

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

This is to certify that Sacred Heart Center is hereby granted
this license to conduct and maintain a Group Care Center Minors
located at 121 Landmark Avenue, Eagle Butte, SD 57625
to provide care for a maximum of 16 children ages 10 to 17 years,
for the period from September 1, 2021 to August 31, 2022.

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 15th day of November 2021.



Becky Nelson

Licensing & Accreditation Administrator

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

License Number 86

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

AGENCY NAME: Sacred Heart Center

DIRECTOR: Gregory Fisher

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

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

Comments:

An application for license renewal dated January 16, 2021 is on file in the licensing record. It contains a signed statement of compliance with the Civil Rights Act of 1964, which is part of the facility agreement with the Department of Social Services.

2. Agency Responsibilities – SDCL 26-6-11

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

Comments:

The reviewers found Sacred Heart Center to be adequately furnished and maintained to provide for the needs of the residents. Financial reports provided indicate the availability of sufficient funds to provide for the needs of the program.

3. Insurance - 67:42:01:35

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

Comments:

A Certificate of Liability Insurance was submitted with the application materials and expires June 15, 2022.

4. Accounting Systems - 67:42:01:34

| A. An audit of the accounts has been done in the last year by a CPA. | <u>YES</u> | <u>NO</u> |
|--|------------|-------------------|
| | <u>✓</u> | <u> </u> |

Comments:

An audit of Sacred Heart Center's financial statements for the year ending June 30, 2020 was completed by Clifton Larsen Allen LLP on October 7, 2020. A copy of the audit report, including a summary of significant accounting policies was provided at the time of the licensing review and is on file in the licensing record.

5. Staff Qualifications - 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 science area, or | ✓ | _____ |
| 2. An equivalent combination of education and experience. | N/A | _____ |
| 3. At least two years of relevant alternative child care experience. | ✓ | _____ |

Comments:

Greg Fisher took over as Executive Director on December 1, 2015. Greg has a bachelor's degree and has numerous years' experience including serving as the Chemical Dependency Counselor for Three Rivers.

Kirk Beyer MSE, BA, is the Director of Operations and Programs and has been employed in this capacity since March 29, 2013.

Leah Spiel has served as the Child Services Director since August 27, 2015. Leah has a degree in Special Education with numerous years of education experience.

| 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 childcare staff; and 3 years older than any children supervised. | N/A | _____ |

Comments:

A list of staff including their qualifications was submitted prior to the licensing review and is on file in the licensing record. Reviewers were informed the facility does not employ individuals under the age of twenty-one.

6. Staff/Child Ratio - 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). | ✓ | _____ |
| 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 schedules were submitted with the application for renewal. The schedule provides for at least a 1:8 staff/child ratio during normal waking hours and at least 1:16 during regular sleeping hours when the facility is at maximum capacity. Interviews with staff and residents verified staff to child ratio is followed.

7. Personnel Records – 67:42:07:04, 67:42:07:07, 67:42:07:09, 67:42:07:04.01

| | <u>YES</u> | <u>NO</u> |
|---|------------|-----------|
| A. Personnel records are maintained and contain the following: | | |
| 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. | ✓ | |
| 9. At least one official onsite designated to authorize the Reasonable and Prudent Parent Standard. | ✓ | |

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. | ✓ | |
| 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:

Sacred Heart Center utilizes a checklist for use as an orientation plan and to document completion of the agency orientation by new staff. A document labeled Sacred Heart Child Services 2021-22 Trainings was included in the application materials and can be found in the licensing record. The document labels out In-Service Trainings conducted by month by the facility. The trainings by month appear to meet all areas of in-service training required during the first year of employment. Personnel records for staff employed for more than one year contained documentation of at least the minimal amount of training needed to be in compliance with licensing rule.

| | | |
|---|------------|-----------|
| 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 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:

Sacred Heart Center's written procedures for reporting suspected child abuse and neglect are in compliance with licensing rules. All personnel records reviewed contained a signed statement defining child abuse and neglect and outlined 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, 67:42:07:04.01 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. | ✓ | _____ |
| 3. Discharge. | ✓ | _____ |
| 4. Discipline | ✓ | _____ |
| 5. Confidentiality. | ✓ | _____ |
| 6. Health care of children | ✓ | _____ |
| 7. Emergency procedures in case a child is injured. | ✓ | _____ |
| 8. Reasonable and prudent parent standard | ✓ | _____ |
| B. Children attend a local school. | ✓ | _____ |

Comments:

Sacred Heart Center residents attend local schools through an agreement with local school districts.

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. | ✓ | |
| *3. | Treatment plans are developed within one month of placement and updated at least every three months. | ✓ | |
| *4. | Treatment plans must contain the child's needs and strengths. | ✓ | |
| *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; | ✓ | |
| *6. | A discharge plan that includes the projected length of stay and the conditions under which the child will be discharged. | ✓ | |
| *7. | Monthly progress reports submitted to placement agency. | ✓ | |
| *8. | Progress reports reflect the treatment plan. | ✓ | |
| 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. | Evidence of application of the Reasonable and Prudent parent Standard. | ✓ | |
| 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. | N/A | |
| 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. | ✓ | |

Comments:

Records reviewed for youth in care contained documentation of the above requirements.

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:

Sacred Heart Center's written procedures for storage and administration of medications are in compliance with licensing rules.

12. Seclusion and Restraint - 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. | ✓ | |
| C. Placement agency/parental/guardian approval of seclusion and restraint is obtained prior to its use. | ✓ | |
| 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. | ✓ | |
| F. Placement in seclusion or restraint is documented. | ✓ | |
| G. A room used for seclusion meets the physical specifications of 67:42:07:25. | N/A | |

Comments:

Sacred Heart Center's written procedures for use of seclusion and restraint are in compliance with licensing rules. Sacred Heart does not have a room used exclusively for seclusion.

| | | |
|---|------------|-----------|
| 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:

Sacred Heart did not use volunteers as a part of their programming during the past year.

| | | |
|---|------------|-----------|
| 14. <u>Physical Facility</u> - 67:42:07:11, 67:42:07:12 | <u>YES</u> | <u>NO</u> |
| A. There is a current fire inspection. | 6/14/21 | _____ |
| B. There is a current health inspection. | 6/14/21 | _____ |
| 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:

An annual fire and health inspection was completed on June 14, 2021 and all issues were resolved.

| | | |
|---|------------|-----------|
| 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:

The facility utilizes a rotating menu. Interviews with staff indicated the meals are healthy, good quality, and sufficient quantity.

16. Recommendations:

Sacred Heart Center is found to be in compliance with licensing rules for a Group Care Center for Minors. See comments regarding Insurance.

Completed By: Kevin Kanta 11/4/21
Kevin Kanta, Program Specialist

Date of On-Site Visit: 10/19/21

Program Manager: Muriel Nelson