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

This is to certify that Rosebud Sioux Tribe is hereby granted extension to conduct and maintain a Group Care Center for Minors-Shelter Care Facility (Spotted Tail Children's Home)

located at 2438 Sioux Boulevard, Rosebud, SD to provide care for a maximum of 8 children 0 to 15 years, for the period from September 1, 2024 to December 31, 2024.

SDCL 1-26-28 permits an existing license to remain in effect after its expiration date provided a "timely" application has been submitted. This license is subject to revocation for reasonable cause as cited in SDCL 1967; Section 26-6-23.

Issued this 6th day of May 2024.



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 R73

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

This is to certify that Rosebud Sioux Tribe is hereby granted this license to conduct and maintain a Group Care Center for Minors-Shelter Care Facility (Spotted Tail Children's Home)

located at 2438 Sioux Boulevard, Rosebud, SD to provide care for a maximum of 8 children 0 to 15 years, for the period from September 1, 2024 to August 31, 2025.

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 24th day of October 2024.



Licensing & Accreditation Administrator

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

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

AC	ENC	Y NAME: Spotted Tail Children's Home (R73)		
DII	REC.	FOR: Pete Small Bear		
1.	Lic	ensing 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.	✓	
		2. Documentation of need.	N/A	
		3. A copy of the building plans (approved by the Fire Marshal and Department of Health).	N/A	
	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.	✓	
	Con	mments:		
	con	application for license renewal dated October 15, 2024 is on file in tains a signed statement of compliance with the Civil Rights Act of facility agreement with the Department of Social Services.		
2.	Age	ency Responsibilities – SDCL 26-6-11	<u>YES</u>	<u>NO</u>
	A.	The building and equipment needs of the organization are adequately met.	✓	
	B.	The agency has sufficient funds to meet the needs of the community.	✓	
	The Fin	mments: e facility is adequately furnished and maintained to provide for the rancial reports submitted indicate the availability of sufficient funds agency.		
3.	Ins	<u>urance</u> - 67:42:01:35	<u>YES</u>	<u>NO</u>
	A.	Vehicles used to transport clients have appropriate passenger liability insurance.	✓	
	B.	The agency carries public liability insurance.	✓	
	Cor	mments:		

Basic liability Insurance is purchased through Hudson Insurance Company. A copy of the current Certificate of Liability Insurance verifying coverage through November 8, 2024 was submitted with the application for license renewal and is on file in the licensing record. Copies of vehicle insurance cards verifying automobile insurance through November 8, 2024 were provided with

	apj	plica	tion materials. Please send a copy of the new certificate when	available.	
4.	Acc	count	ting Systems - 67:42:01:34	<u>YES</u>	<u>NO</u>
	A.	An CP.	audit of the accounts has been done in the last year by a A.	✓	
	Co	omm	ents:		-
			ument titled Fiscal Year Revenues and Expenditures from ted with the application materials. The document shows adeq		
5.	Sta	ff Qu	nalifications - 67:42:07:02, 67:42:07:07		
	A.	Pro	gram 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 childcare experience.	✓	
	Jod	i has	In is the supervisor of the program. She oversees the day-to day worked for the facility since 2015 and has worked as a Comme than twenty years.		-
	B.	Oth	ner 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	
	Cor	mme	nts:		
			staff, including their qualifications, employed at the time of a mitted with the application.	application for li	cense renewal
6.	Sta	ff/Ch	<u>nild Ratio</u> - 67:43:07:03	<u>YES</u>	<u>NO</u>
	A.	1:8	during waking hours.	✓	
	B.	1:2	5 in the building during sleeping hours.	✓	
	C.		e staff member present in each separate sleeping unit during eping hours.	✓	

	D.		rangements made for substitute staff during vacations, ess, or off-duty time of regular staff.	✓	
	E.	Cei	rtified special ed teachers are employed (when appropriate).	N/A	
	F.	hea	ovisions are made for auxiliary staff members, i.e., mental alth professionals, physical therapist, and/or occupational rapist (when appropriate).	N/A	
	G.		helter care facility maintains a staff/child ratio of 1:4 for ldren under the age of four years during waking hours.	✓	
	Н.	or a	cility has a written plan to ensure that staff, law enforcement, appropriate emergency responders are available at the center hin a reasonable time in the event of an emergency.	✓	
7.	Staf is ty Sup	pical ervis	scheduled for twelve-hour shifts which are either 7 a.m. to 7 p. lly one staff for each shift due to having less than 8 residents. To fill in for shifts as needed. el Records - 67:42:07:07, 67:42:07:08, 67:42:07:09		
٠.	· · ·		rsonnel records are maintained and contain the following:	YES	NO
	71.	1.	Resume or application that includes educational background, personal, and employment history.	<u>1155</u> ✓	<u>110</u>
		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/FBI.	✓	
		7.	Verification of sex offender registry checks.	√	
		8.			
			Verification of current certification in basic 1 st aid and CPR.	✓	

Comments:

Records reviewed contained documentation to indicate the agency meets the above standards.

8.	<u>In-s</u>	<u>ervice Training</u> - 67:42:07:04	<u>YES</u>	<u>NO</u>
	A.	There is a written plan for orientation and training for staff and volunteers.	✓	
	В.	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.	√	
9.	Rep Circ	orting Suspected Child Abuse or Neglect and Changes in sumstances - 67:42:01:12, 67:42:07:15, 67:42:07:16,	<u>YES</u>	<u>NO</u>
9.	<u>Circ</u> 67:	<u>sumstances</u> - 67:42:01:12, 67:42:07:15, 67:42:07:16, 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:

STCH written policies for reporting suspected child abuse or neglect relate to the above requirements. Each personnel record reviewed contained a signed statement defining child abuse and neglect and outlining agency reporting procedures.

10.			<u>nt</u> – 67:42:01:01(3), 67:42:07:01, 67:42:07:01.01, 7:01.02, 67:42:07:05, 67:42:07:10, 67:42:07:28, 67:42:07:		
	A.	The	ere are written procedures relating to:	<u>YES</u>	<u>NO</u>
		1.	Intake.	✓	
		2.	Treatment.	N/A	
		3.	Discharge.	✓	
		4.	Discipline	✓	
		5.	Confidentiality.	✓	
		6.	Health care of children	✓	
		7.	Emergency procedures in case a child is injured.	✓	
		Con	nments:		
		STC	CH written procedures relate to the above required areas.		
	B.	Chi	ldren attend a local school.	✓	
	C.	Cas	e 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.	✓	
	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.	✓	
	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.	√	
	G.	The interstate compact administrator has been contacted before acceptance of an out-of-state child.	N/A	
	Н.	A facility that provides alternative services to children in custody of the department has a signed alternative service agreement with the department.	N/A	
		nments: ords reviewed for children in care contained documentation to veri s.	fy compliance	with licensing
11.	Med	dications - 67:42:07:19, 67:42:07:20, 67:42:07:22, 67:42:07:23		
	A.	The facility has written procedures relating to the storage and administration of medication which include:	<u>YES</u>	<u>NO</u>
		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.	N/A	
	D.	Medicine is kept in a locked cabinet.	✓	
	E.	A medication record is kept on each child.	✓	
Con	nme	nts:		
	te to	written procedures for storage and administration of medications the above requirements and are in compliance with licensing		
12.		lusion and Restraint - 67:42:07:05, 67:42:07:24, 67:42:07:25, 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	
	Cor	mments:		
	have	CH has written procedures which do not allow for the use of seclule a room used exclusively for seclusion. The agency has not utilize reporting period.		
13.	<u>Vol</u>	<u>lunteers</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	Varification of caroning for substantiated reports of skild 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	
		nments: reviewer was informed the STCH Shelter does not utilize voluntee	rs as part of pro	ogramming at
		time.		
14.	<u>Phy</u>	sical Facility - 67:42:07:11, 67:42:07:12	<u>YES</u>	<u>NO</u>
	A.	There is a current fire inspection.	✓	
	B.	There is a current health inspection.	✓	
	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.	✓	
		mments: re/health inspection was completed on October 15, 2024 with no is	sues noted.	
15.	Nut	<u>rition</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:

STCH utilizes a weekly menu to coordinate meals.

16. Recommendations:

Spotted Tail Children's Home is found to be in substantial compliance with licensing requirements for a Group Care Center for Minors-Shelter Care Facility. See comments on Insurance.

It is recommended that a satisfactory license be issued to the Spotted Tail Children's Home to operate a Group Care Center for Minors-Shelter Care Facility to provide care for a maximum of eight children age infant to fifteen years, on an emergency basis.

Completed By: <u>Kevin</u> 1	Kanta	10/24/24
Kevin Kanta, Program	Specialist	
Date of On-Site Visit:	10/15/24	
Program Manager: M	Juriel 7 Nelson	