

**To:** Brenda Wood, Administrator  
City/County Alcohol and Drug Program  
725 N. LaCrosse St.  
Rapid City, SD 57701

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

**Re:** Compliance Survey conducted 8/8/17

**By:** Cindy Koopman Viergets, Senior Health Facilities Surveyor/Sanitarian  
Department of Health, Health Care Facilities Licensure & Certification

**Classification and Address:** City/County Alcohol and Drug Program  
725 N LaCrosse St.  
Rapid City, SD 57701

**Survey Type:** Environmental Sanitation, Safety, Fire Prevention, and Accessibility

**Code Standards:** Administrative Rules of South Dakota (ARSD) 67:61:09 & 67:61:10  
National Fire Protection Association Code 101 "Life Safety Code"  
(LSC) 2000 Edition, chapters 1-10 inclusive & chapter 33  
Americans with Disabilities Act Accessibilities Guidelines (ADAAG)

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

**Bed Capacity:** 60 residents; census 42

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 September 21, 2017.** 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](mailto:Mary.levee@state.sd.us) , [Heidi.gravett@state.sd.us](mailto:Heidi.gravett@state.sd.us) , and [derek.schiefelbein@state.sd.us](mailto:derek.schiefelbein@state.sd.us).

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

1. The top northeast stairwell ninety minute rated self-closing door would not close and latch into the frame. The one hour rated self-closing door to the mop room would not close and latch into the frame.

**Date of correction: 9-8-17 (northeast stairwell); 9-5-17 (mop room)**

**Plan of correction: Buildings & Grounds (B/G) Techs adjusted catch plate on then northeast stairwell door and disengaged push bar on door so that door meets regulations. B/G tech and Maintenance Tech fixed self-closing door to mop room. Confirmed by Staff Assistant IV with Maintenance Tech task was completed. B/G and Maintenance Techs will monitor on weekly basis and corrected as needed. B/G and Maintenance Techs will report issues to the Facility Operations Coordinator and Maintenance Supervisor on a monthly basis.**

2. Review of the fire drill records from January 2017 through July 2017 revealed night time fire drills had not been conducted for the first two quarters.

**Date of correction: 8-16-2017**

**Plan of correction: Documentation of Jan 2017 night time fire drill was located. POC to prevent missing fire drills is to schedule a 3<sup>rd</sup> shift fire drill every other month by Tech Supervisors and follow-up completed by Tech Supervisor and Facility Operations Coordinator (FOC) on a 2 month basis. Compliance issues will be discussed at the monthly Detox tech meeting.**

3. Review of the fire drill records from August 2016 through July 2017 on 11/12/16, 12/15/16, and 1/19/17 revealed either one or the other:

\*The magnetic hold open corridor doors would not close upon activation of the fire alarm.

\*The perimeter magnetically locked exit doors and men's courtyard exit door would not unlock during the activation of the fire alarm system.

All doors held by a magnetic hold open device must release the door upon activation of the fire alarm system.

**Date of correction: 8-16-17**

**Plan of correction: Per subsequent fire drill records, there is no longer an issue with magnetic doors not releasing. Fire alarm vendor inspected current system on 9/7/2017 and states all doors, alarms and total system is operating appropriately. Tech staff will continue to monitor on a monthly basis during scheduled fire drills. Documentation of improperly operating equipment will be reported to the Facility Operations Coordinator (FOC) and Facility Director by email, documented on Fire Drill Log and Buildings & Grounds (B/G) Tech in the Maintenance Log. FOC will follow-up with B/G Tech for completion dates on corrections or a request for service from the vendor will be submitted by Staff Asst IV. FOC and Staff Asst IV will inform Director when issue has been corrected within 1 week of issue.**

4. The room labeled ISO West had a concrete bed platform. That platform and all the floor wall junctures had several places of chipped paint that exposed the unsealed concrete. Those areas must be kept painted to be cleanable.

**Date of correction: 9/19/2017**

**Plan of correction: Buildings & Grounds (B/G) Tech repaired and painted ISO room. Maintenance Tech and Tech staff will continue to monitor area when cleaning and report any issues with paint and concrete to FOC, Staff Asst IV and Tech Supervisor. Tech supervisor will schedule visual inspection of ISO rooms on a monthly basis for preventative maintenance and repair. Tech Supervisor will report issues in the daily shift reports. FOC and Staff Asst IV will schedule B/G Tech to repair areas of concern. FOC and Staff Asst IV will report completion of repairs to the Director within 1 week of first notification.**

5. The following was noted in the kitchen, dry storage, and dining room:

\*The three compartment sink had black substances in the corners and along the edges and needed a deep cleaning.

\*Plastic silverware in the dining room must be stored with the handles presented to the user.

\*The bottom cabinet in the dry storage room had a broken drawer, and the outside and inside needed a deep cleaning.

\*All sack lunches must be labeled with use-by dates.

\*The inside top of the microwave was filthy with layered food on the surface.

\*The outside of the ice machine especially under the hinged lid needed a deep cleaning.

\*The toaster had layers and layers of burnt and dry bread crumbs inside the cooking area. Those layers of bread crumbs would not let the plunger be fully depressed.

**Date of correction: 9-5-17**

**Plan of correction:**

**\*Maintenance Tech has cleaned sink. Maintenance tech will continue to monitor on a weekly basis for cleaning needs. Daily spot checks will be completed by Tech Staff and reported to the Tech Supervisor, maintenance log and in the daily shift report. Tech Supervisor will report to FOC completion of concern.**

**\*Tech staff will monitor and correct silverware on a daily basis. Tech Supervisor will spot check daily and correct as needed. Sign was added stating "Handles Up". FOC will be notified of continued issues with compliance on a monthly basis at which, FOC will take corrective action and re-education at the monthly Tech Staff meeting.**

**\*Buildings & Grounds (B/G) tech has fixed cabinet drawer. Confirmed by Maintenance tech on 9-5-17. Any and all staff that see degraded or broken cabinetry will report issues in the maintenance log and in the shift report. FOC and Staff Asst IV will request service repair from B/G Tech and will notify the Director of resolution of issue within 1 week of first notification.**

**\*Facility Operations Coordinator (FOC) contacted vendor regarding dates on sack lunches. Tech staff will monitor daily and report to FOC as needed in the daily shift report. FOC will spot check, contact vendor if there are any issues and will correct and re-educate tech staff of non-compliance. FOC will notify the Director of corrective actions within 48 hours of report.**

**\*Microwave cleaning duty was added to client detail. Tech staff will train clients and monitor microwave cleaning detail on daily basis. Tech staff will not complete a**

client's detail until cleaning is satisfactory and will notify the Tech supervisor of non-compliance. Tech supervisor will check daily and correct as needed with both the client and tech staff on that shift. FOC will randomly spot check. If non-compliance continues, FOC will take corrective steps with staff at the monthly tech staff meeting.

\*Maintenance Tech cleaned outside of ice machine. Confirmed on 9-5-17 by Staff Asst IV. Maintenance tech will monitor on a weekly basis and add to maintenance duties. Tech Staff/Supervisors will monitor on a weekly basis and report issues in the maintenance log and in the shift report. FOC and Staff Asst IV will follow-up with maintenance tech that issue was resolved.

\*Toaster was replaced by Staff Asst IV. Cleaning duty was added to client detail. Tech staff will train clients and monitor cleaning detail on daily basis. Staff will not sign off on client's detail until cleaning is satisfactory. Tech supervisor will check daily and correct both the client and staff as needed. FOC will randomly spot check. Any issues with compliance will be addressed immediately and again at the monthly tech staff meeting. Toasters will be replaced on a seasonal schedule to ensure debris build up is not a hazard. Replaced toasters will be reported to the director within 48 hours of purchase.

6. The following was noted in the women's ward:

\*All sack lunches must be labeled with use-by dates.

\*The inside top of the microwave was filthy with layered food on the surface.

\*Plastic silverware in the dining room must be stored in containers with the handles presented to the user.

\*The custodial bathroom had the following:

-A filthy plastic lawn chair.

-A toilet seat with a black substance on top of the seat.

-A bathmat with debris, hair, and garbage under the mat.

-A sink was dirty, and the white caulking appeared black in color.

-A broken plastic coat hook with sharp edges.

-The entire room, floor, walls, and fixtures needed a deep cleaning.

\*The women's bathroom had the following:

-A toilet seat that hung half off of the bowl.

-A toilet seat with a black substance on top of the seat.

**Date of correction: 8-16-17**

**Plan of correction:**

\* Facility Operations Coordinator (FOC) contacted vendor regarding dates on sack lunches. Tech staff will monitor daily and report to FOC as needed. FOC will spot check and contact vendor if there are any issues. Facility Operations Coordinator (FOC) contacted vendor regarding dates on sack lunches. Tech staff will monitor daily and report to FOC as needed in the daily shift report. FOC will spot check, contact vendor if there are any issues and will correct and re-educate tech staff of non-compliance. FOC will notify the Director of corrective actions within 48 hours of report.

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needed with both the client and tech staff on that shift. FOC will randomly spot check. If non-compliance continues, FOC will take corrective steps with staff at the monthly tech staff meeting.

\*Tech staff will monitor and correct silverware on a daily basis. Tech Supervisor will spot check daily and correct as needed. Sign was added stating "Handles Up" Tech staff will monitor and correct silverware on a daily basis. Tech Supervisor will spot check daily and correct as needed. Sign was added stating "Handles Up". FOC will be notified of continued issues with compliance on a monthly basis at which, FOC will take corrective action and re-education at the monthly Tech Staff meeting.

\* The custodial bathroom had the following:

-Plastic lawn chair was cleaned by Maintenance Tech. Maintenance tech will monitor on a daily basis, report issues in the maintenance log and confirm it was completed. FOC and Tech Supervisors will conduct random weekly spot checks and report issues in the maintenance log and to the director within 48 hours of non-compliance. Maintenance tech will report completion of task in the maintenance log and to the FOC. FOC will report issues and resolution to the Director within 48 hours. Other furniture options are being sought at this time.

-Toilet seat were replaced by Maintenance Tech. Maintenance Tech will monitor on a daily basis, clean on regular schedule and replace as needed. FOC and Tech Supervisors will conduct random weekly spot checks and report issues in the maintenance log and to the director within 48 hours of non-compliance. Maintenance tech will report completion of task in the maintenance log and to the FOC. FOC will report issues and resolution to the Director within 48 hours.

-Bathmat was replaced by Maintenance Tech. Maintenance Tech will monitor on a daily basis, clean on regular schedule and replace as needed. FOC and Tech Supervisors will conduct random weekly spot checks and report issues in the maintenance log and to the director within 48 hours of non-compliance. Maintenance tech will report completion of task in the maintenance log and to the FOC. FOC will report issues and resolution to the Director within 48 hours.

-Maintenance Tech cleaned sink and replaced caulking. Maintenance Tech will monitor on a daily basis, clean on regular schedule and replace as needed. FOC and Tech Supervisors will conduct random weekly spot checks and report issues in the maintenance log and to the director within 48 hours of non-compliance. Maintenance tech will report completion of task in the maintenance log and to the FOC. FOC will report issues and resolution to the Director within 48 hours.

-Maintenance Tech replaced broken coat hooks. Maintenance Tech will monitor on a weekly basis and replace as needed. FOC and Tech Supervisors will conduct random weekly spot checks and report issues in the maintenance log and to the director within 48 hours of non-compliance. Maintenance tech will report completion of task in the maintenance log and to the FOC. FOC will report issues and resolution to the Director within 48 hours.

-Maintenance Tech performed deep cleaning of Custodial bathroom. Bathroom cleaning is part of client detail. Tech staff will teach clients and monitor on a daily basis. Tech staff will not sign off on client's detail until the area is cleaned correctly. Tech supervisors monitor daily to ensure clients are cleaning appropriately. Issues with non-compliance will be reported in the shift report. FOC will randomly spot check and address any issues with the Tech staff and Tech Supervisors immediately and at the monthly tech meeting. FOC will report issues and corrective actions to the Director within 48 hours of action.

\*The women's bathroom had the following:

- Toilet seats were replaced by Maintenance Tech. Maintenance Tech will monitor on a daily basis, clean on regular schedule and replace as needed. Maintenance Tech will report issues in the maintenance log and confirm it was completed. Daily spot checks will be completed by Tech Staff and reported to the Tech Supervisor, maintenance log and in the daily shift report. Tech Supervisor will report to FOC of any issues and when that issue was resolved. FOC will inform Director within 48 hours of corrective action.

Agency Signature: Paenda Wood  
Date: 09/26/17