

South Dakota Department of Social Services
CERTIFICATE OF LICENSE
as a
CHILD WELFARE AGENCY


This is to certify that OST Emergency Shelter is hereby granted this license to conduct and maintain a Shelter Care Facility located at 100 Youth Shelter Drive, Pine Ridge, South Dakota 57770 to provide care for a maximum of 10 children ages 12 to 17 years, for the period from August 1, 2022 to July 31, 2023.

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

Issued this 19th day of January 2023.



License Number 99



Licensing & Accreditation Administrator

Department of Social Services
Office of Licensing & Accreditation
910 E. Sioux Avenue
Pierre, S.D. 57501-3940
605-773-4766

**LICENSE RENEWAL STUDY
SHELTER CARE
ARSD 67:42:01, 67:42:07**

AGENCY NAME: Oglala Sioux Tribe Emergency Youth Shelter (R99)

DIRECTOR: Frankee White Dress

1. Licensing Requirements - 67:42:07:11.01; SDCL 26-6-11

	<u>YES</u>	<u>NO</u>
A. The following have been submitted to the Department:		
1. Application materials for license.	<u>✓</u>	_____
2. Documentation of need.	<u>N/A</u>	_____
3. A copy of the building plans (approved by the Fire Marshal and Department of Health).	<u>N/A</u>	_____
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.	<u>✓</u>	_____

Comments:

An application for license renewal dated September 13, 2022 is on file in the licensing record. It contains a signed statement of compliance with the Civil Rights Act of 1964.

2. Agency Responsibilities – SDCL 26-6-11

	<u>YES</u>	<u>NO</u>
A. The building and equipment needs of the organization are adequately met.	<u>✓</u>	_____
B. The agency has sufficient funds to meet the needs of the community.	<u>✓</u>	_____

Comments:

The facility is adequately furnished and maintained to provide for the needs of the residents served. A financial report submitted with the application for license renewal indicates the availability of sufficient funds to provide for the needs of the program.

3. Insurance - 67:42:01:35

	<u>YES</u>	<u>NO</u>
A. Vehicles used to transport clients have appropriate passenger liability insurance.	<u>✓</u>	_____
B. The agency carries public liability insurance.	<u>✓</u>	_____

Comments:

A copy of the Certificate of Liability Insurance listing Commercial General Liability, Automobile and Umbrella Liability insurance coverage which expires on 11/1/23 was included with the application materials.

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| 4. <u>Accounting Systems</u> - 67:42:01:34 | <u>YES</u> | <u>NO</u> |
| A. An audit of the accounts has been done in the last year by a CPA. | ✓ | _____ |

Comments:

An audit of Oglala Sioux Tribe Governmental Department statements was completed by RSM US LLP CPA's on April 14, 2022. A copy of the audit report, including a summary of significant accounting policies, was submitted with the application for license renewal.

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| 5. <u>Staff Qualifications</u> - 67:42:07:02, 67:42:07:07 | | |
| A. Program Director | <u>YES</u> | <u>NO</u> |
| 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. | ✓ | _____ |

Comments:

Frankee White Dress is the Director of the Oglala Sioux Tribe Emergency Youth Shelter and has served in that capacity since April 30, 2018. She has her Masters in Education Administration.

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|---|------------|-----------|
| B. Other Staff | <u>YES</u> | <u>NO</u> |
| 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. | ✓ | _____ |

Comments:

A list of staff, including their qualifications, employed at the time of application for license renewal was submitted with the application. All staff currently employed by the Oglala Sioux Tribe Emergency Youth Shelter are over the age of twenty-one.

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| 6. <u>Staff/Child Ratio</u> - 67:43:07:03 | <u>YES</u> | <u>NO</u> |
| A. 1:8 during waking hours. | ✓ | _____ |
| B. 1:25 in the building during sleeping hours. | ✓ | _____ |
| C. One staff member present in each separate sleeping unit during sleeping hours. | ✓ | _____ |
| D. Arrangements made for substitute staff during vacations, illness, | _____ | _____ |

or off-duty time of regular staff.	✓	
E. Certified special ed teachers are employed (when appropriate).	N/A	
F. Provisions are made for auxiliary staff members, i.e., mental health professionals, physical therapist, and/or occupational therapist (when appropriate).	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.	N/A	
H. Facility has a written plan to ensure that staff, law enforcement, or appropriate emergency responders are available at the center within a reasonable time in the event of an emergency.	✓	

Comments:

Staff indicated that the facility generally runs with less than 8 children and that there is always at least one staff present when children are placed.

7. Personnel Records - 67:42:07:07, 67:42:07:08, 67:42:07:09

A. Personnel records are maintained and contain the following:	<u>YES</u>	<u>NO</u>
1. Resume or application that includes educational background, personal, and employment history.	✓	
2. Job description.	✓	
3. Annual Performance Appraisal.	✓	
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 1 st aid and CPR.	✓	

Comments:

Records reviewed contained the documentation above.

8. In-service Training - 67:42:07:04

	<u>YES</u>	<u>NO</u>
A. There is a written plan for orientation and training for staff and volunteers.	✓	
B. Each employee has a documented record of an initial orientation to the center within one month of the date of hire that includes the facility's functions, services, community resources and specific job functions.	✓	

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| C. Each employee has a documented record of a minimum of twenty-four hours annual in-service training. | ✓ | |
| D. Each employee receives in-service training during the first year of employment that includes all of the areas required in 67:42:07:04. | ✓ | |
| E. Training for all employees after the first year of employment is determined by an annual evaluation and is competency based. | ✓ | |

Comments:

Evidence was found in files reviewed to support compliance with the above requirements.

- | 9. <u>Reporting Suspected Child Abuse or Neglect and Changes in Circumstances</u> - 67:42:01:12, 67:42:07:15, 67:42:07:16, 67:42:07:05 | <u>YES</u> | <u>NO</u> |
|--|------------|-----------|
| A. The facility has a written procedures for handling and reporting suspected 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. | ✓ | |
| B. Each employee has signed a statement acknowledging and understanding the reporting procedure. | ✓ | |
| C. The facility is aware of its need to report any changes of circumstances that may affect its licensed status. | ✓ | |

Comments:

The Oglala Sioux Tribe Emergency Youth Shelter written procedures for reporting of suspected incidents of child abuse or neglect are found in the Policy and Procedures Handbook and are in compliance with licensing rules. Each record reviewed contained a signed statement verifying the individual has read agency policies defining child abuse and neglect and outlining agency reporting procedures.

- | 10. <u>Treatment</u> – 67:42:01:01(3), 67:42:01:21, 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 | <u>YES</u> | <u>NO</u> |
|--|------------|-----------|
| A. There are written procedures relating to: | | |
| 1. Intake. | ✓ | |
| 2. Treatment. | N/A | |
| 3. Discharge. | ✓ | |
| 4. Discipline | ✓ | |
| 5. Confidentiality. | ✓ | |

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|---|---|--|
| 6. Health care of children | ✓ | |
| 7. Emergency procedures in case a child is injured. | ✓ | |

Comments:

The Oglala Sioux Tribe Emergency Youth Shelter has written procedures which relate to all of the above required areas which can be found in the Oglala Sioux Tribe Emergency Youth Shelter Policy and Procedures Handbook.

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| B. Children attend a local school. | ✓ | |
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Comments:

Oglala Sioux Tribe Emergency Youth Shelter residents attend the Pine Ridge Public Schools.

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|---|-----|--|
| 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 | |
| 9. 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. | ✓ | |
| 13. Signed statement verifying the child's parent or guardian was informed of agency written policies. | ✓ | |
| 14. Summary report sent to the child placement agency. | ✓ | |
| 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.	N/A	
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.	See	Comments
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:

Client records reviewed contained the items above, except there were two clients at the facility who had been there past 60 days.

11. Medications - 67:42:07:19, 67:42:07:20, 67:42:07:22, 67:42:07:23

	<u>YES</u>	<u>NO</u>
A. The facility has written procedures relating to the storage and administration of medication which include:		
1. Conditions under which medications may be given.	✓	
2. Procedures for documenting the administration of medication.	✓	
3. 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 licensed nurse is responsible for administration of medications.	✓	
C. Psychotropic drugs are prescribed by a MD, CNP or PA with ongoing quarterly follow-up.	✓	
D. Medicine is kept in a locked cabinet.	✓	
E. A medication record is kept on each child.	✓	

Comments:

The Oglala Sioux Tribe Emergency Youth Shelter has written procedures for storage and administration of medications that are in compliance with the licensing rules and can be found in the Oglala Sioux Tribe Emergency Youth Shelter Policy and Procedures Handbook.

12. <u>Seclusion and Restraint</u> - 67:42:07:05, 67:42:07:24, 67:42:07:25, 67:42:07:26, 67:42:07:27	<u>YES</u>	<u>NO</u>
A. The facility has written procedures relating to the use of seclusion and restraint.	✓	
B. Use of seclusion and restraint is included in the treatment plan.	N/A	
C. Placement agency/parental/guardian approval of seclusion and restraint is obtained prior to its use.	N/A	
D. Staff continuously observe and monitor a child who has been placed in a room for the purposes of seclusion.	N/A	
E. Placement in seclusion or restraint does not exceed two hours if the child is age 9 to 17 or one hour if the child is under the age of 9.	N/A	
F. Placement 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:

The Oglala Sioux Tribe Emergency Youth Shelter written procedures for use of seclusion and restraint are in compliance with licensing rules and can be found in the Oglala Sioux Tribe Emergency Youth Shelter Policy and Procedures Handbook. The agency does not use restraints or seclusions.

13. <u>Volunteers</u> - 67:42:07:14	<u>YES</u>	<u>NO</u>
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	

Comments:

The Oglala Sioux Tribe Emergency Shelter does not currently have any volunteers.

14. <u>Physical Facility</u> - 67:42:07:11, 67:42:07:12	<u>YES</u>	<u>NO</u>
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A. There is a current fire inspection.	See	Comments
B. There is a current health inspection.	See	Comments
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 fire/health inspection was completed on 7/13/22 with several deficiencies. **Please see attached Corrective Action Plan.**

15. <u>Nutrition</u> - 67:42:07:13	<u>YES</u>	<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.	✓	

Comments:

Staff described meals as sufficient quantity and quality.

16. Recommendations/Corrective Action:

OST Emergency Shelter is in substantial compliance with licensing requirements for a Group Care Center for Minors-Shelter Care Facility. Please refer to the body of this licensing study for comments regarding Treatment and Physical Facility.

It is recommended that a satisfactory license be issued to operate a Group Care Center for Minors-Shelter Care Facility to provide care for a maximum of 10 youth age twelve to seventeen years.

Completed By: Kevin Kanta 01/01/23

Kevin Kanta, Program Specialist

Date of On-Site Visit: 09/13/22

Program Manager: Muriel Nelson



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: OST Emergency Shelter

ARSD – Out of Compliance

The agency was found to be out of compliance with the underlined portion of the following Administrative Rules of South Dakota:

67:42:07:01.01. Shelter care facility -- Length of stay. A shelter care facility provides neither treatment nor treatment planning. A shelter care facility may maintain children for no more than 30 days. If a placement plan has been made but cannot be implemented or needed assessment services cannot be completed within the 30-day period, an extension of time not to exceed 30 days may be allowed.

Source: 12 SDR 4, effective July 25, 1985; 34 SDR 200, effective January 30, 2008.

General Authority: SDCL 26-6-16.

Law Implemented: SDCL 26-6-16.

67:42:07:11. Fire and health inspections. The facility must meet the applicable environmental health standards in chapter 67:42:11. The Department of Public Safety, the city fire inspection authority, or the city health inspection authority must inspect the physical condition of the facility before initial licensing and each year thereafter for renewal of the license. Based on the results of the inspection, the department may require the facility to either submit a plan of correction or comply with the inspector's recommendation. Failure to submit or follow a plan of correction or comply with the inspector's recommendation shall result in revocation of an existing license, denial of a request for a new license, or denial of a request to renew an existing license. The facility must have a written, posted fire escape plan and must conduct a minimum of four fire drills a year.

Source: SL 1975, ch 16, § 1; transferred from §§ 67:14:22:29 to 67:14:22:31, inclusive, 4 SDR 10, effective August 28, 1977; transferred from §§ 67:41:05:19 to 67:41:05:21, inclusive, 7 SDR 66, 7 SDR 89, effective July 1, 1981; transferred from § 67:42:06:11, 12 SDR 4, effective July 25, 1985; 13 SDR 197, effective July 1, 1987; 14 SDR 20, effective August 13, 1987; 24 SDR 76, effective December 11, 1997; 27 SDR 121, effective May 28, 2001; 34 SDR 200, effective January 30, 2008.

General Authority: SDCL 26-6-16(2).

Law Implemented: SDCL 26-6-16(2).

67:42:11:06. Toilet facilities. If a group care center, residential treatment center, or intensive residential treatment center provides care for both male and female clients, it shall provide separate toilet facilities for each gender. There must be a minimum of one toilet and one hand lavatory for every 12 male clients and a minimum of one toilet and one hand lavatory for every 12 female clients. Showers or bathtubs must be provided at the ratio of one shower or bathtub for every 5 male clients and one shower or bathtub for every 5 female clients.

Day care programs and before and after school care programs shall provide a minimum of one toilet and one hand lavatory for every 15 children. The facility shall maintain separate bathrooms for each gender. A facility serving more than 20 children shall have a service sink for cleaning mops or similar wet floor cleaning tools and for disposing of mop water and similar liquid waste. Day care programs shall either have a permanently plumbed bathtub or a portable bathtub for the bathing of infants and toddlers. Bathtubs must be emptied immediately after each individual use and must be sanitized with a solution of one ounce of household bleach to one quart of water.

There must be toilet training equipment for children being toilet trained but this equipment does not count as toilets in the toilet-child ratio.

Hot and cold water through a mixing faucet must be supplied to all lavatories, showers, or tubs.

There must be natural or mechanical ventilation in all restrooms.

The interior surfaces of the room must be finished so that the room is easily cleanable and impervious to moisture penetration. Toilet fixtures must be kept clean and in good repair. A supply of toilet tissue must be provided at each toilet at all times. Easily cleanable receptacles must be provided for waste materials. Metal receptacles must be lined with plastic liners. Toilet rooms used by women must have at least one covered waste receptacle.

Source: 7 SDR 66, 7 SDR 89, effective July 1, 1981; 13 SDR 197, effective July 1, 1987; 14 SDR 20, effective August 13, 1987; 15 SDR 94, effective January 1, 1989; 21 SDR 206, effective June 4, 1995; 27 SDR 63, effective December 31, 2000; 32 SDR 33, effective August 31, 2005; 39 SDR 220, effective June 27, 2013.

General Authority: SDCL 26-6-16.

Law Implemented: SDCL 26-6-16.

67:42:11:15. Other hazardous conditions. The department may direct a facility to remove or correct other hazardous conditions or circumstances not covered in this chapter if the department considers the conditions or circumstances to have the potential to cause injury or illness to clients or staff.

Source: 13 SDR 197, effective July 1, 1987; 14 SDR 20, effective August 13, 1987.

General Authority: SDCL 26-6-16.

Law Implemented: SDCL 26-6-16.

67:42:11:16. Food supplies. Food must be free from spoilage, filth, or other contamination and must be safe for human consumption. The use of home-canned foods is prohibited.

Fluid milk and fluid milk products used or served must be pasteurized and must meet Grade A quality standards as defined in SDCL 39-6-1(4). Dry milk and dry milk products must be made from pasteurized milk and milk products and may be used in food preparation but not for drinking.

Only clean whole eggs with shell intact and without cracks, pasteurized liquid, frozen, or dry eggs, or pasteurized egg products may be used, except that hard-boiled, peeled eggs commercially prepared and packaged may be used.

The temperature of potentially hazardous foods as defined in § 44:02:07:18 must be 41 degrees Fahrenheit or below or 140 degrees Fahrenheit or above at all times except as other provided in this chapter. Potentially hazardous foods must be reheated rapidly to 165 degrees Fahrenheit or higher throughout before being served.

Frozen foods must be kept frozen and must be stored at a temperature of zero degrees Fahrenheit or below and must be thawed in one of the following ways.

- (1) In refrigerated units at a temperature not exceeding 41 degrees Fahrenheit;
- (2) Under potable running water that is 70 degrees Fahrenheit or below;
- (3) In a microwave oven if the food will be immediately transferred to conventional cooking facilities as part of a continuous cooking process;
- (4) In a microwave oven if the entire, uninterrupted cooking process takes place in the microwave oven; or
- (5) As a part of the conventional cooking process.

Food service areas must have light fixtures which contain shielded or shatterproof bulbs.

Source: 13 SDR 197, effective July 1, 1987; 14 SDR 20, effective August 13, 1987; 21 SDR 206, effective June 4, 1995; 39 SDR 220, effective June 27, 2013.

General Authority: SDCL 26-6-16.

Law Implemented: SDCL 26-6-16.

67:42:11:36. Insect and rodent control. Effective measures must be taken to minimize the presence of rodents, flies, cockroaches, and other insects on the premises. The premises must be maintained so as to prevent the harborage or feeding of insects or rodents. Openings to the outside must be effectively protected against the entrance of rodents. Outside openings must be protected against the entrance of insects by tight-fitting, self-closing doors, closed windows, screening, controlled air currents, or other means. Screen doors must be self-closing and screens for windows, doors, skylights, transoms, intake and exhaust air ducts, and other openings to the outside must be tight fitting and free of breaks. Screening material may not be less than 16 mesh to the inch.

Source: 13 SDR 197, effective July 1, 1987; 14 SDR 20, effective August 13, 1987.

General Authority: SDCL 26-6-16.

Law Implemented: SDCL 26-6-16.

67:42:11:44. Pets. If a pet is present, indoors or outdoors, the provider must ensure that the following requirements are met:

(1) The pet must be in good health, show no evidence of carrying any disease, and be a friendly companion to the children and parents;

(2) Wild or dangerous animals such as ferrets, lizards, or other reptiles must be kept in a covered glass container or tank that is inaccessible to children;

(3) Potentially aggressive animals such as pit bulls and rottweilers and parrots and other exotic birds must be confined and kept away from the children;

(4) Dogs or cats must be immunized for any disease that can be transmitted to humans and must be maintained on a flea, tick, and worm control program;

(5) The provider must have documentation, signed by a veterinarian, that the pet has had the required immunizations and that the immunizations are current;

(6) The pet's living quarters must be kept clean;

(7) Litter boxes must be covered and kept clean in order to eliminate odor; and

(8) The pet's food supply may not be accessible to the children.

Source: 21 SDR 206, effective June 4, 1995; 31 SDR 40, effective September 29, 2004.

General Authority: SDCL 26-6-16.

Law Implemented: SDCL 26-6-16.

Non-Compliance Finding:

There were two current youth who were at the facility past 60 days.

The following non-compliances were found during an inspection by the Department of Public Safety on July 13, 2022:

- 3 windows are missing screens
- Fire alarm panel in trouble mode
- Shield has come lose from light fixture in kitchen
- Girls' bathroom needs to be cleaned and hot water handle repaired
- Cat on premises without proof of vaccinations

Action Needed:

Please provide pictures of items when corrected.

The agency must submit a list of current youth who have been at the facility over 60 days. The list must include the date the youth entered the facility and a plan for the youth to leave the facility.

If the agency intends to provide Group Care services a plan must be submitted to comply with 67:42:07:05 and 67:42:07:28.

67:42:07:05. Treatment plan. The facility shall develop a written treatment plan for each child in care within one month after admission. The 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 parent or guardian. The treatment plan must contain the following:

- (1) An assessment of the child's needs and strengths, including implementation of the reasonable and prudent parent standard;
- (2) 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; and
- (3) A discharge plan that includes the projected length of stay and the conditions under which the child will be discharged.

A shelter care facility that does not provide short-term assessment services is exempt from the requirement for establishing a written case treatment plan.

Source: 7 SDR 66, 7 SDR 89, effective July 1, 1981; 12 SDR 4, effective July 25, 1985; portions of this rule were transferred to § 67:42:07:29, 34 SDR 200, effective January 30, 2008; 39 SDR 220, effective June 27, 2013; 42 SDR 97, effective January 4, 2016.

General Authority: SDCL 26-6-16.

Law Implemented: SDCL 26-6-16.

67:42:07:28. Review and evaluation of treatment plan. The facility shall provide for the review, evaluation, and updating of the child's treatment plan at least 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. A monthly report on the child's progress must be submitted to the placement agency. The facility shall send a copy of the monthly report to the child's parent or guardian if the parent or guardian was involved in the child's placement or is actively involved in the treatment planning. The treatment plan and progress reports must become a part of the child's record. During the month of the quarterly treatment plan review, the 30-day progress report may be incorporated into the quarterly review and treatment plan amendment. A case record must be maintained on each child according to § 67:42:01:21. The facility shall secure records against loss, tampering, or unauthorized use.

A shelter care facility shall write a summary report of the care received by the child including any observations of the child's behavior patterns or special needs of the child. This report must be submitted to the child placement agency upon the discharge of the child.

Source: 12 SDR 4, effective July 25, 1985; 34 SDR 200, effective January 30, 2008.

General Authority: SDCL 26-6-16.

Law Implemented: SDCL 26-6-16.

Cross-Reference: Treatment plan, § 67:42:07:05.

Submit plan by: September 30, 2022

Corrective Action Plan (Attach documents if needed):

All items noted in the fire and health inspection were corrected. Youth at that have been at the facility over 60 days have moved. The agency does not intend to have kids over 60 days on a regular basis and will not pursue items required for long term care. The agency will communicate with this office in the future if there are youth requiring care beyond the 60 days allowed.

Date Corrective Action Plan Implemented: 12/15/22

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.

Frankie White Dress
Signature of Agency Director

1-19-2023
Date

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

Kevin Kanta
Signature of Licensing Staff

1/19/23
Date