

South Dakota Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 49877	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 09/02/2026
NAME OF PROVIDER OR SUPPLIER PRAIRIE VILLA		STREET ADDRESS, CITY, STATE, ZIP CODE 1309 BRADDOCK ST ARMOUR, SD 57313		
(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 9/1/26 through 9/2/26. Prairie Villa was found not in compliance with the following requirements: S296, S352, and S791.	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. Any personnel whom the facility determines will have no contact with residents are exempt from	S 296	Unable to fix non compliance for CMAs B, C, D, E. RN to reviewed policy and procedure: Personnel Training. Course: Supporting Individuals with Dementia will be assigned to all staff. Full time staff to complete the course by 9/28/26, PRN staff to complete the course by 12/1/26 or prior to next scheduled shift. This will be reviewed monthly for three months, then annually. Information will be reported at QA meetings biannually.	9/28/26

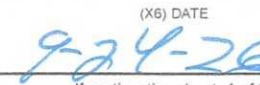
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE



TITLE



(X6) DATE



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S 296	Continued From page 1 the training required by subdivision (8). This Administrative Rule of South Dakota is not met as evidenced by: Based on record review, interview, and policy review, the provider failed to provide annual training regarding residents with cognitive impairment to four of four certified medication aides (CMAs) (B, C, D, and E) since September 2024. Findings include: 1. Review of CMAs B, C, D, and E's employee training records revealed CMAs B, C, and D, had not received training for cognitively impaired residents since September 2024. CMA E did not receive training for cognitively impaired residents upon hire on 5/12/26 and had no record of cognitively impaired resident training up to 9/1/26. 2. Interview on 9/1/26 at 2:00 p.m. with registered nurse (RN) A revealed the facility used Sanford Learn/Success Center to complete initial and annual staff training. The training module Dementia, Depression, Delirium was used to cover cognitively impaired residents. Sanford Learn/Success Center discontinued the Dementia, Depression, Delirium training module after 2024, and did not notify the provider that the module was discontinued. RN A was not aware the module was discontinued. She agreed they did not provide training regarding cognitively impaired residents to all staff in 2025 and 2026.	S 296		

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S 296	Continued From page 2 3. Review of the provider's undated personnel training policy revealed "Purpose: To provide all staff with on-going education opportunities to keep the staff competent in all areas. Procedure: 1. All new employees will receive orientation and training in the following areas: J. Care of residents with unique needs, i. Cognitively impaired, ii. Special diets, iii. Oxygen administration, iv. Med [medication] administration, v. Self-preservation. 5. Upon hire and annually employees will have in-services on the following, d. Cognitively impaired."	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 evaluate and document the care needs of one of four sampled residents (4) on admission and thirty days after his admission to assisted living level of care. Findings include: 1. Review of resident 4's care record revealed he admitted to the facility as an independent resident on 11/19/16. He discharged from the independent living level of care on 2/10/26 and admitted to the assisted living level of care on 2/11/26. His diagnoses included chronic kidney disease, atrial	S 352	Unable to fix noncompliance for Resident 4. RN reviewed policy and procedure: Requirements for Admission and Physician Services. When changing levels of care new assessments will be done on admit, 30 days, and biannually. RN will review this quarterly and report at the QA meetings biannually.	9/28/26

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S 352	Continued From page 3 fibrillation (common type of irregular and often rapid heart rhythm), and impaired mobility. There was no documentation that an evaluation of care needs was completed on admission to the assisted living level of care and thirty days following his admission. 2. Interview on 9/1/26 at 4:00 p.m. with registered nurse (RN) A revealed she had done an evaluation of needs on resident 4 in November of 2025 as an independent resident. When resident 4 admitted to assisted living level of care on 2/11/26, she did not identify any significant change in the resident's condition, so she did not complete an admission evaluation of care needs or the thirty-day evaluation of care needs. His next evaluation of needs would have been conducted in May of 2026 if he had stayed in the facility. He was discharged to a nursing facility on 4/28/26. 3. Review of the provider's undated requirements for admission and physician services policy revealed, "Purpose: To establish standard requirements for admission and physician services. The facility will evaluate each resident's care needs at the time of admission, 30 days after admission and bi-annually thereafter. An admission information form will be completed upon admission. This form will include general resident information, emergency information, billing data, discharge information and durable power directives."	S 352		
S 791	44:70:09:03 Facility To Provide Information A signed and dated admission agreement between the resident or the resident's legal representative and the facility must include	S 791	Unable to fix non compliance for Resident 4. RN reviewed policy and procedure: Applying for Residency. New agreements will be signed by	9/28/26

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S 791	Continued From page 4 information described in subdivisions (1) through (8), inclusive. The resident or resident's legal representative and the facility shall complete the admission agreement before or at the time of admission and before the resident has made a commitment for payment for proposed or actual care. The agreement must be printed in a manner to ensure ease of reading by the resident prior to signing. Any change in the admission agreement must be signed and dated by the resident or the resident's legal representative as an addendum to the original agreement. 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 that the admission (lease) agreement was completed for one of four sampled residents (4) upon his admission to assisted living level of care. Findings include: 1. Review of resident 4's care record revealed he admitted to the facility as an independent resident on 11/19/16. He was discharged from the independent living level of care on 2/10/26 and admitted to the assisted living level of care on 2/11/26. There was no admission agreement for admission to the assisted living level of care. 2. Interview on 9/1/26 at 4:00 p.m. with registered nurse (RN) A revealed they did not complete a new admission agreement when resident 4 admitted to the assisted living level of care. RN A had sat down with resident 4 and his two powers of attorney and discussed the change in rates and services but did not complete a new admission agreement since there was an	S 791	resident or legal representative when changing level of care. RN to review quarterly and report to QA biannually.	

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S 791	Continued From page 5 agreement for admission to independent level of care in 2016. 3. Review of the provider's undated applying for residency policy revealed, "Purpose: The establish residency at this facility. Procedure: A person will be identified as desiring residency. An application will be completed and a deposit made and filed with the administrator. If no dwelling unit is immediately available, the prospective person will be placed on a waiting list. An appointment will be set up to meet with the resident to assess eligibility by completion of the admission evaluation. When a prospective resident has been determined to meet eligibility requirements, a dwelling unit will be confirmed. The prospective person will be shown the open dwelling units. They will be able to choose which open unit they would like. The prospective resident will be given a copy of the resident agreement, rate, fees, furniture, belongings and services agreed to will be discussed with the resident and/or responsible person. Deposits and monthly fees will be collected. An admission date will be established."	S 791		