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Division of Health Systems Development and Regulation
Health Protection
Licensure and Certification
Public Health Preparedness and Response
Rural Health

May 14, 2018

Hillary Schwab, Executive Director
Compass Point
1809 Williams Street
Post Office Box 277
Sturgis, SD 57785

Re: Compass Point

Dear Ms. Schwab:

On April 10, 2018, the South Dakota Department of Health, Office of Health Care Facilities Licensure & Certification conducted a survey of your inpatient chemical dependency facility for compliance with state rules. This visit found deficiencies whereby corrections were required.

We are accepting your plans of correction for the deficiencies. Please notify this office at (605) 773-3356 if you are unable to correct the deficiencies as outlined in your plan of correction.

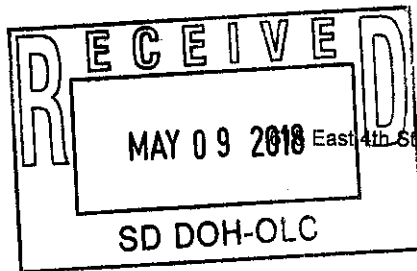
If you have any questions relating to the deficiencies, contact Todd McCaskell at the Office of Health Care Facilities Licensure & Certification at (605) 773-3356.

Sincerely,

A handwritten signature in cursive script that reads 'Chris Qualm'.

Chris Qualm, Administrator
OFFICE OF HEALTH CARE FACILITIES LICENSURE & CERTIFICATION
CQ:jrj

cc: Melanie Boetel, Division of Community Behavioral Health with copy of PoC (via email)



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DATE: April 18, 2018

TO: Hillary Schwab, Executive Director
Compass Point
1809 Williams Street
Post Office Box 277
Sturgis, SD 57785

FROM: Chris Qualm, Administrator *C. Q. / 5/1/18*
Office of Health Care Facilities Licensure and Certification
615 E. 4th Street
Pierre, SD 57501-1700

RE: Compliance Survey conducted April 10, 2018

BY: Cindy Koopman-Viergets, REHS, Senior Health Facilities Surveyor

SURVEY TYPE: Environmental, Sanitation, Safety, Fire Prevention, and Accessibility

CODE STANDARDS: Administrative Rules of South Dakota (ARSD):
*46:04:20-Inpatient Chemical Dependency
*46:05:12-Alcohol and Drug
NFPA Code 101 "LSC" 2009 Chapters 1-10 inclusive & Chapter 32
Americans with Disabilities Act Accessibilities Guidelines (ADAAG)

CC: Melanie Boetel, Department of Social Services
Division of Community Behavior Health Services

INTRODUCTION:

Enclosed please find the list of deficiencies related to state rules identified as a result of the April 10, 2018 survey at your facilities located at:

- *1807 Williams Street, Sturgis (Inpatient Chemical Dependency and Alcohol and Drug).
- *1809 Williams Street, Sturgis (Alcohol and Drug).
- *710 Colorado Blvd., Spearfish (Alcohol and Drug).

*Addendums noted
with an asterisk
per 5/14/18 telephone
to facility staff.
CKU/50221/05*

Compass Point
1807 Williams Street
Sturgis, SD 57785

CLASSIFICATION: Chemical Dependency Treatment Facility (Inpatient) and Alcohol and Drug Abuse Facility

BED CAPACITY: 9, Census: 6

As a result of the survey areas were discovered that will require a plan of correction. For each deficiency listed below, state the completion date for the corrections, the corrective action you have taken, or the plan of correction that you intend to make, and the person's position title responsible for monitoring for continued compliance. **(Please do not include individual staff names in your plan. You may use the sample format listed below or use one that includes the same reporting requirements.) The plan must be submitted to our office by April 28, 2018.** Please refer to the enclosed Plan of Correction Guideline examples for completing your plan of correction and retain a copy of the correction plan for your own records.

I toured with the chemical dependency technician (CDT).

A. Based on observation and record review, the provider failed to maintain yearly inspection records for the fire alarm system located at 1807 Williams Street, Sturgis, S.D. Findings include:

1. Record review of the annual fire alarm inspections revealed the last inspection had been in 2016. Interview with the CDT at the time of the record review confirmed those findings. She stated she was not aware where the other annual inspections were located.

Interview on 4/11/18 at 4:45 p.m. with the nurse manager confirmed the annual fire alarm inspection for the 2017 year had not been completed.

Corrective action taken or what plan is intended to make the correction:

Fire alarm inspection was completed immediately after understanding it was not completed with the sprinkler inspection. These inspections will be completed yearly together. Completed 4/11/18 by Rapid Fire Protection.

Date when correction was or will be made:

Staff position responsible for monitoring this area: Nursing Supervisor; House manager

How will this area be monitored in the future for continued compliance?

Making sure both inspections are completed together and CDT staff is aware where to find these inspections.

* Nurse manager will report to the Director with the yearly inspections once completed. These inspections are completed in December. CKU/SOPH/OT

Compass Point
1807 Williams Street
Sturgis, SD 57785

B. Compass Point outpatient facility located at 1807 Williams in Sturgis, S.D. was found in compliance with the LSC business occupancy requirements.

C. Compass Point outpatient facility located at 710 Colorado Blvd. in Spearfish, S.D. was found in compliance with the LSC business occupancy requirements.

Administrator: Lee Jean

Date: 5-7-18