South Dakota Department of Social Services CERTIFICATE OF LICENSE

as a

CHILD WELFARE AGENCY

this license to conduct and maintain a Group Care Center for Minors-Shelter Care Facility This is to certify that Cheyenne River Sioux Tribe Emergency Shelter is hereby granted to provide care for a maximum of 7 children ages 0 to 13 years, for the period from September 1, 2020 to August 31, 2021. located at 405 Chinatown, Eagle Butte, SD 57625

This facility satisfactorily complies with requirements of the South Dakota Compiled Laws of 1967, South Dakota Department of Social Services. This license is subject to revocation for Sections 26-6-1 through 26-6-27 and the Child Care Standards as established by the reasonable cause as cited in SDCL 1967; Section 26-6-23. Issued this 8th day of October, 2020.



Kirgema Wieseler

Department of Social Services Child Protection Services 700 Governors Drive Pierre, S.D. 57501-2291 605-773-3227

License Number R 103

LICENSING RENEWAL STUDY GROUP CARE CENTERS FOR MINORS ARSD 67:42:01, 67:42:07

AG	ENC	Y NAME: CRST Emergency Shelter Home (R103)			
DIRECTOR: Dianne Garreau					
1.	Lice	ensing Requirements - 67:42:07:11.01; SDCL 26-6-11			
	A.	The following have been submitted to the Department:	<u>YES</u>	NO	
		 Application materials for license. 			
		2. Documentation of need.	N/A		
		 A copy of the building plans (approved by the Fire Marshal and Department of Health). 	N/A		
	B.	A statement of compliance with the Civil Rights Act of 1964 is included in the agency's policies or is a part of the purchase of service contract with the Department.	✓	Parket and the second	
	Con	nments:			
state	emen	cation for license renewal dated August 17, 2020 is on file in the licensing tof compliance with the Civil Rights Act of 1964 which is also part of the ent of Social Services.			
2.	Age	ency Responsibilities – SDCL 26-6-11	YES	NO	
 A. The building and equipment needs of the organization are adequately met. 					
	B.	The agency has sufficient funds to meet the needs of the community.	See	Comments	
		The agency has sufficient funds to meet the needs of the community. nments:	See	Comments	
	Cor e rev		And the state of t		
The to a	Con e revisident e revis	nments: iew team found the facility to be adequately furnished and maintained	to provide for the the needs of the connual audit to this o	needs of the	
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Comments:

An audit of the accounts for the previous year was not submitted at the time of the licensing renewal. Please submit an annual audit to this office upon receipt from the Cheyenne River Sioux Tribe to be in compliance with ARSD 67:42:01:34

5. <u>Staff Qualifications</u> - 67:42:07:07					
	A.	Pro	gram Director	<u>YES</u>	NO
		1.	Bachelor's degree in an accredited behavioral or social sciences area, or	N/A	
		2.	An equivalent combination of education and experience.	✓	
		3.	At least two years of relevant alternative child care experience.	✓	
	Con	nmen	ts:		
rib ttend and Eme Gari 67:4	ration e for nding negle ergenereau's 2:07:	of the nearly place ect as cy Sh s educe (02.	tu is the Director of the Cheyenne River Sioux Tribe ICWA Program e Emergency Shelter Home. She served as a Juvenile Police Officer y ten years. Responsibility's for the position included investigation of the ment hearings, follow-up on children in foster care, court activities well as providing training in child abuse and neglect and mandatory elter Home staff. She has served as Director of the CRST ICWA Program and experience meets equivalency requirements for the program eneaux is the Emergency Shelter Home Manager. She has her high se	for the Cheyenne of child abuse and a relating to cases of reporting for Head ogram since Octob- um director as outli	River Sioux neglect cases, child abuse I Start and er 2002. Ms. ned in ARSD
Eag	le Bu	tte hi	gh school, over 5 years' experience working in childcare programs a ober 2010. Willetta oversees the day to day running of the facility a	nd has been emplo	yed with the
	B.	Oth	er Staff	YES	NO
		1.	At least eighteen years of age.		
		2.	If under age twenty-one, is under direct supervision of an experienced child care staff; and 3 years older than any children supervised.	N/A	The second secon
	Con	nmen	<u>ts:</u>		
ene	ewal erienc	that ce. D	ion sheets were submitted for each staff member employed at the indicate the staff member's name, position, date of employment ocumentation indicates the facility employs seven personnel who we Review of personnel records indicates all staff are twenty-one years	, work schedule, ork directly with o	education and
5.	Staf	f/Chi	<u>ld Ratio</u> - 67:43:07:03	<u>YES</u>	NO
	A.	1:8	during waking hours.	✓	
	B.	1:2:	in the building during sleeping hours.	✓	
	C.		e staff member present in each separate sleeping unit during ping hours.		Production of the Control of the Con
	D.		angements made for substitute staff during vacations, illness, or duty time of regular staff.	✓	
	E.	Cer	tified special ed teachers are employed (when appropriate).	N/A	
	F.	Pro	visions are made for auxiliary staff members, i.e., mental health		

			ressionals, physical therapist, and/or occupational therapist (when ropriate).	N/A	
	G. A shelter care facility maintains a staff/child ratio of 1:4 for children under the age of four years during waking hours.			✓	
	H.	appı	lity has a written plan to ensure that staff, law enforcement, or ropriate emergency responders are available at the center within a onable time in the event of an emergency.	✓	Managara da Cara da Car
	Com	ments	<u>s:</u>		
in ca at le p.m.	are at ast tw 12 a	the ti o sta .m. T	ergency Shelter Home is licensed to provide care for seven children a me of the licensing review. An updated staff schedule provided in the ff are scheduled for the majority of the shifts which run from 12 a.m. the staff schedule submitted indicates the shelter is running within stateler care program.	e application mate 8 a.m., 8 a.m4 p	rials indicates o.m. and 4
7.	Pers	onne	l Records - 67:42:07:07, 67:42:07:08, 67:42:07:09		
	A.	Pers	connel records are maintained and contain the following:	<u>YES</u>	NO
		1.	Resume or application that includes educational background, personal, and employment history.	✓	V
		2.	Job description.	✓	
		3.	Annual Performance Appraisal.	1	
		4.	Verification of contact with at least three former employers or professional references if former employers not available.	√	
		5.	Verification of screening for substantiated reports of child abuse or neglect.	√	
		6.	Verification of submission of fingerprints to the DCI.	✓	
		7.	Verification of sex offender registry checks.	✓	
		8.	Verification of current certification in basic 1st aid and CPR.	✓	
	Com	ment	z.		
	ee pei	sonn	el records were reviewed for staff who were hired in the last year. Ean to verify compliance with the above requirements.	ch record reviewe	d contained
8.	<u>In-s</u>	ervic	e Training - 67:42:07:04	YES	<u>NO</u>
	A.		re is a written plan for orientation and training for staff and unteers.	✓	
	B.	the faci	h employee has a documented record of an initial orientation to center within one month of the date of hire that includes the lity's functions, services, community resources and specific job ctions.	✓	
	C.		h employee has a documented record of a minimum of twenty- r hours annual in-service training.	✓	
	D.		th employee receives in-service training during the first year of bloyment that includes all of the areas required in 67:42:07:04.	✓	

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	E.		ning for all employees after the first year of employment is rmined by an annual evaluation and is competency based.	✓	
					
	Con	ment	<u>s:</u>		
of the complement of the compl	e orie pletec rgencice tra s exce onally seclus ment loyed	entational and of the content of the	ncy Youth Shelter has an Employee Orientation Checklist to docume on. The records reviewed for an employees hired during the last two rientation process within thirty days after initial hire. A Cheyenne Felter 2020 Annual In-Service Training Schedule was provided with a schedule provides for 32 hours of in-service training which relates at it does not indicate training in the area of use of seclusion or restregalized program for behavior management in which staff are trained and restraint are not used in the program and each personnel records ing restraint and seclusion that indicates they are not to be used. An are facility was reviewed and each staff employed has more than the e.	elve months indicate River Sioux Tribe Cl the application mate is to all area required aint and it does not it. The CRST agency is reviewed contained annual training for all	ed they hildren's erials. The in- by licensing identify the policy states a signed staff
9.			Suspected Child Abuse or Neglect and Changes in ances - 67:42:01:12, 67:42:07:15, 67:42:07:16, 67:42:07:05	YES	<u>NO</u>
	A.		facility has a written procedures for handling and reporting ected in-house CA/N. It includes:		
		1.	A definition of what constitutes CA/N;	✓	
		2.	Immediate reporting to DSS or law enforcement;	✓	
		3.	A procedure for assuring the incident will not recur pending the investigation;		
		4.	A procedure for evaluating the continued employability of any staff member involved in an incident of CA/N.		Service and the service of the servi
	B.		n employee has signed a statement acknowledging and erstanding the reporting procedure.		
	C.		facility is aware of its need to report any changes of umstances that may affect its licensed status.		
		nmen			
req	uirem	ents.	ency Shelter Home written policies for reporting suspected child at Each personnel record reviewed contained a signed statement defi acy reporting procedures.		
10.	<u>Treatment</u> – 67:42:01:01(3), 67:42:07:01, 67:42:07:01.01, 67:42:07:01.02, 67:42:07:05, 67:42:07:10, 67:42:07:28, 67:42:07:29				
	A.	The	re are written procedures relating to:	<u>YES</u>	NO
		1.	Intake.		Contraction of the Contraction o
		2.	Treatment.	N/A	Taxable Control of the Control of th
		3.	Discharge.		
		4.	Discipline	✓	
		5.	Confidentiality.	✓	Tanana and a same and a same a sa
		6.	Health care of children	✓	

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	7. Emergency procedures in case a child is injured.	✓	
	Comments:		
	CRST Emergency Shelter Home written procedures relate to the above re	quired areas.	
B.	Children attend a local school.	✓	
C.	Case records are maintained and include the following:		
	1. Face sheet/application form with identifying information.	✓	
	*2. Development of the treatment plan must involve the child in care, the facility staff working with the child, the placement agency and if appropriate the parents.	N/A	
	*3. Treatment plans are developed within one month of placement and updated at least every three months.	N/A	
	*4. Treatment plans must contain the child's needs and strengths.	N/A	
	*5. Treatment goals for the child and family, including a description of how family and aftercare services will be provided, and projected times for achieving goals;	N/A	
	*6. A discharge plan that includes the projected length of stay and the conditions under which the child will be discharged.	N/A	
	*7. Monthly progress reports submitted to placement agency.	N/A	
	*8. Progress reports reflect the treatment plan.	N/A	
	Physical exam (twelve months prior to or thirty days following admission).	✓	
	10. Current immunization record.	✓	
	11. A signed authorization for medical care.	✓	
	12. On-going records of medical/dental/eye/hearing care.	✓	
	 Signed statement verifying the child's parent or guardian was informed of agency written policies. 	✓	
D.	Records are kept in a locked file.	✓	
*E.	A shelter care facility that does not provide short term assessment services is exempt from numbers 2, 3, 4, 5, 6, 7 and 8 but submits a summary report to the placement agency upon discharge of the child.		
F.	Children do not remain in a shelter care facility longer than thirty days unless an extension of time is needed not to exceed thirty days for the plan to be implemented or needed assessment services completed.	✓	
G.	The interstate compact administrator has been contacted before acceptance of an out-of-state child.	N/A	·
H.	A facility that provides alternative services to children in custody of the department has a signed alternative service agreement with the department.	N/A	

Comments:

Four records were reviewed for children in care and documentation was found in each to verify compliance with licensing rules.

11.	Medications - 67:42:07:19, 67:42:07:20, 67:42:07:22, 67:42:07:23				
	 A. The facility has written procedures relating to the storage and administration of medication which include: 1. Conditions under which medications may be given. 		<u>YES</u>	NO	
			✓	A4. 00 A5 THE TOTAL THE	
		2.	Procedures for documenting the administration of medication.	✓	
	 Procedures for immediately notifying the facility's nurse in cases of medication errors or drug reactions. The nurse assesses the situation and determines whether there is a need to report the incident to the attending physician. 		√		
		4.	Procedures for evaluating and recording each child's reactions to prescribed medication.	✓	
	B.	A li	censed nurse is responsible for administration of medications.	✓	
	C.		chotropic drugs are prescribed by a MD, CNP or PA with ongoing rterly follow-up.	N/A	
	D.	Med	dicine is kept in a locked cabinet.	✓	
	E.	A n	nedication record is kept on each child.	✓	
abov	CRST Emergency Shelter has written procedures for storage and administration of above requirements. An agreement with an RN that includes the responsibility for was provided with the application.				
12.			and Restraint - 67:42:07:05, 67:42:07:24, 67:42:07:25, e26, 67:42:07:27	YES	NO
 The facility has written proceed and restraint. 			e facility has written procedures relating to the use of seclusion and restraint.	✓	
	B.	Use	e of seclusion and restraint is included in the treatment plan.	N/A	Management of the latest and the lat
	C.		cement agency/parental/guardian approval of seclusion and traint is obtained prior to its use.	N/A	
	D.		ff continuously observe and monitor a child who has been ced in a room for the purposes of seclusion.	N/A	
child is age 9 to 17 or one hour if the child			cement in seclusion or restraint does not exceed two hours if the ld is age 9 to 17 or one hour if the child is under the age of 9.	N/A	
		Pla	cement in seclusion or restraint is documented.	N/A	
	 G. A room used for seclusion meets the physical specifications of 67:42:07:25. 		N/A		

Comments:

CRST Emergency Shelter has written procedures which do not allow for the use of seclusion and the facility does not have a room used exclusively for seclusion.

13.	Vol	<u>unteers</u> - 67:42:07:14	YES	NO		
	A.	Have a written job description with specific responsibilities.	N/A			
	B.	Supervised and evaluated by an experienced staff member.	N/A			
	C.	Three documented non-related references.	N/A			
	D.	Documented orientation.	N/A			
	E.	Documented in-service training as per 67:42:07:04 if volunteer works thirty plus hours per week.	N/A			
	F.	Informed of obligation to report suspected CA/N.	N/A			
	G.	Verification of screening for substantiated reports of child abuse or neglect.	N/A			
	H.	Verification of submission of fingerprints to the DCI.	N/A			
	I.	Verification of sex offender registry checks.	N/A			
	Con	nments:				
The 1	revie	wer was informed the CRST Shelter does not utilize volunteers as part of p	orogramming at t	his time.		
14.	Physical Facility - 67:42:07:11, 67:42:07:12		YES	NO		
	A.	There is a current fire inspection.	✓			
	B.	There is a current health inspection.	✓			
	C.	A fire escape plan is posted.	✓			
	D.	A minimum of four fire drills held annually.	✓			
	E.	Children of opposite gender over the age of six have separate sleeping facilities.	~			
	F.	Sleeping children are monitored.	✓			
	G.	Each child has their own bed with linens, blankets and pillows.	✓			
	Comments:					
A fin	re/hea	alth inspection report conducted on 7/15/20 was included with the applications are single record.	tion materials an	d can be found		
15.	Nut	rition - 67:42:07:13	YES	<u>NO</u>		
	A.	Meals are of sufficient quantity to meet children's nutritional needs.	✓			
	B.	Arrangements are made for children with a special prescribed diet.	✓			
A co	opy o	of a four-week menu that is signed by Marcella Gilbert and dated 08/14/20	was provided at	the time of the		

A copy of a four-week menu that is signed by Marcella Gilbert and dated 08/14/20 was provided at the time of the licensing review. Comments from staff interviewed regarding meals served indicate the menu is followed. Staff interviewed indicated the children enjoyed the meals and they hear little in the form of complaints.

16. Recommendations:

CRST Shelter Home is found to be in substantial compliance with licensing requirements for a Group Care Center for Minors-Shelter Care Facility. Please refer to the body of this study for comments and recommendations relating to Agency Responsibilities, Insurance, and Accounting Systems.

It is recommended that a satisfactory license be issued to the Cheyenne River Sioux Tribe to operate a Group Care Center for Minors-Shelter Care Facility to provide care for a maximum of seven children age infant to thirteen years, on an emergency basis.

Completed By:	Keynu	Canta	10/15/20
	Kevin Kanta	, Program Specialist	
Date of On-Site	Visit:	9/30/20	

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