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
	67392	A. BUILDING: _____ B. WING _____	C 10/15/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GOOD SAMARITAN SOCIETY PRAIRIE CREEK MEMO	4309 W CREEKSIDE CIRCLE SIOUX FALLS, SD 57106

(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 from 10/13/26 through 10/15/26. Areas surveyed included nursing services, administration/personnel, and potential for resident neglect. Good Samaritan Society Prairie Creek Memory Care was found not in compliance with the following requirement: S296.	S 000		
S 296	44:70:04:04(1-11) Personnel Training These programs must be completed within thirty days of hire for all healthcare personnel and must include the following subjects: (1) Fire prevention and response; (2) Emergency procedures and preparedness, including responding to resident emergencies and information regarding advanced directives; (3) Infection control and prevention; (4) Accident prevention and safety procedures; (5) Resident rights; (6) Confidentiality of resident information; (7) Incidents and diseases subject to mandatory reporting and the facility's reporting mechanisms; (8) Nutritional risks and hydration needs of residents; (9) Abuse and neglect; (10) Problem solving and communication techniques related to individuals with cognitive impairment or challenging behaviors if admitted and retained in the facility; and (11) Any additional healthcare personnel education necessary based on the individualized resident care needs provided by the healthcare personnel to the residents who are accepted and retained in the facility.	S 296	S296: Administrator or designee will collect and audit all personnel files, including employees B & C, for ongoing education and will provide training and education on the following subjects listed under Personnel Training requirements. IDT reviewed the policy relating to Personnel Training on 10/26/26. No revisions were made. On 11/2/2026, employee C will be assigned online education on oxygen and hospice. All education will be completed by 11/21/26. Starting 11/2/2026, Administrator or desingee will create a checklist to audit new employee files for personnel training completion monthly for 4 months. Administrator or designee will present the audit findings to the QAPI committee at their next meeting for reivew and will determine on-going interventions and monitoring. Compliance will be achieved by 11/29/2026.	11/29/26

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Cynthia Luna | TITLE: Administrator | (X6) DATE: 10/29/2026

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S 296	Continued From page 1 Any personnel whom the facility determines will have no contact with residents are exempt from the training required by subdivision (8). This Administrative Rule of South Dakota is not met as evidenced by: Based on personnel file review, interview, and policy review, the provider failed to ensure that two of six sampled employees (B and C) completed the required training topics within thirty days of their hire date. Findings include: 1. Review of employee B's personnel file revealed she was hired as a certified medication aide (CMA) on 6/24/25. She had completed oxygen training on 1/14/26 which was six months after being hired. 2. Review of employee C's personnel file revealed he was hired as a CMA on 2/2/26. There was no documentation that he had completed his training on hospice or oxygen within thirty days of his hire date. 3. Interview on 10/15/26 at 10:45 a.m. with administrator A revealed employees B and C did not complete the above education within thirty days of their hire date and should have. Administrator A acknowledged the human resource department was responsible for ensuring each employee had completed the required training topics.	S 296		

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S 296	Continued From page 2 4. Review of the provider's 5/5/26 Personnel Training policy revealed "Staff members will be oriented to the facility and care of the residents and will be required to attend annual education as mandated by the State Department of Health. Initial education covering the subjects listed below must be completed within 30 days of hire and annually." "Any additional education necessary based on the individualized resident care needs provided by the healthcare employees to the residents who are accepted and retrained in the facility e.g. (example) oxygen, hospice."	S 296		