210 W. Pleasant
Pierre, SD 57501

- a. There were no grab bars provided in the client toilet rooms that would aid clients with disabilities
 - a. **Date of Correction: 2/1/24**
 - b. **Plan of Correction: Grab bars will be ordered and installed in all 8 toilet rooms.**

