South Dakota Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	10733	A. BUILDING: _____ B. WING _____	C 08/26/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ANGELHAUS YANKTON	300 E 6TH ST YANKTON, SD 57078

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	Compliance Statement A complaint survey for compliance with the Administrative Rules of South Dakota, Article 44:70, Assisted Living Centers, requirements for assisted living centers, was conducted on 8/26/25. Areas surveyed included nursing services, resident neglect related to food complaints regarding food portions and snacks not being provided resulting in weight loss, and resident abuse related to harassment from another resident and staff. Angelhaus Yankton was found not in compliance with the following requirements: S352 and S405.	S 000		
S 352	44:70:04:13 Resident Admissions The facility shall evaluate and document each resident's care needs at the time of admission, thirty days after admission, and annually thereafter, to determine if the facility can meet the needs for each resident. This Administrative Rule of South Dakota is not met as evidenced by: Based on record review, interview, and policy review, the provider failed to ensure a 30-day evaluation of care needs was completed for one of two sampled residents (2). Findings include: 1. Review of resident 2's electronic medical record (EMR) revealed: *His admission date was 1/28/25. *His twelve-page Assisted Living Resident Evaluation of care needs indicated it was a "New Admission" assessment and was completed on 2/6/25. *There was no documentation that his 30-day	S 352	S 352 Angelhaus has corrected the missing 30-day evaluation for resident 2. LPN has audited resident files to ensure a 30-day evaluation has been completed for all residents. PoC Verification Steps: (1) LPN will set up a reminder upon admission for a 30-day evaluation. LPN will place a reminder on a physical calendar as a reminder.(2) Adminstrator will review resident files to ensure 30-day evaluations are being completed in a timely manner. Administrator will review all new resident files one month after admission. (3) QA Team shall review documentation for no less than nine months or until compliance has been achieved. Administrator will report results to QA Team for review.	10/3/25

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE: Administrator

(X6) DATE: 9-25-25

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S 352	Continued From page 1 evaluation of care needs was completed. 2. Interview on 8/26/25 at 1:52 p.m. with administrator A regarding resident 2's evaluation of care needs revealed: *The nurse was responsible for completing the evaluation of care needs for residents. *He stated a previous nurse, who was no longer working at the facility, had completed his admission evaluation of needs and should have completed the 30-day evaluation of care needs for resident 2. *He agreed that the 30-day evaluation of care needs for resident 2 had not been completed. Interview on 8/26/25 at 2:30 p.m. with licensed practical nurse (LPN) B revealed she: *Had worked at the facility since June 2025. *Was aware of the required evaluation of care needs that needed to be completed upon a resident's admission. *Was not aware that another evaluation of care needs was required thirty days after admission. *Confirmed that the 30-day evaluation of care needs for resident 2 had not been completed. 3. Review of the provider's Assisted Living Resident Evaluation in their EMR revealed: *The Assessment type had five options: -New Admission. -Re-Admission. -30 Day Evaluation. -Annual. -Significant Change in Condition. Review of the provider's 7/28/25 "[Provider's name] Policy and Procedure Manual" regarding Resident Health Records and Documentation revealed: *"Resident Care Records contain the following	S 352		

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S 352	Continued From page 2 information ..." -"Admission Assessment." -"Quarterly/Annual Assessments." -The required 30-day evaluation of care needs was not included. *Documentation Requirements "The following is a list of documents required for all residents ..." -"Resident Assessment". -"Resident Needs Assessment Form (prior)". -"Resident Needs Assessment Form (30 days)".	S 352	S 405 Angelhaus has updated the care plans for both resident 1 and 2. Task was completed by LPN. LPN has been educated by LPN of other Angelhaus facility on the process of updating care plans and the frequency of updating needed to maintain complaince.	
S 405	44:70:05:02 Resident Care Plans, Service Plans, And Progr The facility shall provide safe and effective care from the day of admission through the development and implementation of a written care plan or service plan for each resident. The care plan or service plan must address personal care, and the medical, physical, mental, and emotional needs of the resident. This Administrative Rule of South Dakota is not met as evidenced by: Based on interview, record review, observation, and policy review, the provider failed to ensure the written service plan addressed the current care needs for two of two sampled residents (1 and 2). Findings include: 1. Interview on 8/26/25 at 1:33 p.m. with resident 1 revealed she: *Had lived at the facility for four years. *Was blind and had asked staff to serve her meals on non-breakable dishes as her meals had been served on ceramic or stoneware plates that were breakable. *Had a personality disorder, and her other	S 405	PoC Verification Steps: (1) LPN will update care plans within 24 hours of care changes being received from physician or other care provider. (2) Administrator will review care plans for all random residents monthly for nine months. This will be accomplished by Administrator reviewing 10 residents care plans per week.(3) QA Team shall review documentation for no less than nine months or until compliance has been met. Administrator will report results of care plan audits to QA Team.	10/3/25

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personality had used broken glass pieces to cut herself.
*Stated "About a month ago it got fixed" and they were now serving her meals on Styrofoam plates which she preferred.

2. Review of resident 1's electronic medical record (EMR) revealed:
*Her admission date was 1/14/21.
*Her diagnoses included borderline personality disorder and legal blindness.
*Her service plan included:
-A focus on "Has a behavior problem r/t [related to] Psychiatric Illness, borderline personality disorder" initiated 1/14/21, with a goal "Will have no evidence of behavior problems ([resident name] states her split personality is named "[first name]") initiated 1/14/21.
-A focus on "BEHAVIORS Hallucinations - auditory" initiated 6/5/21, with an intervention "History of harming self. [Resident name] has broke a cup and used the glass to cut her arm ..." initiated 2/10/23.
-A focus on "EATING/MEALS" initiated 1/23/23, with an intervention "Per [resident's name] requested [request] no knifes [knives] in her silverware at meals. Kitchen will cut up her food for her, per her request" initiated 1/23/23.
-There was no intervention related to her request to be served her meals on non-breakable/Styrofoam plates.
*A 7/17/25 Behavior Note revealed:
-" ...resident continued to make threats regarding breaking glass and cutting herself ... This LPN [licensed practical nurse] does voice concerns that harming herself or others is taken very seriously. Resident is physically able to perform these acts, which is a major concern ..."

3. Observation on 8/26/25 at 11:39 a.m. of

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S 405	Continued From page 4 resident 2 in his room revealed his lunch had been served to him in his room and included two tuna salad sandwiches, two individual cucumber salads, and two bags of chips. Interview with resident 2 at this date and time revealed he: *Had been living at the facility since 1/28/25. *Stated when he first admitted he was not getting enough food and had tried to discuss his concern with the staff, but was told they could not provide him with more food and to talk to his physician. *He had lost 30 pounds during his first few months at the provider. *In May 2025 he started getting double portions. *Had been gaining weight the past two months and was currently at his admission weight of 150 pounds. *Had a goal that he wanted to reach his target weight of 175 pounds. 4. Review of resident 2's EMR revealed: *His admission date was 1/28/25. *His diagnoses included anxiety disorder and diabetes mellitus due to underlying condition with unspecified complications. *His weight summary included: -On 1/29/25, he weighed 150 pounds. -On 2/1/25, he gained ten pounds and weighed 160 pounds. -On 3/3/25, he lost eleven pounds and weighed 149 pounds. -On 4/1/25, he lost 9.4 pounds and weighed 139.6 pounds. -On 5/6/25, he gained 1.4 pounds and weighed 141 pounds. -On 6/6/25, he lost 6.4 pounds and weighed 134.6 pounds. -On 7/2/25, he gained 9.6 pounds and weighed 144.2 pounds.	S 405		

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S 405	Continued From page 5 -On 8/1/25, he gained 5.8 pounds and weighed 150 pounds. *From his 2/1/25 weight of 160 pounds (his highest weight) to his 6/6/25 weight of 134.6 (his lowest weight), resident 2 had lost 25.4 pounds. *His physician orders related to his diet and weight loss included: -On his 1/28/25 admission a "Diabetic Diet" was ordered. -On 2/19/25, "If he refuses breakfast, please offer a protein, carbohydrate, and [a] fruit of his choice." -On 4/28/25, "weekly weight r/t [related to] weight loss after admission ..." -On 5/7/25, "Diabetic Diet ... for weight loss double portions each meal ..." *His progress notes revealed: -On 1/29/25, " Staff report that pt. [patient] is refusing to come out of his room to eat. Staff offered him a room tray and he is also refusing that. This nurse explained to him for his safety R/T [related to] his diabetes, he needs to consume meals. He stated that he has plenty of snacks and will eat if he is hungry. Reminded him again that we are here to assist him with his health and nutritional needs ..." -On 2/2/25, consultant dietitian C documented her Initial Dietitian Assessment: "[Resident name] recently admitted to facility ... Wt [weight]: 160# [pounds] ...Diet: Diabetic, reg [regular] textures/fluids ... [Resident name] has snacks in his room per EMR [electronic medical record] review. Continue to encourage routine meals to help prevent over use of snacks to aid blood sugar management. Diabetic diet is appropriate. Will continue to monitor for further nutrition needs and intervene as indicated." -On 2/4/25, "Staff report that [resident name] does not prefer to eat breakfast and continue to offer room trays. He tells this nurse that he does	S 405		

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not like to get up in the mornings. Did let him know that this is fine and we will continue to offer room trays as he likes to sleep in ..."
-On 2/6/25, "[Resident name] continues to adjust to living at [provider's name]. He is agreeable to ... eating meals. However, he states that his anxiety 'gets the best of me at times' and reassured him that we can bring him a room tray if he is having anxiety while he is adjusting. [Resident name] has been eating approximately 50-75% of his noon and evening meals. He reports that his sister-in-law brought him some snacks this past weekend and was happy with that ..."
-On 4/28/25, "Please obtain a weekly weight on [resident name] starting date ... weekly weight 134.6 [pounds] ... Call to provider to inquire about dietary consultation as weekly weights ordered, r/t [related to] weight loss ..."
-On 5/2/25 consultant dietitian C documented a Nutrition follow up "[Resident name] ... has been losing wt [weight] since admission and per EMR, has been refusing meals ... Wt [weight]: 139.6# [pounds] ... Wt [weight] is -9.4# [less 9.4 pounds] x1m [times one month], -10.4# [less 10.4 pounds] x6m [times six months]. Significant wt loss x1m [times one month] review ... Estimated Needs to promote wt gain: 2200-2500 calories/d [calories per day], 72-86g [grams] protein/d [protein per day], 2200-2500ml [milliliter] fluid/d [fluid per day] ... Due to refusal to eat and having wt [weight] loss, suggest liberalizing diet and request order for Boost/Ensure TID [three times a day] for protein/calorie supplementation. May also consider use of an appetite stimulant to help prevent nutrition-related concerns."
-On 5/4/25 "Did best to convince pt to eat breakfast, still refused."
-On 5/5/25 " ...Resident is also noted to have steady weight loss over the past month. He

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S 405	Continued From page 7 refuses to come out of his room for meals ..." -On 5/8/25 "Meeting with med aides regarding residents [resident's name] non-compliance with eating, or cooperation with taking in meals. Double portions are being brought to residents room. Visited ... on 5/7/2025 to discuss residents weight loss over 3 month period. PA [physician's assistant] ... is aware of weight loss. Kitchen manager aware. Phoned for dietary consult. Weekly weights and meal consumption documentation on task ..." -Resident 2 had an appointment to meet with the dietician at the local hospital on 5/14/25 at 2:00 p.m. *His scanned documents revealed a 5/14/25 Nutrition Note by the local hospital's registered dietitian with the following recommendations and suggestions: -"190-200g [gram] carb [carbohydrate] spread throughout the day, more if he's more active." -"have at least 15g carb prior to any 30min [minute] structured exercise (when he told me he exercised)." -"3 meals and at least 1 snack daily (ideally 2 snacks) spread throughout the day." -"carb + protein at all meals and snacks." -"consume 15g quick carb to correct BG [blood glucose]: good things to use for this are 4oz [ounces] juice, 1/2 banana, glucose tabs. -"read nutrition facts labels." -"Eat a carb source q4-6h [every four to six hours] during wake hours." *Suggestions for a "meal plan to introduce change" included: -"Breakfast: anytime between 3-8am (pt [patient] wakes @ [at] 3am) - identify when a time would work best for him to eat anything with 15g+ [15 grams or more of] carbohydrate and a protein." -"Lunch: 11:30a [11:30 a.m.]: facility meal, 60g." -"Supper: 4:30-5p [4:30 to 5:00 p.m.]: facility	S 405		

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S 405	Continued From page 8 meal, 60g." -"Evening snack: highly encouraged, anytime between 7pm-bedtime - I told him this may help with overnight low BGs [blood glucose levels] ..." *His service plan included: -A focus on "Has diabetes mellitus Diabetes Type 2" initiated 1/28/25, with a goal "Will have no complications related to diabetes." -Interventions included: --"Administer medication as ordered by MD. Observe for side effects and effectiveness and report observed side effects/effectiveness to nurse." --"Blood sugar checks as ordered by MD." --"Encourage to manage good general health practices: weight management, compliance with dietary restrictions, compliance with treatment regimen, adequate sleep and exercise, good hygiene and oral care." --These interventions had been initiated upon his admission on 1/28/25. -A focus on "EATING/MEALS" initiated 1/28/25, with two goals: --"Will maintain appropriate weight and nutritional status." --"Will participate in meals." -Interventions included: --"Is independent with meals and eating and drinking" initiated 1/28/25. --"Encourage food consumption" initiated 1/28/25. --"Weight monthly or as per orders ..." initiated 1/28/25. --"Eats in the Dining Room. If refuses meals in dining room, please offer him a room tray. Encourage him to come to dining room to pick up room tray for social interaction" revised on 2/4/25. --"Does not like to get up for breakfast and often times will refuse. Offer room tray." initiated 2/4/25.	S 405		

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S 405	Continued From page 9 --"If he refuses breakfast, please offer a protein, carbohydrate, and fruit of his choice." initiated 2/19/25. *The service plan for his "EATING/MEALS" indicated it had not been revised since 2/19/25. *There were no interventions related to: -The 1/28/25 physician order upon his admission for his diabetic diet. -The 4/28/25 physician order for weekly weights related to his weight loss. -The 5/2/25 Nutrition follow-up's request for "liberalizing his diet", a "Boost/Ensure" supplement three times a day, and the appetite stimulant to help prevent nutrition-related concerns. -The 5/7/25 physician order for double portions at each meal to address the resident's weight loss. -The hospital registered dietitian's 5/14/25 recommendations and suggestions for: --A carbohydrate and protein source to be included with his snacks. --A breakfast meal between 3:00 a.m. and 8:00 a.m., identifying a time that would work best for him to eat 15 grams or more of a carbohydrate and a protein. --A highly encouraged evening snack between 7:00 p.m. and bedtime. 5. Observation and interview on 8/26/25 at 11:30 a.m. with cook D revealed she: *Was serving residents the noon meal on a plate that had a tuna salad sandwich, grapes, cucumber salad, and a bag of chips. *Stated resident 2 had been provided a room tray that included two of every food item. 6. Interview on the afternoon of 8/26/25 with administrator A revealed: *At 12:23 p.m. he stated he was not aware of resident 2's physician ordered weekly weights but	S 405		

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S 405	Continued From page 10 would check with LPN B. *At 1:25 p.m. he stated the provider's dietary manager was out of the facility on leave. Phone interview on 8/26/25 at 2:12 p.m. with consultant dietitian C revealed: *She consulted with the provider and the dietary manager regarding nutritional services. -She provided nutritional assessments for the residents upon admission and quarterly. *Regarding resident 2, she: -Had provided an initial nutritional assessment on 2/2/25 following his 1/28/25 admission. -Had been concerned with resident 2's weight loss and had documented a follow-up nutritional assessment on 5/2/25 to address that weight loss. *Was not aware of his physician-ordered weekly weights and stated to ask the nursing staff regarding these weekly weights. *Was aware that he had been gaining weight for the past two months and she was in the process of completing a quarterly review for him. Interview on 8/26/25 at 2:30 p.m. with LPN B revealed she had worked at the facility since June 2025. Continued interview with LPN B with administrator A joining the interview at 2:36 p.m. revealed: *They were both aware of resident 2's concerns with not getting enough food. -Administrator A stated: --They had been working with the resident as he had initially been discarding the meals he had received. --He was aware of the resident's initial weight loss and felt it had been addressed as he had regained that weight back in the last two months. *The both agreed that both resident 1 and	S 405		

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S 405	Continued From page 11 resident 2's service plans had not been updated to reflect the resident's current care needs. 7. Review of the provider's 7/28/25 "[Provider's name] Policy and Procedure Manual" regarding Resident Health Records and Documentation revealed: *Care Plans: -"A resident-centered Care Plan is created and maintained for every resident." -"The purpose of the Care Plan is to provide a centralized coordination of the services that will be provided to each resident, based on his or her individual needs, abilities, and preferences." -"The Care Plan is developed with assistance and review from:" --"The resident." --"Family/significant other or responsible party." --"Previous caregivers." --"Physician." --"The Administrator." --"A registered or licensed nurse, if the resident is receiving nursing services, medication assistance, or is unable to direct self-care." --"The team may also include other facility personnel, and other persons as requested." -"The Care Plan should address, but is not limited to, the following:" --"Diet/Nutrition." --"Unique Needs." --"Additional Caregiver Concerns." -"An updated copy of the Care Plan is available to all staff for review on [the provider's EMR]." -"All direct care staff are encouraged to give input on Care Plan changes." *Diagnostic, Therapeutic, and Nonphysician Orders: -"In the event a Nurse receives a Physician order by fax, phone, mail, or post-appointment delivery; the Nurse shall follow said order by modifying	S 405		

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S 405	Continued From page 12 Care Plans, ..." -Procedure: "Nurse receives [physician] Order" and "carries out order by documenting in the appropriate places" including: --Care Plan. --Daily care sheets. --Nurse communicates Order to staff. --Nurse follows up to ensure Order is being carried out by staff.	S 405		