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

October 17, 2019

Thomas Stange  
Lewis and Clark BHS Residential Substance Use Treatment  
1004 W 4<sup>th</sup> St  
Yankton, SD 57078

Dear Mr. Stange:

Enclosed is your license to operate your inpatient chemical dependency facility for the period November 1, 2019 to June 30, 2020. This license reflects the bed change from 16 to 24 beds. Also per DSS it is recommended it becomes effective November 1, 2019.

If a change occurs in any of the information listed on the license, please notify the Office of Health Care Facilities Licensure & Certification at (605) 773-3356 and a corrected license certificate will be printed.

The license must be posted where the public can see it.

Sincerely,

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

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

Enclosure: License

cc: Melanie Boetel, Division of Behavioral Health, Department of Social Services (via email)



# South Dakota Department of Health



Issued To: Lewis and Clark BHS

License Number  
**67854**

Located At: Lewis and Clark BHS Residential Substance Use  
Treatment  
1004 W 4th St  
Yankton, SD 57078

Effective Date      #-Beds  
11/01/2019              24

Maintaining accreditation in accordance with SDCL Chapter 34-20A and the rules promulgated thereunder.

Expires  
**06/30/2020**

*Kim Malsam-Ripdon*

Secretary of Health

*Note: This License must be posted in a conspicuous place on the premises.*

**To:** Tom Stange  
LCBH  
Outpatient Clinics, Lake Andes, Vermillion and Yankton

**Re:** Compliance Survey conducted 06/25/2019

**By:** Travis Nelsen, Health Facilities Surveyor

**Classification and Address:** Vermillion- 200 West Main  
Yankton- 1028 Walnut, 1012 Walnut, 301 Capital  
Lake Andes-Connecting Point

**Survey Type:** Physical Environment  
Safety  
Accessibility

**Code Standards:** Administrative Rules of South Dakota (ARSD) 46:20 – Mental Health National Fire Protection Association Code 101 Life Safety Code, 2000 Ed, chapters 1-10 inclusive and chapter 39.  
Americans with Disabilities Act Accessibilities Guidelines (ADAAG)

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

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 and 67:62:09.

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 August 9, 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.leeve@state.sd.us](mailto:Mary.leeve@state.sd.us) , [Heidi.gravett@state.sd.us](mailto:Heidi.gravett@state.sd.us) and [travis.nelsen@state.sd.us](mailto:travis.nelsen@state.sd.us).

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

**Vermillion (200 West Main)**

1. The fire extinguisher had not been inspected monthly.

**Date of correction: 07/10/2019**

**Plan of correction: A monthly reminder (automatic calendar event) will be sent to Maintenance supervisor & Vermillion employees to inspect the fire extinguishers.**

**1028 Walnut (Three Story), Yankton**

This building was found in compliance.

**Lake Andes (Connecting Point)**

2. The fire extinguisher had not been inspected monthly.

**Date of correction: 07/10/2019**

**Plan of correction: A monthly reminder (automatic calendar event) will be sent to Maintenance supervisor & Lake Andes employee to inspect the fire extinguishers.**

**301 Capital, Yankton (Impact)**

3. The fire extinguisher had not been inspected monthly.

**Date of correction: 07/10/2019**

**Plan of correction: A monthly reminder (automatic calendar event) will be sent to Maintenance supervisor & Impact supervisor to inspect the fire extinguishers.**

Agency Signature: \_\_\_\_\_

*Donna A. Hawley, PhD.*

Date: \_\_\_\_\_

*7/15/19*