South Dakota Department of Social Services

DEPARTMENT OF SOCIAL SERVICES
OFFICE OF LICENSING & ACCREDITATION
700 GOVERNORS DRIVE
PIERRE, SD 57501
Phone: 605.773.3165
Web: dss.sd.gov

Plan of Correction

Date Issued June 09, 2025 Status Closed

Provider Name	Spink County Coalition
Provider Type	Accreditation
Accreditation #	12495536
Provider Address	1005 W 1st St #2, Redfield, SD 57469
Provider Contact	Heidi Appel
Board Notified	Yes

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:

67:61:11:08

An agency shall conduct a quality assurance review of its prevention programming to monitor, protect, and enhance the quality and appropriateness of its programming and to identify qualitative problems and recommend plans for correcting each problem. The agency shall conduct:

(1) Annual satisfaction surveys of all individuals or stakeholders who requested and participated in prevention services;
(2) Participant evaluations, after each prevention presentation the agency provides; and
(3) Pre- and post-tests for all evidence-based curricula presented to individuals.

A summary of the quality assurance review must be made available to the board of directors or agency staff annually, and to the department and community members, upon request.

Summary of Non-Compliance Finding:

Spink County Coalition completes annual satisfaction surveys, participant evaluations, and pre- and post-tests, but does not complete a quality assurance review annually. Spink County Coalition must complete the quality assurance review annually to assess the effectiveness and appropriateness of their programming.

Corrective Action:

The Spink County Coalition acknowledges the accreditation review finding regarding the absence of a formal annual quality assurance review. While the Coalition has consistently conducted annual satisfaction surveys, participant evaluations, and pre- and post-tests to gauge program outcomes and participant experience, we recognize that these measures do not replace a comprehensive quality assurance review.

To address this, the Coalition will implement a formal annual quality assurance review process beginning in the current fiscal year. This review will include an assessment of program implementation, alignment with goals, fidelity to evidence-based practices, participant outcomes, and areas for improvement. The review will be documented in a formal report, shared with coalition leadership and relevant stakeholders, and used to guide program modifications and improvements.

In addition, the State of South Dakota Prevention is now requiring a provider annual report due each September. Upon completion of this annual report, we will share this with the Steering Committee for review and for future planning.

We appreciate the opportunity to strengthen our practices and remain committed to full compliance with accreditation standards.

Supporting Evidence:

To be submitted on September 1 when document is complete and submitted to South Dakota Prevention.

How Maintained:

To ensure this process is sustained annually:

- The review will be embedded into the Coalition's annual evaluation calendar and overseen by the Executive Director.
- The Executive Director will be responsible for collecting, organizing, and analyzing relevant data for the quality assurance review.
- Results will be shared with coalition steering committee members and stakeholders as part of our commitment to transparency and continuous improvement.

Position Responsible:	Expected Completion Date:	Date Completed:
Executive Director	September 01, 2025	November 14, 2025

POC Action #2

Administrative Rule:

67:61:05:05

The agency shall provide orientation for all staff within ten working days after employment. The agency shall provide orientation for all contracted staff providing direct clinical services, interns, and volunteers, within ten working days after the start of their service with the agency. The orientation must be documented and cover:

(1) Fire prevention and safety, including the location of all fire extinguishers in the facility, instruction in the operation and use of each type of fire extinguisher, and an explanation of the fire evacuation plan and agency's smoking policy;

(2) The confidentiality of all information about clients, including a review of the confidentiality of alcohol and drug abuse patient records, as set forth in 42 C.F.R. Part 2, in effect on January 18, 2017, and 45 C.F.R. Parts 160 and 164, in effect on September 26, 2016;

(3) The proper maintenance and handling of client case records;

(4) The agency's philosophical approach to treatment and the agency's goals;

(5) The procedures to follow in the event of a medical emergency or a natural disaster;

(6) The specific job descriptions and responsibilities of employees, contracted staff, interns, and volunteers, as applicable;

(7) The agency's policy and procedures manual, maintained in accordance with § 67:61:04:01; and

(8) The agency's procedures regarding the reporting of suspected child abuse or neglect, in accordance with SDCL 26-8A-3 and 26-8A-8.

Summary of Non-Compliance Finding:

Spink County Coalition has a link to an online child abuse and neglect reporting training, but they do not have a policy or procedure regarding the reporting of child abuse and neglect.

Corrective Action:

New Policy has been written and added to the August Steering Committee agenda for review.

Supporting Evidence:

SPINK COUNTY COALITION
Policy Title: Child Abuse and Neglect Reporting Policy
Effective Date: 07/01/25
Approved By: Executive Director / Board of Directors (to be approved at August Steering Committee Meeting)

1. Policy Statement

Spink County Coalition (“the Coalition”) is committed to the safety and protection of children. Consistent with South Dakota Codified Law (SDCL 26 8A) and Administrative Rule 67:61:05:05, this policy establishes clear procedures and responsibilities for the reporting of suspected child abuse or neglect.

2. Purpose

This policy ensures compliance with state law and accreditation requirements by:

- Establishing a reporting pathway for suspected child abuse or neglect
- Aligning with Redfield Public School’s internal reporting structure
- Supporting mandated reporting requirements under SD law
- Promoting accountability, transparency, and child safety

3. Scope

This policy applies to all Spink County Coalition employees, volunteers, contractors, interns, and board members (“covered personnel”) engaging with minors through Coalition programs or in school settings.

4. Authority and Reference

- **SDCL 26 8A 3**: Mandated Reporter Law

- **SDCL 26 8A 8**: Procedures for Reporting Abuse/Neglect
- **SDCL 26 8A 14**: Immunity from Liability
- **ARSD 67:61:05:05(8)**: Required Training on Child Abuse Reporting
- Redfield Public School Reporting Procedures

5. Definitions

- **Abuse/Neglect**: As defined in SDCL 26 8A 2, including physical, sexual, and emotional abuse, as well as neglect.
- **Mandated Reporter**: Per SDCL 26 8A 3, individuals required by law to report suspected abuse or neglect.
- **Redfield Public School Administration**: The designated authority within the school system responsible for receiving and following up on all abuse/neglect reports made by Spink County Coalition personnel.

6. Reporting Procedures

1. **All Spink County Coalition personnel must report any suspected abuse or neglect directly and immediately to Redfield Public School administration**—the designated authority for handling and initiating official reports to the Department of Social Services, law enforcement, or other appropriate entities as required by SD law.
2. The school administration is responsible for evaluating the report and completing the formal oral and written reports to the appropriate authorities per SDCL 26 8A 8.
3. Coalition staff must not delay or withhold concerns. If unsure, they are still obligated to immediately notify school administration for proper handling.

7. Internal Support and Documentation

- A written internal incident report must also be submitted to the Coalition's designated Child Safety Officer (CSO) for documentation purposes.
- The CSO will retain a confidential record of the notification for accountability but will not duplicate the external reporting process managed by school administration.
- All documentation is stored securely with access restricted to executive leadership and the CSO.

8. Training Requirements

In accordance with **ARSD 67:61:05:05(8)**, all Coalition personnel must receive training within ten working days of hire or engagement, covering:

- Recognizing signs of abuse and neglect
- Legal obligations of mandated reporters
- How and when to report to Redfield Public School administration
- Confidentiality and non-retaliation protections

Annual refresher training is mandatory, and attendance will be documented.

9. Confidentiality & Protections

- All abuse/neglect reports and related documentation are confidential in accordance with **SDCL 26 8A 13**.
- Reporters acting in good faith are protected from civil or criminal liability under **SDCL 26 8A 14**.

10. Monitoring & Review

The Executive Director and CSO will conduct an annual review of this policy, training compliance, and documentation practices. Updates will be made as needed to reflect any legal or procedural changes.

11. Non-Retaliation

The Coalition strictly prohibits retaliation against anyone who, in good faith, reports suspected abuse or participates in an investigation.

Approved by: _____

Name, Title

Date: _____

How Maintained:

Annual Policy Review by Steering Committee.

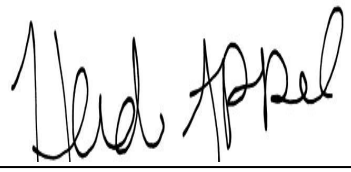
Position Responsible:	Expected Completion Date:	Date Completed:
Executive Director	August 18, 2025	November 14, 2025

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.

Heidi Appel

Printed Name of Provider/Agency Contact



Signature of Provider/Agency Contact

July 09, 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



7/9/2025, 2:49:28 PM

Signature of DSS Staff:

Date

COMPLETION DETAILS

COMPLETION DATE: November 14, 2025

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.

Chris Kenyon

Printed Name of DSS Staff



11/14/2025, 10:29:35 AM

Signature of DSS Staff:

November 14, 2025

Date