South Dakota Department of Social Services

DEPARTMENT OF SOCIAL SERVICES
OFFICE OF LICENSING & ACCREDITATION
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Plan of Correction

Date Issued June 24, 2025 Status In Process

Provider Name	Choices Recovery Services, Inc.
Provider Type	Accreditation
Accreditation #	1083386403
Provider Address	622 S Minnesota Ave, Sioux Falls, SD 57104, USA
Provider Contact	Heather Mousel
Board Notified	N/A

This is the Plan of Correction for Substance Use Disorder Treatment Services. The following administrative rules have been found to be out of compliance. A plan of correction is required to bring the provider into compliance. Continued non-compliance could lead to suspension or revocation of your accreditation.

POC Action #1

Administrative Rule:

67:61:05:01

Tuberculin screening requirements are as follows:

(1) Each new staff member, intern, and volunteer must receive both steps of the two-step tuberculin skin test or a tuberculosis blood assay test to establish a baseline, within fourteen days of employment. Any two documented tuberculin skin tests completed within a twelve month period before the date of employment may be considered a two-step test and one tuberculosis blood assay test completed within a twelve month period before employment may be considered an adequate baseline test. Skin testing or tuberculosis blood assay tests are not required if a new staff member, intern, or volunteer provides documentation of the last skin testing completed within the prior twelve months. Skin testing or tuberculosis blood assay tests are not required if documentation is provided of a previous positive reaction to either test;

(2) A new staff member, intern, or volunteer, who provides documentation of a positive reaction to the tuberculin skin test or tuberculosis blood assay test must have a medical evaluation and chest X-ray to determine the presence or absence of the active disease;

(3) Each staff member, intern, and volunteer, with a positive reaction to the tuberculin skin test or tuberculosis blood assay test, must be evaluated annually by a physician, physician assistant, nurse practitioner, clinical nurse specialist, or a nurse, and a record must be maintained of the presence or absence of symptoms of Myobacterium tuberculosis. If the

evaluation results in a suspicion of active tuberculosis, the physician, physician assistant, nurse practitioner, clinical nurse specialist, or a nurse, must refer the staff member, intern, or volunteer for further medical evaluation to confirm the presence or absence of tuberculosis; and

(4) Any employee confirmed or suspected to have infectious tuberculosis must be restricted from employment until a physician, physician assistant, nurse practitioner, or clinical nurse specialist, determines that the employee is no longer infectious.

Summary of Non-Compliance Finding:

Most of the employees at Choices Recovery Services received TB testing prior to employment. Those who completed TB testing for employment at Choices only received the first step of the two-step TB skin test. Choices Recovery Services must ensure all employees receive both steps of the two-step skin test or the TB blood assay test within two weeks of employment.

Corrective Action:

Employees will reports to Sanford Occupation Medicine on their first day of employment to complete 1st Step of TB test. Employees will report for their 2nd Step 7 days after their first day of employment. Ideally, 1 week apart on Mondays.

Supporting Evidence:

Supporting evidence will be in employees personal file of identifying employment start dates, testing dates, and results.

How Maintained:

Maintained in employee files and during orientation process check in's and meetings to ensure employee has completed TB test as directed or they will not be able to return to work until they present their test.

Position Responsible:	Expected Completion Date:	Date Completed:
Director	September 01, 2025	

POC Action #2

Administrative Rule:

67:61:05:08

An agency shall maintain personnel policies and records for all staff, including provisions for equal employment opportunities. An agency shall maintain a personnel file for each staff member, including any contracted staff, intern, or volunteer. The file must contain:

(1) The application filed for employment, or any resume, transcripts, diploma, and evidence of continuing education;
(2) The position description, signed by the staff member, with a statement of duties and responsibilities, and the minimum qualifications and competencies necessary to fulfill these duties;
(3) Evidence of having completed appropriate pre-hire screening, in the case of a staff member who provides direct services to vulnerable populations;

(4) The staff member's orientation documentation, in accordance with § 67:61:05:05;
(5) Copies of the staff member's current credentials, as related to job duties; and
(6) Any staff health clearances, including tuberculin test results, if required, and any clearances from a physician after an infectious or contagious disease requires the staff member's absence from the program.

Summary of Non-Compliance Finding:
All reviewed employee files were missing either an application for employment or a resume. Choices Recovery Services must ensure that each employee file contains either the application for employment or a resume.

Corrective Action:
Print all resumes of applicants and file those resumes in employee files upon hire or have employees complete a paper application for their personnel file.

Supporting Evidence:
Resume/application will be stored in employees personnel files.

How Maintained:
Check list created for new hire documents needed in files- ex: TB Test 1 & 2, resume/application, copy of identifying documents ect to ensure all items are placed in employee file and easily accessible.

Position Responsible:	Expected Completion Date:	Date Completed:
Director	October 01, 2025	

POC Action #3

Administrative Rule:
67:61:07:07
The program staff or direct care provider shall document, for each client, the progress and reasons for retaining the client at the present level of care and create an individualized plan of action to address the reasons for retaining the client at the present level of care. This document must be maintained in the client case record. It is appropriate to retain the client at the present level of care if:

(1) The client is making progress, but has not yet achieved the goals articulated in the individualized treatment plan. Continued treatment at the present level of care must be assessed, as necessary, to permit the client to continue working toward his or her treatment goals; or

(2) The client is not yet making progress, but has the capacity to resolve his or her problems. The client is actively working toward the goals articulated in the individualized treatment plan. Continued treatment at the present level of care must be assessed, as necessary, to permit the client to continue working toward his or her treatment goals; or

(3) A new problem or priority that is appropriately treated at the present level of care has been identified. The new

problem or priority requires services, the frequency and intensity of which can only be delivered safely by continuing to stay at the current level of care. The client's level of care must be the least intensive level at which the client's new problem or priority can be addressed effectively.

The individualized plan of action to address the reasons for retaining the individual at the present level of care must be documented every:

(a) Two calendar days for clinically-managed, residential detoxification;
(b) Fourteen calendar days for early intervention services; intensive outpatient services; day treatment services; and medically-monitored, intensive inpatient treatment; and
(c) Thirty calendar days for outpatient treatment programs and clinically-managed, low-intensity residential treatment.

Summary of Non-Compliance Finding:

Choices Recovery Services completes continued service reviews on every progress note. The progress of the client appears to be the progress of that client during the specific session.

Continued service reviews should be completed at least every 14 days for intensive outpatient treatment clients and at least every 30 days for outpatient treatment clients. Client progress and reasons for retaining the client at their current level of care should be assessed for the entire review period of 14 or 30 days, and the individualized plan of action should be what the client and provider are going to work on during the next 14 or 30 day review period.

It is recommended Choices Recovery Services completes continued service reviews on separate documents rather than on every progress note.

Corrective Action:

Create a separate Continued Stay Criteria note in EHR for counselors to complete bi-weekly for individuals in Level 2.1 and monthly for clients in Level 1.0.

Supporting Evidence:

Notes completed by counselors in clients files for continued stay criteria every 14 and 30 days.

How Maintained:

Review of clients files by supervisor when note is completed and staffing of clients weekly during staffing with reports on clients continued stay criteria note.

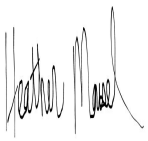
Position Responsible:	Expected Completion Date:	Date Completed:
Director	October 01, 2025	

SIGNATURES

Your signature below certifies you have read and understand the non-compliance findings and agree to make corrections to be compliant with the identified administrative rules.

Heather Mousel

Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

July 11, 2025

Date

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

Chris Kenyon

Printed Name of DSS Staff



7/14/2025, 3:32:27 PM

Signature of DSS Staff:

July 14, 2025

Date

COMPLETION DETAILS

COMPLETION DATE:

The Department of Social Services, Office of Licensing and Accreditation has reviewed the actions taken by the agency to resolve the above items and has accepted the above plan as completed.

Printed Name of DSS Staff

Signature of DSS Staff:

Date