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

This is to certify that Sotera Youth and Family Services is hereby granted this license to conduct and maintain a Group Care Center for Minors-Shelter Care Facility located at 2306 Flag Mountain Dr., Pierre, SD to provide care for a maximum of 8 children ages 0 to 17 years, for the period from January 6, 2023 to December 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 6th day of January 2023.



Licensing & Accreditation Administrator

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

INITIAL LICENSING STUDY SHELTER CARE FOR MINORS ARSD 67:42:01, 67:42:07

AGENCY NAME: Sotera Youth and Family Services						
EXE	EXECUTIVE DIRECTOR: Katie Big Eagle					
1.	. <u>Licensing Requirements</u> - 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.	✓			
		3. A copy of the building plans (approved by the Fire Marshal and Department of Health).	N/A			
	В.	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	nments:				
	The agency has discussed the need for the program with Child Protection Services (CPS). CPS intends to contract to utilize the shelter when licensed. While CPS will contract with Sotera, they have stated that they cannot guarantee placements into the program due to the unpredictability of the need for this service.					
	at 2 It c	application for a Shelter Care Program for male and female youth a 306 Flag Mountain Drive, Pierre, SD, dated September 2, 2022, is contains a signed statement of compliance with the Civil Rights Act of facility agreement with the Department of Social Services.	on file in the licen	sing record.		
2.	Age	ncy Responsibilities – SDCL 26-6-11	<u>YES</u>	<u>NO</u>		
2.	Age A.	ncy Responsibilities – SDCL 26-6-11 The building and equipment needs of the organization are adequately met.	YES ✓	<u>NO</u>		
2.	_	The building and equipment needs of the organization are		<u>NO</u>		
2.	A. B.	The building and equipment needs of the organization are adequately met. The agency has sufficient funds to meet the needs of the		<u>NO</u>		
2.	A. B. Con The	The building and equipment needs of the organization are adequately met. The agency has sufficient funds to meet the needs of the community.	✓ ✓ and maintained t	o provide for		
2.	A. B. Con The the ava	The building and equipment needs of the organization are adequately met. The agency has sufficient funds to meet the needs of the community. Imments: SYFS is located in Pierre. Agency offices are adequately furnished needs of the agency. Financial reports submitted with the applic	✓ ✓ and maintained t	o provide for		
	A. B. Con The the ava	The building and equipment needs of the organization are adequately met. The agency has sufficient funds to meet the needs of the community. ments: SYFS is located in Pierre. Agency offices are adequately furnished needs of the agency. Financial reports submitted with the application lability of sufficient funds to provide for the needs of the program.	and maintained t	o provide for indicate the		
	A. B. Con The the ava	The building and equipment needs of the organization are adequately met. The agency has sufficient funds to meet the needs of the community. Imments: SYFS is located in Pierre. Agency offices are adequately furnished needs of the agency. Financial reports submitted with the applicability of sufficient funds to provide for the needs of the program. Irance - 67:42:01:35 Vehicles used to transport clients have appropriate passenger	and maintained t	o provide for indicate the		

A copy of the Certificate of Liability Insurance was included with the application for license renewal and is on file in the licensing record. Commercial Liability (policy #NXTXPLLTDQ-00-GL) is purchased

			, 2023 is on file in the licensing record.	current coverage	expiring			
4.	Acc	count	ing Systems - 67:42:01:34	<u>YES</u>	<u>NO</u>			
	A.	A. An audit of the accounts has been done in the last year by a						
		CPA	A.	NA				
	<u>Cor</u>	mme	nts:					
			nual estimated cost to operate the program at full capacity was. An annual audit will be required upon license renewal.	as included in the	application			
5.	<u>Sta</u>	ff Qu	alifications - 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	✓				
		2.	An equivalent combination of education and experience.	✓				
		3.	At least two years of relevant alternative child care experience.	✓				
	Comments: Job descriptions for Executive Director and Shelter Director were included with the application materials.							
	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 child care staff; and 3 years older than any children supervised.	✓				
	Cor	Comments:						
	A list of employees SYFS intends to hire including their positions to be held, education, experience and date of employment was included in the application materials.							
6.	<u>Staff/Child 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.		angements made for substitute staff during vacations, illness, off-duty time of regular staff.	✓				

E. Certified special ed teachers are employed (when appropriate).

F.

Provisions are made for auxiliary staff members, i.e., mental

N/A

			Ith professionals, physical therapist, and/or occupational rapist (when appropriate).	✓	
	G.		nelter care facility maintains a staff/child ratio of 1:4 for dren under the age of four years during waking hours.	N/A	
	Н.	or a	ility has a written plan to ensure that staff, law enforcement, appropriate emergency responders are available at the center nin a reasonable time in the event of an emergency.	✓	
Con	nmer	nts:			
exai	mple	of a	uested a license capacity of 8 residents in their initial applicatio weekly schedule submitted with the application materials indicates. SYFS will utilize volunteers to supplement their staff.		
7.	Pers	sonne	el Records - 67:42:07:07, 67:42:07:08, 67:42:07:09		
	A.	Pers	sonnel 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.	✓	
	SYF 67:	42:07	aware of all licensing rules which pertain to personnel records (7:08, 67:42:07:09). Personnel records will be reviewed at the a of the SYFS annual Professional Performance Appraisal was incli	nnual on-site	license review.
8.	<u>In-s</u>	servic	<u>ce Training</u> - 67:42:07:04	<u>YES</u>	<u>NO</u>
	A.		ere is a written plan for orientation and training for staff and unteers.	✓	
	B.	to t the	h employee has a documented record of an initial orientation he center within one month of the date of hire that includes facility's functions, services, community resources and cific job functions.	✓	
	C.	Eac	h employee has a documented record of a minimum of		

		twe	enty-four hours annual in-service training.	✓	
	D.	of e	ch employee receives in-service training during the first year employment that includes all of the areas required in 42:07:04.	<u> </u>	
	E.		ining for all employees after the first year of employment is ermined by an annual evaluation and is competency based.	✓	
Orie		ion a	nd annual training requirements are detailed in the SYFS emplords will be renewed upon license renewal.	oyee handbook	Employee
9. <u>Circ</u>			ng Suspected Child Abuse or Neglect and Changes in es - 67:42:01:12, 67:42:07:15, 67:42:07:16, 67:42:07:05	<u>YES</u>	<u>NO</u>
	A.		e facility has a written procedures for handling and reporting pected 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.		ch employee has signed a statement acknowledging and derstanding the reporting procedure.	✓	
	C.		e facility is aware of its need to report any changes of cumstances that may affect its licensed status.	✓	
Con	nmei	nts:			
			itten procedures for identification and reporting of child abuse ements and are in compliance with licensing rules.	and neglect th	at address the
10.	67:	42:0	ent – 67:42:01:01(3), 67:42:01:21, 67:42:07:01, 7:01.01, 67:42:07:01.02, 67:42:07:05, 67:42:07:10, 7:28, 67:42:07: 29		
	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.	✓	
Commer	nts:	-		
The SYF with lice		s written procedures which relate to all of the above required rules.	areas and a	ire in compliance
В.	Chil	dren attend a local school.	✓	
	sident	ts will attend their home school when possible. If the resident of agency must make other arrangements for the youth.	cannot rema	in in their 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.	Rec	ords are kept in a locked file.	✓	
*E.	asse	shelter care facility that does not provide short term essment services is exempt from numbers 2, 3, 4, 5, 6, 7 and ut submits a summary report to the placement agency upon	✓	

		disc	harge of the child.		
	F.	days days	dren do not remain in a shelter care facility longer than thirty sunless an extension of time is needed not to exceed thirty for the plan to be implemented or needed assessment ices completed.	✓	
	G.		interstate compact administrator has been contacted before eptance of an out-of-state child.	N/A	
	H.	of t	cility that provides alternative services to children in custody he department has a signed alternative service agreement the department.	N/A	
Con	nmen	ts:			
Res revi		reco	rds will be reviewed for compliance with the above requiremen	ts at the yearly o	onsite
11.	Med	licatio	ons - 67:42:07:19, 67:42:07:20, 67:42:07:22, 67:42:07:23		
	A.		facility has written procedures relating to the storage and inistration 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 lic	ensed nurse is responsible for administration of medications.	✓	
	C.		chotropic drugs are prescribed by a MD, CNP or PA with oing quarterly follow-up.	✓	
	D.	Med	icine is kept in a locked cabinet.	✓	
	E.	A m	edication record is kept on each child.	✓	
Con	ımen	ts:	-		
SYF		writ	ten procedures for storage and administration of medications t s.	hat are in compl	iance with
12.			<u>a and Restraint</u> - 67:42:07:05, 67:42:07:24, 67:42:07:25, 226, 67:42:07:27	<u>YES</u>	<u>NO</u>
	A.		facility has written procedures relating to the use of lusion and restraint.	✓	
	В.	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.	✓		
	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		
SYF		ts: s written policies for restraint or seclusion that comply with licens ity may not use locked seclusion.	ing requiremer	nts.	The shelter
13.	<u>Volu</u>	<u>inteers</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		
		Verification of screening for substantiated reports of child abuse or neglect.	N/A		
	Н.	Verification of submission of fingerprints to the DCI.	N/A		
	I.	Verification of sex offender registry checks.	N/A		
Con	nmen	<u>ts:</u>			
	ewer	written procedures for use of volunteers that are in compliance wi will review records for volunteers if the facility uses them during th	•		
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.	10/19/22		
	B.	There is a current health inspection.	10/19/22		
	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, blan	nkets and pillows.	✓	
Con	nmer	nts:			
bed con gara	roon sistir age.	ter care program will be occupying a duplex in ns, one full bath, a full kitchen, dining room a ng of a kitchen, large family room/office area, It has two private entrances and a large back ised for care and the agency will expand to th	nd living room. The low full bath and utility roc yard area with a walk-o	ver level is 885 om with a 620 s out patio. The o	sq ft sq ft upper level
A fi	re ar	nd health inspection was completed on Octobe	er 19 th , 2022 and there	were no issues	identified.
15.	Nut	<u>rition</u> - 67:42:07:13		<u>YES</u>	<u>NO</u>
	A.	Meals are of sufficient quantity to meet childred.	ren's nutritional	✓	
	В.	Arrangements are made for children with a s diet.	pecial prescribed	✓	
	Con	nments:			
SYF	S ha	s written policies regarding Nutrition Standards	s. SYFS will develop a m	onthly menu.	
16.	Rec	commendations:			
four	nd to	s established policies and procedures for the be in substantial compliance with licensing runce with licensing rules for a Group Care Cente	le and has indicted their	r intent to conti	
Min	ors-S	ommended that a satisfactory license be iss shelter Care Facility at Pierre, SD, to provice en years.			
		Completed By:	Kevin Kanta		1/6/23
			Kevin Kanta , Program S	Specialist	Date
		Program Manage	- Muriel Ne	elson	