

**To:** Michelle Carpenter, Administrator  
Dakota Counseling Institute  
Stepping Stones Treatment Program  
PO Box 1004  
901 S Miller Avenue  
Mitchell, SD 57301-4114

**From:** Chris Qualm, Administrator  
Office of Health Care Facilities Licensure and Certification  
615 East 4<sup>th</sup> St.  
Pierre, SD 57501-1700

**Re:** Alcohol and Drug Compliance Survey conducted 01/15/2020

**By:** Craig Holden, Medical Facilities Engineer

**Classification and Address:** Dakota Counseling Institute- Stepping Stones  
901 S Miller Avenue  
Mitchell, SD 57301-4114

**Code Standards:** Administrative Rules of South Dakota (ARSD) 67:61:10 and  
67:61:11 National Fire Protection Association Code 101 Life  
Safety, 2000 Edition, chapters 1-10 inclusive and chapter 33.  
Americans with Disabilities Act Accessibilities Guidelines

**Cc:** Mary LeVee, Department of Social Services  
Division of Behavioral Health Services

**Classification:** Alcohol and Drug Residential board and care  
**Bed Capacity:** 76 Beds Census 33

The following is a list of items that were found out of compliance with the above rules. Please provide a plan of correction, correction date, and quality assurance plan for the following noted deficiencies. 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 our office by 03/20/2020.** Please indicate **staff position or titles**, not personal names, in your plan of correction if/when you identify what staff position will be responsible for corrections or monitoring compliance. Please sign the plan of correction prior to returning. In lieu of mailing, you may scan and email your copy to the following: [Mary.leeve@state.sd.us](mailto:Mary.leeve@state.sd.us) , [Heidi.gravett@state.sd.us](mailto:Heidi.gravett@state.sd.us) , [craig.holden@state.sd.us](mailto:craig.holden@state.sd.us) .

If you have questions regarding the survey please do not hesitate to contact the Department of Health.

**Life Safety Code 2000 – New Residential Board and Care Occupancies (Large):**

The kitchen range hood grease filters were visibly soiled with grease and soil particles. The last cleaning was approximately one month ago. The cleaning of the filters was not on a preventive maintenance schedule (should be done monthly at a minimum).

**Date of correction:** January 15, 2020

**Plan of correction:** A monthly list for cleaning and maintenance was implemented to be monitored for compliance by the Cook.

The kitchen range hood exhaust ductwork and exhaust fan should be inspected for grease buildup at six-month intervals (spring and fall) and cleaned as necessary. Those inspections must be documented with the person performing the work and the date.

**Date of correction:** January 15, 2020

**Plan of correction:** A bi-annual list for cleaning was implemented to be monitored and signed off for compliance by the Cook.

The first floor (middle level) had a toilet room with an accessible sign on it. The door had a grasping handle for the latching hardware. The door should have a hands-free type handle such as a lever style to meet accessibility requirements.

**Date of correction:** January 16, 2020

**Plan of correction:** The Buildings and Grounds Technician replaced the handle with a lever style.

Client room 105 was marked as an accessible room. The door had a grasping handle for the latching hardware. The door should have a hands-free type handle such as a lever style to meet accessibility requirements.

**Date of correction:** January 16, 2020

**Plan of correction:** The Buildings and Grounds Technician replaced the handle with a lever style.

The corridor door to the administrative coordinator's office was held open with a wood floor wedge. An office door could be held open with a magnet and chain/string which would release when the door was pulled (in a motion to close the door), or a friction catch would be acceptable.

**Date of correction:** January 16, 2020

**Plan of correction:** The Buildings and Grounds Technician installed the chain/string mechanism for this door.

The maintenance room and two storage rooms on the second floor (third level) were each over 100 square feet in area and sprinklered. The doors were not self-closing. Self-closing could be accomplished with spring hinges that would be forceful enough to close the door to latch into the frame.

**Date of correction:** January 16, 2020

**Plan of correction:** The Buildings and Grounds Technician installed spring hinges to these doors.

Each of the two storage rooms on the second floor had surface mounted two feet by four feet long fluorescent lighting fixtures. The fixtures extended down from the ceiling approximately seven inches and were obstructions to the single fire sprinkler head in each room. A smaller profile light fixture would correct the issue.

**Date of correction:** February 24, 2020

**Plan of correction:** Steve's Electric changed out these light fixtures.

The fire drill record form should include the following information: calling the fire alarm monitoring company and logging who at that location received the alarm and at what time.

**Date of correction:** April 1, 2020

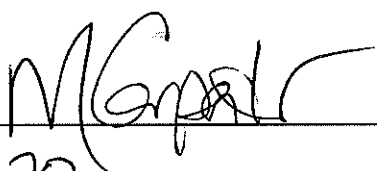
**Plan of correction:** The fire drill form has been updated and staff will be trained in Clinical on March 24, 2020 for implementation.

Notes:

\*The entrance ramp does not meet accessibility requirements (is too steep). The incline is greater than 1 in 12. This will not be required to be changed.

Recommendations:

\*The lower level dining hall has illumination levels less than thirty foot-candles (the standard minimum) for an existing residential board and care occupancy. The dining hall was also used for activities (ping pong table set up in the middle of the room). The standard illumination requirement for activities is fifty foot-candles. Some light fixtures were changed in the dining hall to new LED fixtures – the minimum standards should have been incorporated into the changes for this area.

Agency Signature: 

Date: 3-20-20