



The Department of Social Services, Office of Licensing & Accreditation is requiring the implementation of a Corrective Action Plan (CAP). The CAP is established to ensure changes are made to achieve and maintain compliance with the identified Administrative Rule(s) of South Dakota (ARSD).

Agency:

LSS New Alternatives

ARSD – Out of Compliance

New Alternatives was found to be out of compliance with the underlined portion of the following Administrative Rule of South Dakota:

67:42:13:03. Case plan requirements. The placement agency shall develop a written case plan for each adolescent within 14 days of placing the adolescent into the independent living preparation program. When preparing the case plan, the placement agency shall involve the adolescent in care, the ILPP, and the parent or guardian. The case plan must contain at least the following information:

(1) A delineation of the respective roles and responsibilities of the ILPP, the adolescent, and other involved parties;

(2) The goals and services to be provided or arranged by the ILPP, including a plan for supervisory contact between the adolescent and the licensed child welfare agency staff;

(3) The financial support needed and how it will be provided to cover the adolescent's basic medical, educational, shelter, nutritional, clothing, and recreational needs. The financial support may be provided directly by the ILPP; the placement agency; a parent, guardian, or custodian; the adolescent, through earnings from employment, financial aid, scholarships, grants, loans, or work-study; or any combination of these financial sources; and

(4) The projected length of stay and conditions under which the adolescent may be discharged.

Each individual involved in developing the case plan shall sign the plan. The ILPP shall review and evaluate the adolescent's case plan at least once every three months. The updated plan must include the progress made toward achieving the goals established in the previous plan and any amendments made to the plan. The ILPP shall submit to the placement agency at three-month intervals a report on the adolescent's progress. The case plan and progress reports must be maintained as part of the adolescent's record.

Source: 20 SDR 196, effective May 29, 1994; 39 SDR 220, effective June 27, 2013.

General Authority: SDCL 26-6-14, 26-6-16.

Law Implemented: SDCL 26-6-14, 26-6-16.

Non-Compliance Finding:

The four client files reviewed during the onsite license review conducted on May 3, 2022 contained treatment plans that were not created within 14 days of placement. The treatment plans were not signed by client.

Action Needed:

Please submit a plan to ensure case plans will be completed and signed within 14 days of placement of the client.

Submit plan by:

May 27, 2022

Corrective Action Plan (Attach documents if needed):

Attached you will find the policy that identifies the process for completing the Case Plan within 14 days of placement and requiring the signatures of those involved in the development of the case plan, including the client. To ensure that this policy is adhered to consistently, the Program Director or designee will review all Case Plans between days 10 and 12 of placement to assure the plan has been completed, and will review on or before day 14 showing signatures have been obtained. The initial review will be documented on the case plan by a progress note in Carelogic, and on the date of review for signatures the Program Director will sign the document once all other necessary signatures, including the client, have been obtained.

Date Corrective Action Plan Implemented: 5/13/2022

Date of Expected Completion: Ongoing

Your signature below certifies you have read and understand the non-compliance findings and submitted a plan to comply with the identified portions of ARSD to the Department of Social Services, Office of Licensing and Accreditation.

Amy J. Witt
Signature of Agency Director

5/25/2022
Date

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

Kevin Kanta
Signature of Licensing Staff

5/25/22
Date

Treatment Plan and Monitoring

Date Adopted:	5/2015
Date Modified/Approved:	1/2018
Board Approval Required:	No
Programs Affected:	New Alternatives
Reference:	HSCL 4.01, HSCL 4.02, HSCL 4.03, HSCL 4.04, HSCL 4.05, HSCL 4.06

CLIENT CASE PLAN

Client and case manager work together to create a client-driven case service plan within 14 days of admission. While utilizing motivational interviewing, clients share previous educational, employment, volunteer, communication skills and experience to determine a case plan. Assessments are completed at intake and create the foundation for the treatment planning process. The client and case manager partner to develop agreed upon goals, desired outcomes, and timeframes for achieving them. This includes services and supports to be provided, and by whom; possibilities for maintaining and strengthening family relationships and other informal social networks; procedures for expedited service planning when crisis or urgent need is identified. Each case plan will include goals for each case management category which aligns to assessments: employment, finance and money management, housing, self care, education and career development, transportation, identification, permanence, community, culture and social life, and long term mental health supports. In addition, the document is signed off by client, case manager and program director. The original signed copy is kept on file and a copy is distributed to client, as requested.

CASE PLAN REVIEW

Interdisciplinary team meets weekly to staff all clients and review progress and concerns informally. On a quarterly basis, client and case manager formally review case plan. This quarterly case plan review ensures client is working toward identified goals and being supported with intervention and community resources, as needed. In addition, client can edit or add new goals, prioritize timelines, and revise previous goals. The case plan review is a written document that is signed and kept on file.

MENTAL HEALTH TREATMENT PLAN

All individual therapeutic and mental health goals are created and monitored by partner agency, Behavior Management Systems (BMS) or a provider of their choice. Clients attend appointments at the BMS Mainstream offices. The assigned therapist is part of the interdisciplinary team and provides input as appropriate to the rest of the treatment team.