

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


This is to certify that Wakanyeja Gluwitayan Otipi is hereby granted this license to conduct and maintain a Shelter Care and Group Care Facility located at House #32, Porcupine School Housing, Porcupine, SD 57776 to provide care for a maximum of 10 children ages 0 to 12 years, for the period from March 1, 2023 to August 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 March 2023.



License Number R31766

  
\_\_\_\_\_  
Licensing & Accreditation Administrator

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

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

AGENCY NAME: Wakanyeja Gluwitayan Otipi (WGO) Shelter

DIRECTOR:     Lisa Schrader/Barbara Dull Knife    

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.   | ✓          | _____     |
| 2. Documentation of need.   | ✓          | _____     |
| 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. | ✓          | _____     |

Comments:

An application for license renewal dated September 13, 2022 is on file in the licensing record. It contains a signed statement of compliance with the Civil Rights Act of 1964. The agency intends to provide Group Care services in the next year. Items needed to satisfy the additional requirements were submitted through the attached Corrective Action Plan.

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> |
|---|------------|-----------|
|   | ✓          | _____     |
| B. The agency has sufficient funds to meet the needs of the community.      | ✓          | _____     |

Comments:

Financial reports submitted with the application for license 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> |
|---|------------|-----------|
|   | ✓          | _____     |
| B. The agency carries public liability insurance.                                     | ✓          | _____     |

Comments:

A copy of the Certificate of Liability Insurance was included with the application and is on file in the licensing record. Professional and Commercial Liability (Policy# SC20101037) is purchased from United Nations Insurance, LLC. Coverage is verified through October 13, 2023.

- |  |            |                |
|--|------------|----------------|
| 4. <u>Accounting Systems</u> - 67:42:01:34                           | <u>YES</u> | <u>NO</u>      |
| A. An audit of the accounts has been done in the last year by a CPA. | ✓<br>_____ | _____<br>_____ |

Comments:

The projected budget and documents showing capital funds available were submitted with application. The agency relies on donations for the building's utilities and is negotiating a new daily rate with the Ogala Sioux Tribe.

- |  |            |                |
|--|------------|----------------|
| 5. <u>Staff Qualifications</u> - 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 sciences area, or | ✓<br>_____ | _____<br>_____ |
| 2. An equivalent combination of education and experience.                    | ✓<br>_____ | _____<br>_____ |
| 3. At least two years of relevant alternative childcare experience.          | ✓<br>_____ | _____<br>_____ |

Comments:

Lisa Schrader, MSW, is volunteering her time to fill the program director responsibilities. She has over 10 years of relevant alternative childcare experience. Barbara Dull Knife is also assisting in the program director responsibilities. She has a Bachelor's degree in Human Services and over 10 years of relevant alternative childcare experience.

- |   |            |                |
|---|------------|----------------|
| B. Other Staff  | <u>YES</u> | <u>NO</u>      |
| 1. At least eighteen years of age.  | ✓<br>_____ | _____<br>_____ |
| 2. If under age twenty-one, is under direct supervision of an experienced child care staff; and 3 years older than any children supervised. | ✓<br>_____ | _____<br>_____ |

Comments:

A list of staff, including their qualifications, employed at the time of application for license renewal was submitted with the application.

- |   |            |                |
|---|------------|----------------|
| 6. <u>Staff/Child Ratio</u> - 67:43:07:03   | <u>YES</u> | <u>NO</u>      |
| A. 1:8 during waking hours.   | ✓<br>_____ | _____<br>_____ |
| B. 1:25 in the building during sleeping hours.  | ✓<br>_____ | _____<br>_____ |
| C. One staff member present in each separate sleeping unit during sleeping hours.                       | ✓<br>_____ | _____<br>_____ |
| D. Arrangements made for substitute staff during vacations, illness, or off-duty time of regular staff. | ✓<br>_____ | _____<br>_____ |

|  |     |  |
|--|-----|--|
| 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.  | ✓   |  |
| 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:

Application materials submitted state two staff will be working on all shifts to provide a maximum ratio of one staff to five children. The number of children at the agency is limited when the number of children under four requires a one to four ratio.

7. Personnel Records - 67:42:07:07, 67:42:07:08, 67:42:07:09

| A. Personnel 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 <sup>st</sup> aid and CPR.  | ✓          |           |

Comments:

Records reviewed contained the documentation above.

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:

Records reviewed contained the documentation above.

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

WGO Emergency Shelter has written procedures for identification and reporting of child abuse and neglect that address the above requirements and appear to be in compliance with licensing rules. An Emergency Children’s Shelter Home Manual of Standards which addresses the above requirements was included in the application materials.

- |   |            |           |
|---|------------|-----------|
| 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, 67:42:07:05, 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.   | See        | Comments  |
| 3. Discharge.   | ✓          |           |
| 4. Discipline   | ✓          |           |
| 5. Confidentiality.   | ✓          |           |
| 6. Health care of children  | ✓          |           |

|   |     |          |
|---|-----|----------|
| 7. Emergency procedures in case a child is injured.   | ✓   |          |
| <u>Comments:</u>  |     |          |
| WGO has written procedures which relate to all of the above required areas. A treatment plan the agency will use for youth who transition from shelter to group care was provided with the attached Corrective Action Plan. |     |          |
| B. Children attend a local school.  | ✓   |          |
| <u>Comments:</u>  |     |          |
| WGO Emergency Shelter residents will attend their home school when possible or educational programming will be coordinated by the agency.   |     |          |
| 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.   | See | Comments |
| *3. Treatment plans are developed within one month of placement and updated at least every three months.  | See | Comments |
| *4. Treatment plans must contain the child's needs and strengths.   | See | Comments |
| *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;   | See | Comments |
| *6. A discharge plan that includes the projected length of stay and the conditions under which the child will be discharged.  | See | Comments |
| *7. Monthly progress reports submitted to placement agency.   | See | Comments |
| *8. Progress reports reflect the treatment plan.  | See | Comments |
| 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 |  |
| H. A facility that provides alternative services to children in custody of the department has a signed alternative service agreement with the department.  | N/A |  |

Comments:

Resident records will be reviewed for compliance with the above requirements at the yearly onsite review, except multiple youth had been at the facility past the 60 days allowed for shelter care. The agency chose to implement items needed to transition the youth to Group Care when this occurs. See attached Corrective Action Plan.

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:

WGO Emergency Shelter has written procedures for storage and administration of medications that 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.                   | 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 |  |

Comments:

WGO Emergency written policy states restraint or seclusion is not allowed at the agency.

| 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:

WGO Emergency Shelter has written procedures for use of volunteers that are in compliance with licensing rules. The reviewer will review records for volunteers if the facility uses them during the annual on-site license review.

| 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.  | ✓          |           |
| 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. | ✓ |  |

Comments:

WGO Emergency Shelter has a completed Fire & Life Safety Inspection which was completed on July 13, 2022 and can be found in the licensing record. Another unannounced inspection will be completed in the next month.

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

WGO Emergency Shelter has written policies regarding Nutrition Standards.

16. Recommendations:

WGO Emergency Shelter has established policies and procedures for the operation of a Shelter Care Facility that have been found to be in substantial compliance with licensing rule and has indicated their intent to comply with licensing rules for a Group Care Center for Minors-Shelter Care Facility.

It is recommended that a satisfactory license be issued to WGO Emergency Shelter to as a Shelter Care facility in Porcupine, SD, to provide care for a maximum of ten youth age zero to twelve.

|                                  |  |               |
|----------------------------------|--|---------------|
| Completed By: <u>Kevin Kanta</u> |  | <u>3/6/23</u> |
| Kevin Kanta, Program Specialist  |  | Date          |

Program Manager: Muriel Nelson



## Corrective Action Plan WGO Emergency Shelter

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:** WGO Emergency Shelter

### **ARSD – Out of Compliance**

WGO Emergency Shelter was found to be out of compliance with the following Administrative Rule of South Dakota:

**67:42:07:01.01. Shelter care facility -- Length of stay.** A shelter care facility provides neither treatment nor treatment planning. A shelter care facility may maintain children for no more than 30 days. If a placement plan has been made but cannot be implemented or needed assessment services cannot be completed within the 30-day period, an extension of time not to exceed 30 days may be allowed.

**Source:** 12 SDR 4, effective July 25, 1985; 34 SDR 200, effective January 30, 2008.

**General Authority:** SDCL [26-6-16](#).

**Law Implemented:** SDCL [26-6-16](#).

### **Non-Compliance Finding:**

Two files for youth currently placed in the WGO Shelter were found to be placed there for more than 60 days. In addition, documentation that an extension was obtained for placement more than 30 days was not found in the files.

### **Action Needed:**

The agency must submit a list of current youth who have been at the facility over 60 days. The list must include the date the youth entered the facility and a plan for the youth to leave the facility.

If the agency intends to provide Group Care services a plan must be submitted to comply with 67:42:07:05 and 67:42:07:28.

**67:42:07:05. Treatment plan.** The facility shall develop a written treatment plan for each child in care within one month after admission. The 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 parent or guardian. The treatment plan must contain the following:

(1) An assessment of the child's needs and strengths, including implementation of the reasonable and prudent parent standard;

(2) 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; and

(3) A discharge plan that includes the projected length of stay and the conditions under which the child will be discharged.

A shelter care facility that does not provide short-term assessment services is exempt from the requirement for establishing a written case treatment plan.

**Source:** 7 SDR 66, 7 SDR 89, effective July 1, 1981; 12 SDR 4, effective July 25, 1985; portions of this rule were transferred to § 67:42:07:29, 34 SDR 200, effective January 30, 2008; 39 SDR 220, effective June 27, 2013; 42 SDR 97, effective January 4, 2016.

**General Authority:** SDCL [26-6-16](#).

**Law Implemented:** SDCL [26-6-16](#).

**67:42:07:28. Review and evaluation of treatment plan.** The facility shall provide for the review, evaluation, and updating of the child's treatment plan at least every three months. The updated plan must include the progress made toward achieving the goals established in the previous plan and any amendments made to the plan. A monthly report on the child's progress must be submitted to the placement agency. The facility shall send a copy of the monthly report to the child's parent or guardian if the parent or guardian was involved in the child's placement or is actively involved in the treatment planning. The treatment plan and progress reports must become a part of the child's record. During the month of the quarterly treatment plan review, the 30-day progress report may be incorporated into the quarterly review and treatment plan amendment. A case record must be maintained on each child according to § 67:42:01:21. The facility shall secure records against loss, tampering, or unauthorized use.

A shelter care facility shall write a summary report of the care received by the child including any observations of the child's behavior patterns or special needs of the child. This report must be submitted to the child placement agency upon the discharge of the child.

**Source:** 12 SDR 4, effective July 25, 1985; 34 SDR 200, effective January 30, 2008.

**General Authority:** SDCL [26-6-16](#).

**Law Implemented:** SDCL [26-6-16](#).

**Cross-Reference:** Treatment plan, § 67:42:07:05.

**Submit plan by:** September 30, 2022

updated plan must include the progress made toward achieving the goals established in the previous plan and any amendments made to the plan. A monthly report on the child's progress must be submitted to the placement agency. The facility shall send a copy of the monthly report to the child's parent or guardian if the parent or guardian was involved in the child's placement or is actively involved in the treatment planning. The treatment plan and progress reports must become a part of the child's record. During the month of the quarterly treatment plan review, the 30-day progress report may be incorporated into the quarterly review and treatment plan amendment. A case record must be maintained on each child according to § 67:42:01:21. The facility shall secure records against loss, tampering, or unauthorized use.

A shelter care facility shall write a summary report of the care received by the child including any observations of the child's behavior patterns or special needs of the child. This report must be submitted to the child placement agency upon the discharge of the child.

The child's treatment plan will be reviewed by the WGO staff and MSW with the OST CPS staff every thirty days. The meeting will be documented and if in review of the existing plan, the stay is extended, new timelines and identified services will be included in the updated treatment plan. WGO currently documents daily behaviors of the child by each 8 hour shift and documents any educational, medical, psychological and cultural services received. WGO staff will provide a monthly report to OST CPS on the child and family's progress and a copy will be sent to the parent or guardian if the parent or guardian is involved in the child's placement or is actively involved in the treatment planning. The treatment plan and progress reports will become a part of the child's record. During the month of the quarterly treatment plan review, the 30-day progress report will be incorporated into the quarterly review and treatment plan amendment. Case records are maintained on each child according to Section 67:42:01:21. The facility secures records against loss, tampering and unauthorized use.

WGO will write a summary report of the care received by the child including any observations of the child's behavior patterns or special needs of the child. This discharge report will be submitted to the child placement agency upon the discharge of the child.

**Date Corrective Action Plan Implemented: February 21, 2023**

**Date of Expected Completion: March 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.

Barbara Dull Knipe 2/20/23  
Signature of Agency Director Date

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

Kevin Kanta 2/23/23  
Signature of Licensing Staff Date