



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 PRTF

ARSD – Out of Compliance

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

67:42:01:06. Ability to Provide Care. An applicant shall demonstrate the ability to provide care to a client which meets the client’s intellectual, physical, social, and emotional needs. The applicant’s ability is determined by the capacity to provide the following:

1. An understanding of, and encouragement and emotional support to, the client;
2. Assistance to the client in coping with daily living experiences;
3. **Supervision of the client;**
4. If working with children, an understanding of child development and appropriate use of discipline; and
5. Ability to apply the reasonable and prudent parent standard for the participation in age or developmentally-appropriate activities.

The applicant must also be able to participate with the department or a responsible party in devising and executing a case plan for a client.

Source: 4 SDR 2, effective July 25, 1977; 7 SDR 66, 7 SDR 66, 7 SDR 89, effective July 1, 1981; 12 SDR 4, effective July 25, 1985; 39 SDR 220, effective June 27, 2013; 42 SDR 97, effective January 4, 2016.

Non-Compliance Finding:

1. On 4/1/2023, a youth was upset and causing a disturbance. During the disturbance, a staff member gave the youth her employee badge, enabling the youth to open the unit doors and attempt to run from the facility.
2. On 4/20/2023, a youth attempted suicide. Despite the youth’s residential counselor telling staff to “keep an extra eye” on the youth, staff allowed the youth to go into her room by herself, where the suicide attempt happened.

Action Needed:

1. Submit a plan to ensure appropriate staff supervision at all hours, and the procedure if staff do not follow the supervision policy.

Submit plan by:

May 11, 2023

Corrective Action Plan (Attach documents if needed):

Summary:

We are currently looking into our training and supervision to develop sustainable ways to improve things moving forward. All of the management staff were tasked with developing a list of items that could use improvement and some better ways to improve processes. We looked into changes in our up-front training and expanded areas that seem to cause frustration with staff. We are going to include one of our shadow days at the beginning of our onboarding process so new staff have a better idea of what they signed up for. After talking with other providers and brainstorming the lessons and suggestions they had we are moving forward on several items. We did put locks on the bathroom doors of our group home but will also do so on the other unit. This has added a great deal more control and supervision. We are in talks with the Rapid City Fire Department to receive permission to remove doors from the bedrooms, this will also help with better supervision. Kids going to their rooms can be a coping skill and this bedroom time can be used in de-escalation of a situation. We added that if a youth is in their room during the day, we need to conduct bedroom check every 5 minutes and record this on the log sheet. We are in the process of reworking our online Relias training and breaking up the online section with on-the-floor work to keep things more interesting. We are reworking our unit schedules to keep the kids more active to reduce boredom and to improve attitudes with the youth. More activities leaves less time to get into trouble. Lynn McLane just finished her investigation, and she has also agreed if it's OK with DSS to talk at an all staff about the fact this is serious stuff and that if staff are negligent they could have charges of abuse and neglect and or contributing to the delinquency of a minor brought against them.

There have been several situations that warrant structural changes to our operations to better insure proper supervision of youth by floor staff. During medication dispensing if the unit has one of their staff dispensing medication to other units when they arrive on the other unit, one of that unit's staff needs to replace the med cert staff position. Staff ratios have to be maintained. If this is a difficulty, then leads or counselors /case managers can cover the floor during this period. We are in the process of creating two levels of youth development specialists or floor staff positions. More experienced staff will be considered for the senior level position and new staff will remain at level one. Every effort to place a senior level 2 position with the new staff will be made to help give mentoring /training to the less experienced staff. The senior position will be the point person on the floor and to help the new staff learn how to de-escalate, redirect and better ensure safety on the unit.

We are creating a competency check list. The supervisors (team leads) will conduct random competency checks on unit floor staff via the camera system to see if there are issues that would require additional training or attention. We are conducting this assessment via the camera to check their day-to-day effectiveness we feel this is a better method to reflect day

to day job performance. The review process will be used to improve skills, address concerns and will be part of the process of advancing or maintaining a level two YDS position.

We have recently improved our new staff training as well as our recertification training. Safe Crisis Management training now includes expansion of role playing and making the training more relative to the issues faced by staff. We have also revamped our online training through Relias (see below and attached). We have trained our nurse so she can now conduct CPR on site. Staff are now being trained in Mental Health First Aid to have a better understanding of mental health and substance abuse issues.

We reworked our policies in regard to training (see below).

Wellfully training policy:

1. New staff must complete all items in our Orientation Check list by their supervisor.
2. All direct care staff will participate in the in-service trainings. Over the course of the year, staff will receive over 40 hours of continuing education, this includes weekly training, initial and recertification of Safe Crisis Management as well as special trainings or classes provided by Wellfully or outside agencies.
3. The initial trainings required for direct care staff includes the following:
 - (1) Administrative procedures and overall program goals; See youth care staff handbook.
 - (2) Understanding emotional needs and problems that affect youth: Mental Health first aid and SCM
 - (3) Family relationships, communication and the impact of separation; Relias module
 - (4) Substance abuse, its recognition, prevention, and treatment: Mental Health First Aid.
 - (5) Identification of child abuse and neglect, mandatory reporting requirements: Relias module: Identifying and responding to child abuse and neglect
 - (6) Principles and practices of residential care; Relias module: best practices behavior support and intervention
 - (7) Behavior management / de escalation techniques; Safe Crisis Management
 - (8) Use of seclusion and personal restraint: review of our policies and handbook for ESI/Restraint; Safe Crisis Management
 - (9) Emergency and safety procedures: overview by supervisor and table top practice monthly on specific emergencies.
 - (10) Cultural sensitivity. Relias training module: DEI introduction multi cultural care, as well as training opportunities provided by Great Planes Tribal Leaders Health Board.
 - (11) CPR and First Aid: monthly classes will be provided for new staff and recertification of current staff, with our inhouse trainer.
 - (12) Safe Crisis Management certification and re-certification.
 - (14) Special trainings as needed or when opportunities arise, such as Narcan, helping kids in care with diabetes, Love and Logic training, Suicide awareness.

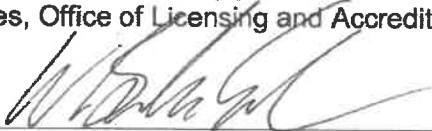
For new staff they receive, SCM (24 hours), CPR (3 Hours), orientation check list, policies, duties, responsibilities, paperwork and shadowing (40 hours) Relias (14 hours), and a final competency test. This is a total of 81 hours of training. Every year existing staff receive over 40 hours of ongoing training including annual re-certification of SCM and CPR as needed.

1. **Licensed staff (RN, LPN, LPC, LPC-MH, MSW, MSW-PIP, QMHP, LAC, CAC, ACT, CPS)**
WellFully will cover the licensing fee associated with applicable job duties.
 - o It is the employee's responsibility to keep up with renewal, continuing education and supervision requirements.
 - o The licensed employee must adhere to the requirements associated with the licensing board.

Date Corrective Action Plan Implemented: 5/10/2023

Date of Expected Completion: 6/1/2023

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

5-10-2023

Date

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



Signature of Licensing Staff

5-11-2023

Date