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
	10659	A. BUILDING: _____ B. WING _____	09/18/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AVERA ST BENEDICT ASSISTED LIVING	502 W FIR ST PARKSTON, SD 57366

(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 licensure survey for compliance with the Administrative Rules of South Dakota, Article 44:70, Assisted Living Centers, requirements for assisted living centers, was conducted from 9/16/25 to 9/18/25. Avera St Benedict Assisted Living was found not in compliance with the following requirements: S075 and S670.	S 000		
S 075	44:70:02:01 Sanitation The facility shall be designed, constructed, maintained, and operated to minimize the sources and transmission of infectious diseases to residents, personnel, visitors, and the community at large. This requirement shall be accomplished by providing the physical resources, personnel, and technical expertise necessary to ensure good public health practices for institutional sanitation. This Administrative Rule of South Dakota is not met as evidenced by: Based on observation, interview, and record review, the provider failed to ensure one of one ice dispenser was maintained in a clean and sanitary manner. Findings include: 1. Observation and interview on 9/18/25 at 8:41 a.m. of the ice dispenser in the kitchenette with unlicensed medication aide (UMA) D revealed there was a slimy, black and orange unknown substance growing on the inside of the ice dispenser chute. The spout was dripping water, and the area was moist. UMA D said the evening or night staff were to	S 075	1) The ice machine chute was cleaned by maintenance on 9/18/2025. Maintenance will complete 6 month maintenance and sanitation by 10/15/2025. 2) A policy and procedure for cleaning the ice machine per manufacturer's recommendations was adopted. The ice machine chute will be checked monthly by the staff completing dietary equipment cleaning, if noted to be soiled a maintenance work order will be submitted. *see addendum 3) Administrator will audit the ice machine monthly for 3 months to ensure that it is being checked and cleaned per facility policy. Data collected will be reported at QAPI by the Administrator monthly. Further studies will be determined by the QAPI Committee. Addendum: Education regarding the ice machine policy was given to the maintenance staff who will be conducting the cleaning of the ice machine by the infection control RN. Education was completed on 10/14/25. KJL 10/16/25 Addendum #2: Education regarding checking the chute monthly and placing a work order was completed by the Administrator to all AL staff handling food on 10/16/2025. This will be completed by 10/20/25 to capture all staff. 10/16/25 KJL	10/15/25 *10/16/2025 KJL

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE: LTC Administrator | (X6) DATE: 10/10/2025

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S 075	Continued From page 1	S 075		

clean the ice dispenser basin every night, but she did not know if the inside of the ice dispenser chute was cleaned. She thought that the maintenance department cleaned the ice machine and addressed the maintenance of the ice machine once or twice per year.

Interview on 9/18/25 at 10:36 a.m. with administrator A revealed that the maintenance department cleaned the ice machines annually. She was not aware of the buildup in the ice dispenser chute. One of the maintenance employees had cleaned the dispenser chute that day to remove the buildup. She stated they were developing a new process to determine who would be responsible for cleaning the ice dispenser chute and how often.

2. Review of the provider's "ASB Facility Ice Machines" tracker revealed that the ice machine in the assisted living, Scotsman Model number MDT5N25A-1J, was last cleaned on 4/25/25.

Review of the provider's September 2025 "Avera St. Benedict Assisted Living Center Cleaning List" revealed a line item for the ice machine to have been cleaned daily. It did not include a description of what was to have been cleaned on or in the ice machine. The ice machine was marked each day as having been cleaned.

Review of the manufacturer's instructions for the "Scotsman MDT5N25 & MDT5N40" revealed that the ice chute was removable, and the area should be washed and sanitized. The manual did not include frequency on cleaning the chute. The manual included suggested overall cleaning and maintenance on a scheduled basis: "Maintenance and Cleaning should be scheduled at a minimum of twice per year. Sanitizing of the ice storage bin

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S 075	Continued From page 2 should be scheduled for a minimum of 4 times a year."	S 075		
S 670	44:70:07:07 Medication Administration A registered nurse shall provide medication administration training pursuant to § 20:48:04.01 to any unlicensed assistive personnel employed by the facility who will be administering medications. Unlicensed assistive personnel shall receive initial and ongoing resident specific training for medication administration and annual training in all aspects of medication administration occurring at the facility. This Administrative Rule of South Dakota is not met as evidenced by: Based on employee record review and interview, the provider failed to ensure annual medication administration training was provided and documented for one of two unlicensed medication aides (UMA) (E) reviewed. Findings include: 1. Review of UMA E's training record revealed there was no documented annual medication administration training completed by UMA E during 2024. 2. Interview with administrator A on 9/17/25 at 5:10 p.m. revealed she was unable to locate UMA E's medication administration training from 2024. One of the provider's pharmacists completed in-person training for the UMAs in 2024, but there was no record that UMA E had attended that training.	S 670	1) UMA E was assigned and will have completed medication administration training and competency by 10/15/2025. Avera Education and Staffing provided Medication Administration Traininga and competencies for all medication aides on 10/1/2025. 2) Any medication aides ol leave or new medication aides wil be assigned medication administration training and complete competencies annually. An assisted living training bundle was completed by the education team and will be added yearly by the Education Coordinator. 3) An audit will be conducted monthly by the Director of Nursing for three months to ensure that any new medication aides or staff on leave have completed their annual training and competencies for medication administration. Data collected will be reported monthly by the Director of Nursing to the QAPI committee for 3 months. Recommendations for further studies will be made by the QAPI committee.	10/15/25

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S 670	Continued From page 3 The online annual medication administration training for 2025 was supposed to have been assigned and completed in May of 2025, but the provider's records indicated that UMA E had not completed that training yet. Administrator A expected all unlicensed medication aides to complete the required annual medication administration training.	S 670		