



South Dakota
Department of
Social Services

**Corrective Action Plan
Wellfully
Psychiatric Residential
Treatment**

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: Wellfully – Psychiatric Residential Treatment Facility (PRTF)

ARSD – Out of Compliance

Wellfully was found to be out of compliance with the following Administrative Rule of South Dakota:

67:42:01:12. Reporting of incidents or changes in circumstances. The provider shall report a change in circumstance that may affect the provider's ability to comply with the requirements of the provider's license or ability to provide adequate care. A change in circumstance includes items such as a change of address, a change in the household size, a change in the household composition, a change in the condition of the facility or home, or involvement with the Division of Child Protection Services or law enforcement concerning allegations of child abuse or neglect. The report must be made to the provider's licensing worker or agency within 24 hours after the change in circumstance occurs.

The provider shall immediately report all incidents of suspected child abuse or neglect either to the department or to law enforcement officials.

A family foster home, group care center for minors, residential treatment center, intensive residential treatment center, child placement agency, and independent living preparation program must report to the placing worker the occurrence of an unusual incident such as fire, death, client runaway, client/provider incompatibility, or serious injury to or serious illness of a client. The provider shall make the report to the placing worker immediately after ensuring that children in care are safe.

Non-Compliance Finding:

Wellfully has not submitted any reports regarding ARSD 67:42:01:12 for their PRTF facility since they received their license for PRTF.

Action Needed:

Submit a plan to ensure all reports regarding 67:42:01:12 are submitted in a timely manner. Also, submit all incidents which occurred on or after May 1, 2021.

Submit plan by: July 19, 2021

Corrective Action Plan (Attach documents if needed):

Burke Eilers has made amendments to our existing policies as it relates to administrative rules 67;42;01;12 and the policies with the changes are included in the attachment. All significant changes that occur to the facility DSS and DOC will be notified in writing (page 16). All serious incidents will be reported to the worker of the placement agency such as DSS and or DOC as well as the guardian as appropriate. This must be done in a timely manner after the youth is safe. Serious occurrences include fire, death, running away, serious injury or illness changes. This updated change is already in effect. At our next all staff meeting at the end of the month Bryan Satterwhite will notify the staff of this change and in a related matter to serious incidents the nursing staff will educate the staff through a training and how to take vitals and protocols on suicide and self-harm watch. We will go over expectations and procedures on how to do checks.

Date Corrective Action Plan Implemented:

Date of Expected Completion: July 19, 2021 revised 7/23/21

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.



Signature of Agency Director



Date

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



Signature of Licensing Staff



Date