

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

Plan of Correction

Program Name: Project Recovery		Date Due: 5/1/2023			
Administrative Dlaw of Course they I					
Rule #:	Administrative Plan of Correction-1 Rule #: Rule Statement: Orientation of Personnel. The agency shall provide orientation for all				
67:61:05:05	staff, including contracted staff providing direct clinical services, interns, and volunteers within ten working days after employment. The orientation must be documented and must include at least the following items:				
	 Fire prevention and safety, including the location of all fire extinguishers in the facility, instruction in the operation and use of each type of fire extinguisher, and an explanation of the fire evacuation plan and agency's smoking policy; The confidentiality of all information about clients, including a review of the confidentiality of alcohol and drug abuse patient records, 42 CFR, Part 2 (June 9, 1987), and the security and privacy of HIPAA, 45 CFR parts 160 and 164 (April 17, 2003); The proper maintenance and handling of client case records; The agency's philosophical approach to treatment and the agency's goals; The procedures to follow in the event of a medical emergency or a natural disaster; The specific job descriptions and responsibilities of employees; The agency's policies and procedure manual maintained in accordance with ARSD 67:61:04:01; and The agency's procedures regarding the reporting of cases of suspected child abuse or neglect in accordance with SDCL 26-8A-3 and 26-8A-8. 				
Area of Noncompliance: All three personnel files, including the contracted employee's file, were missing documentation of orientation. Two of the three files contained blank orientation checklists.					
documentation o	i orientation. I wo of the three mes contained blank of	orientation checklists.			
Corrective Action (policy/procedure, training, environmental changes, etc): Changes made to training and procedures.		Anticipated Date Achieved/Implemented: Date 4/27/2023			
Supporting Evidence:		Position Responsible:			
Updated orientation manual		supervisor			
How Maintained:		Board Notified: Y N n/a n			
Annual review					

Rule #: 67:61:05:08 Rule Statement: Personnel Policies and Records. The agency shall maintain written personnel policies and records for all staff including provisions for equal employment opportunities. Each agency shall maintain a personnel file or record or both for each staff member including contracted staff, intern, or volunteer. The file includes the following: 1. The application filed for employment or resume and transcripts or diploma and

	continuing education; 2. The position description signed by the staff with a state responsibilities and the minimum qualifications and co these duties; 3. The completion of appropriate pre-hire screening will be direct services to vulnerable populations; 4. The staff's orientation documentation in accordance with the staff's current credentials related to job defended. Any staff health clearances, including the tuberculin test clearances from a licensed physician after an infectious the staff's absence from the program.	mpetencies necessary to fulfill be evident for staff that provide ith ARSD 67:61:05:05; uties; and st results, if required, and any stor contagious disease requires bloyee's file, were missing
requirements i a	nd 4 of the above rule. Two of files contained resumes but not to	ranscripts.
Corrective Action (policy/procedure, training, environmental changes, etc): Changes made to training and procedures.		Anticipated Date Achieved/Implemented: Date 5/1/2023
Supporting Evidence: Updated orientation manual		Position Responsible: Supervisor
How Maintained: Supervision and Annual review		Board Notified: Y N n/a
	Administrative Plan of Correction-3	
Rule#: 67:61:05:12	Rule Statement: Office of Inspector General Medicaid Exclusion List. Each agency shall routinely check the Office of Inspector General's List of Excluded Individuals and Entities to ensure that each new hire as well as any current employee is not on the excluded list. No payment may be provided for services furnished by an excluded individual. Documentation that this has been completed shall be placed in the employee's personnel file.	
checks. To meet	pliance: All three personnel files were missing documentation of the "routinely" requirement, the Office of License and Accreditatemployees upon hire and at least annually.	
Corrective Action (policy/procedure, training, environmental changes, etc): Policy will be added to new hire file		Anticipated Date Achieved/Implemented: Date 5/1/2023
Supporting Evidence: Added to new hire checklist		Position Responsible: Supervisor
How Maintained: Supervision and Annual review		Board Notified: Y N n/a

Rule #: Rule Statement: Services Provided. If the program is providing early intervention services, the 67:61:12:02 program may provide each individual with a variety of services, but it must provide the following services, at a minimum: 1. Initial screening and planning within 48 hours of initial contact. The initial screening shall be recorded in the client's case record and includes: a. The client's current problems and needs; b. The client's emotional and physical state including screening for the presence of cognitive disability, mental illness, medical disorders, collateral information, and prescribed medications; c. The client's drug and alcohol use including the types of substances used, including prescribed or over the counter medications, age of first use, the amount used, the frequency of use, the date of last use, and the duration of use; d. A statement of intended course of action. 2. Crisis intervention 3. Individual or family counseling which may include: a. Education regarding alcohol and drug abuse and dependence, including biomedical effects of drug and alcohol use and abuse and the importance of medical care and treatment in the recovery process; and b. Education regarding tuberculosis and the human immunodeficiency virus, how each is transmitted and how to safeguard against transmission; 4. Discharge planning which may include: a. Continued care planning and discharge planning; b. Referral to and liaison with other resources that offer education, vocational, medical, legal, social, psychological, employment and other related alcohol and drug services; and c. Referral to and coordination of medical services shall include the availability of tuberculosis and human immunodeficiency virus services pursuant to 42 USC 300x-24 (Requirements Regarding Tuberculosis and Human Immunodeficiency Virus, October 27, 1992). Area of Noncompliance: The one early intervention file reviewed did not have evidence of initial screening and planning, and instead had a complete treatment plan. Project Recovery informed the Office of Licensing and Accreditation they do not have a procedure for early intervention services, specifically initial screening and planning. Corrective Action (policy/procedure, training, environmental changes, **Anticipated Date** etc): Changes made to training and procedures. Achieved/Implemented: Date 5/1/2023 Position Responsible: Supporting Evidence: Section added to inhouse admin rules and policies. Supervisor How Maintained: Supervision, Training and annual reviews **Board Notified:** Y N n/a

Clinical Plan of Correction - 1

Signature of Agency Div.	
Signature of Agency Director:	Date:
Darl & Cl	4-28-23

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: <u>DSSLicAccred@state.sd.us</u>

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

Signature of Licensing Staff.	
Signature of Licensing Staff:	Date: 4/28/23