



4000 S. West Avenue
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March 4, 2019

Chris Qualm, Administrator
Office of Health Care Facilities Licensure and Certification
615 East 4th St.
Pierre, SD 57501-1700

Re: Correction plan for compliance survey completed 1/30/2019

Please find the following response to the three items noted in your audit. I believe this will satisfy your concerns. Please feel free to contact me further if need be.

Thank you

A handwritten signature in blue ink that reads "Dave Johnson, MS, LPC".

Dave Johnson, MS, LPC
President
The Glory House

To: Dave Johnson, Administrator
Glory House
4000 S West Ave.
Sioux Falls, SD 57105

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

Re: Compliance Survey conducted 01/30/2019

By: Travis Nelsen, Sr. Health Facilities Surveyor

Classification and Address: Alcohol and Drug Treatment Facility (Residential)
Glory House, 4000 S West Ave. Sioux Falls
Sands Freedom Center, 3910 S West Ave.

Survey Type: Alcohol and Drug Treatment Facility (Residential)

Code Standards: Administrative Rules of South Dakota (ARSD) 67:61:10
National Fire Protection Association Code 101 "Life Safety Code" (LSC)
2000 Edition, chapters 1-10 inclusive & chapter 33 & 39
Americans with Disabilities Act Accessibilities Guidelines (ADAAG)

Cc: Mary Levee, Department of Social Services
Division of Behavioral Health Services

Bed Capacity: 60 Men (Glory House), 32 Women (Sands Freedom Center)

The purpose of this survey was to conduct an initial survey, evaluate the operation, and determine compliance with South Dakota Administrative Rules 67:61:09 & 67:61:10.

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 03/06/2019.** 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.levee@state.sd.us

Heidi.gravett@state.sd.us

Travis.nelsen@state.sd.us

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

Sands Freedom Center

1. There were three book cases stored in the corridor by the elevator on the lower level. Those book cases were filled with paper books and VCR tapes that are considered combustible materials and can't be stored in the corridor.

Date of correction: Feb 20, 2019

Plan of correction: Completed by maintenance staff

2. There was a hole in the sheet rock ceiling of the lower level mechanical room. The holes in the mechanical room need to be sealed to prevent the passage of smoke.

Date of correction: Feb, 22, 2019

Plan of correction: Completed by maintenance staff

Glory House

3. The one-hour fire rated door in the CTC basement west end would not close and latch into the frame.

Date of correction: March 11, 2019

Plan of correction: to be completed by contractor, door replacement. maintenance staff will provide oversight

Agency Signature: David R Johnson

Date: 3-4-19