

To: Jim Fox, Director
New Dawn
PO Box 198
19271 Hwy 79
Vale, 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 7/13/2018

By: Cindy Koopman Viergets, REHS, Sr. Health Facilities Surveyor
Department of Health, Health Care Facilities Licensure and Certification

Survey Type: Alcohol and Drug Treatment Facility (Residential)

Code Standards: Administrative Rules of South Dakota 67:61 Substance Use Disorders
National Fire Protection Association 101 Life Safety Code 2000
Edition, chapters 1-10 and 33
Americans with Disabilities Act Accessibilities Guidelines (ADAAG)

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

Bed Capacity: 24 Bed; Census 20

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 August 10, 2018.** 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 , and
cindy.koopmanviergets@state.sd.us.

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

1. The light bulb in the food storage room in the main building was unshielded and had no shatterproof coating. The fluorescent lights in the large storage room in the shop were also unshielded and did not have a shatterproof coating. Interview with the director at the time of the observation confirmed those findings.

Date of correction: August 1, 2018

Plan of correction: Both lighting issues were repaired by the agency maintenance person. 1. The light fixture in the food storage room was replaced with a fixture which has a globe coving the bulb. A shatterproof bulb was also installed. 2. The florescent light fixture in the large storage room was removed as it was not functional. The remaining light fixtures have a protective covering on them.

2. The west and east bathrooms need to be completely remodeled:
 - * Both rooms had pitted or holes in the linoleum.
 - *The walls and ceilings needed to be repainted, as they are peeling and damaged.
 - *The sink cabinets are deteriorated.
 - *The shower stalls had mildewed and darkened caulking along the floors and walls that must be replaced.

Interview with the director at the time of the observations confirmed those findings. He stated he was aware the bathrooms were in need of a complete remodel. He was aware it had been written on last year's survey and had discussed remodeling with the board for the facility.

Date of correction: Upon completion of the kitchen remodeling project, our contractor indicated he would be able to renovate the east bathroom at that time.

Plan of correction: to rebuild the bathroom facilities as outlined in the report. Will also include rebuilding the flooring, installing new showers, toilets, sinks and cabinets.

3. The main kitchen needs to be completely remodeled:
- *The stove had peeling paint on the outside and around the cooking area. It was no longer cleanable.
 - *The walls and floor were damaged and had holes and deep gouges in them.
 - *The food storage shelves were deteriorated, splintered, and no longer cleanable.
 - *The kitchen cabinets and shelves inside those cabinets were deteriorated, damaged, splintered, damaged, and no longer cleanable.

Interview with the director at the time of the observations confirmed those findings. He stated he was aware the kitchen needed to be remodeled. He had two contractors that did not show up to do the remodeling this spring. He has another contractor scheduled to complete the remodeling of the kitchen this fall.

Date of correction: scheduled start date by the contractor is September 24, 2018.

Plan of correction: all items identified in the report to be corrected as the kitchen will be completely torn out and rebuilt with new flooring, sinks, stove, and cabinets. New walling will also be installed as deemed necessary by the contractor.

Agency Signature:

Jim Fox, SAC

Date:

8-9-2018