

South Dakota Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 62419	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 07/24/2025
NAME OF PROVIDER OR SUPPLIER CLARKSON ASSISTED LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 1015 MT VIEW RD RAPID CITY, SD 57702		
(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 7/22/25 through 7/24/25. Clarkson Assisted Living was found not in compliance with the following requirements: S296 and S352.	S 000	Clarkson Health Care operates in compliance with all relevant regulations and professional standards in a manner that ensures safe and appropriate care with an emphasis on residents' rights for all residents we serve.	
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. Any personnel whom the facility determines will have no contact with residents are exempt from	S 296	In reference to S296 – This was an isolated situation –Advance Directive Training was implemented immediately for all employees. An all-staff meeting will be held 08/21/2025 to review re-certification. Education will be provided as deems necessary.	08/21/2025

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

TITLE

(X6) DATE

Andrea Knoll, LNAHA

Executive Director

08/21/2025

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S 296	<p>Continued From page 1</p> <p>the training required by subdivision (8).</p> <p>This Administrative Rule of South Dakota is not met as evidenced by: Based on employee personnel records, training transcript review, and interview, the provider failed to ensure training was completed on all the required topics for advance directives for five of five sampled employees (F, G, J, M, and N) within 30 days of hire, and annually. Findings include:</p> <p>1. Review of employee personnel records revealed: *Employee F was hired on 12/2/24. *Employee G was hired on 9/17/24. *Employee J was hired on 7/9/24. *Employee M was hired on 6/16/25. *Employee N was hired on 12/9/24.</p> <p>2. Review of employee training records and online training transcripts revealed, there was no documentation that employees F, G, J, M and N had received training on advanced directives.</p> <p>3. Interview on 7/24/25 at 9:00 a.m. with human resources D revealed: *The provider used an online training program for employee-required training. *Human resources D verified employees F, G, J, M, and N had not received training on advanced directives within 30 days of their hire or annually. *She was responsible for assigning the employee training topics. *She had not assigned advanced directives as a</p>	S 296		

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S 296	Continued From page 2 training topic to any staff member. *She was not aware advanced directives was a required training topic. 4. Interview on 7/24/25 at 12:45 p.m. with director of nursing (DON) B and administrator A revealed: *The provider used an online training program for employee-required training. *DON B confirmed employees F, G, J, M, and N had not completed training on advanced directives. *DON B verified advanced directives had not been assigned to any staff member to complete upon hire or annually. *Administrator A and DON B were not aware that advanced directives was a required training.	S 296		
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 (1). Findings include: 1. Review of resident 1's care record revealed: *Her admission date was 6/4/25. *Her admission evaluation of care needs was completed on 6/3/25, prior to her admission. *There was no documentation that her 30-day	S 352	In reference to S352 - 30 Day Admissions. The Administrator, Social Services or designee will conduct audits on all Assisted Living residents monthly for 3 months to ensure a 30 day evaluation of care needs is completed timely. An all-staff meeting will be held 08/21/2025 to review re-certification. Education will be provided as deems necessary.	08/21/2025

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S 352	<p>Continued From page 3</p> <p>evaluation of care needs was completed.</p> <p>Interview with director of nursing B on 7/24/25 at 7:41 a.m. regarding resident 1's evaluation of care needs revealed:</p> <p>*She was responsible to complete the evaluation of care needs for residents.</p> <p>*She stated the 30-day evaluation of care needs for resident 1 was due to be completed on 7/4/25.</p> <p>*She verified the 30-day evaluation of care needs for resident 1 had not been completed.</p> <p>Review of the provider's 11/2/09 Resident Handbook revealed "Resident evaluations determine the level of services needed and are completed at the time of admission, 30 days after admission and at least annually or when change occurs in the resident's condition."</p>	S 352		