

Program Name: Human Services Center
Due Date: April 9, 2023

Plan of Correction Items

The following administrative rules were found to be out of compliance. In a State accreditation review, Administrative Rule requires a plan by the agency to bring these items into compliance in order for accreditation to be renewed. Failure to provide a plan could result in suspension or revocation of accreditation.

Administrative POC-1

<p>Rule #: 67:61:06:04</p>	<p>Rule Statement: Each agency shall have written grievance policies and procedures for hearing, considering, and responding to client grievances.</p> <p>The agency shall inform the client or the client’s parent or guardian, in writing or in an accessible format, of the grievance procedures during intake services. The grievance procedure shall be posted in a place accessible to a client and a copy shall be available in locations where a client can access the grievance procedure without making a request to agency staff. The grievance procedure shall be available to a former client upon request.</p> <p>The procedure shall include the ability to appeal the agency’s decision regarding ineligibility or termination of services to the division as provided in ARSD 67:61:06:05 and shall include the telephone number and address of the division.</p>
<p>Area of Noncompliance: The Human Services Center has a grievance policy, but the policy requires clients to ask staff for a grievance form. The grievance procedure must be available to the client without having to ask staff.</p>	
<p>Corrective Action (policy/procedure, training, environmental changes, etc): Pine 1 will move the grievance forms and grievance procedure form from a drawer behind the staff desk to an accessible area at the desk where patients can freely access without having to ask staff. Pine 1 is also addressing how to form a Pine 1 specific grievance policy at SDHSC through SDHSC Quality Control.</p>	<p>Anticipated Date Achieved/Implemented:</p> <p>Date 03/22/2023</p>
<p>Supporting Evidence: ARSD 67:61:06:04 indicates, “the grievance procedure shall be posted in a place accessible to a client and a copy shall be available in locations where client can access the grievance procedure without making a request to agency staff.”</p>	<p>Position Responsible: Austin Welker, LAC, MA, CDS; Christine Graves, CRN</p>
<p>How Maintained: The grievance form and grievance procedure form will be maintained in a folder within a public cubby nearby copies of the unit handbook and weekly schedule for ongoing patient use. Staff will maintain the folder’s completeness on a weekly basis in the same manner as they maintain copies of the unit handbook and weekly schedule for patients.</p>	<p>Board Notified: Y <input checked="" type="checkbox"/> N <input type="checkbox"/> n/a <input type="checkbox"/></p>

Signature of Agency Director: Austin Welker, LAC, MA, CDS

Date:

03/22/2023

Please email or send Plan of Correction to:

Department of Social Services
Office of Licensing and Accreditation
3900 West Technology Circle, Suite 1
Sioux Falls, SD 57106

Email Address: DSSLicAccred@state.sd.us

The Department of Social Services, Office of Licensing and Accreditation has reviewed and accepted the above plan.

Signature of Licensing Staff:



Date:

3/23/23