

# **SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS**

## **MINUTES**

February 21, 2013

The South Carolina Commission on Disabilities and Special Needs met on Thursday, February 21, 2013, at 10:00 A.M. at the Department of Disabilities and Special Needs Central Office, 3440 Harden Street Extension, Columbia, South Carolina.

The following were in attendance:

### **COMMISSION**

#### **Present:**

Fred Lynn, Chairman  
Deborah McPherson, Vice Chairman  
Christine Sharp, Secretary – via Video Conference  
Katherine Davis – via Teleconference  
Katherine Finley  
Eva Ravenel  
Harvey Shiver

#### **DDSN Administrative Staff**

Dr. Buscemi, State Director; Dr. Kathi Lacy, Associate State Director, Policy; Mr. David Goodell, Associate State Director, Operations; Mr. Tom Waring, Associate State Director, Administration; Mrs. Tana Vanderbilt, General Counsel (For other Administrative Staff see Attachment 1 – Sign In Sheet).

#### **Guests**

(See Attachment 1 Sign-In Sheet)

#### **Coastal Regional Center (via videoconference)**

(See Attachment 2 Coastal Regional Center Sign-In Sheet)

#### **Pee Dee Regional Center (via videoconference)**

(See Attachment 3 Pee Dee Regional Center Sign-In Sheet)

#### **Whitten Regional Center (via videoconference)**

(See Attachment 4 Whitten Center Regional Center Sign-In Sheet)

#### **York County DSN Board (via videoconference)**

(See Attachment 5 York County Sign-In Sheet)

News Release of Meeting

Chairman Fred Lynn called the meeting to order and Commissioner Christine Sharp read a statement of announcement about the meeting that had been mailed to the appropriate media, interested persons, and posted at the Central Office and on the website in accordance with the Freedom of Information Act.

Invocation

Chairman Fred Lynn gave the invocation.

Adoption of the Agenda

The Commission adopted the February 21, 2013 Meeting Agenda by unanimous consent. (Attachment A)

Approval of the Minutes of the January 17, 2013 Meetings

The Commission approved the minutes of the January 17, 2013 Commission Meeting by unanimous consent.

Public Input

There were no requests to participate in Public Input.

Report from DSN Boards

Mr. Jimmy Burton spoke on behalf of the SC Human Service Providers Association.

Commissioners' Update

Commissioner Christine Sharp gave a memorial tribute to Craig Stoxen. Commissioners Fred Lynn and Deborah McPherson spoke of events and meetings that they attended and shared news of upcoming events in their district.

**New Business**

Budget Update

Mr. Tom Waring provided a budget chart and gave an overview of DDSN's four budget priorities. Dr. Buscemi's budget presentation to the House Ways and Means Healthcare Subcommittee was well received. The Board of Economic Advisors reported an increase in revenue for 2014 of \$160 million. The approval of \$4.9 million in new state funds looks favorable for DDSN. Mr. Waring spoke of the budget process stating that hopefully revenue will hold for a positive result in the budget. Mr. Waring noted that Dr. Buscemi will present

to the Health and Human Services Subcommittee of Senate Finance Committee on March 13, 2013 at 9:00 a.m. (Attachment B)

### **Targeted Case Management (TCM)**

Dr. Buscemi gave a summary of last month's report regarding TCM. Ongoing meetings continue with DHHS and the issue is still a work in progress. DHHS is interested in developing a template for a new case management service for all waivers, currently being termed support coordination. There is a tight deadline in getting support coordination into the HASCI waiver renewal by the time the renewal application must be submitted to CMS. Dr. Buscemi stated that DDSN does not know what the financial implications will be because DHHS does not know the rate structure; however, there is positive movement toward a new service. Dr. Lacy spoke of developing another service to replace the direct activity piece that service coordinators will no longer be able to provide as a component of either TCM or support coordination. Dr. Buscemi stated that a memo will go out today to DDSN providers of service coordination and early intervention inviting them to a meeting Wednesday, February 27, 2013 hoping to get everyone on the same page regarding the many significant DHHS changes happening with our service coordination/case management programs due to DHHS statewide changes in the Medicaid system. Discussion followed. Dr. Buscemi addressed questions from an email she received from an advocate regarding Medicaid TCM freedom of choice and prior authorization. DHHS implemented a new Freedom of Choice form for TCM on January 1, 2013. It is a bit confusing to our families since DDSN is the only state agency that has been offering choice of any qualified TCM provider unlike the other eight states agencies providing this service. Dr. Buscemi stated DDSN has not been given any information from DHHS regarding the TCM pre-authorization process so she is unable to share anything with families at this time.

### **Head and Spinal Cord Injury Waiver Renewal (HASCI)**

Dr. Kathi Lacy spoke of the public input received regarding the HASCI waiver renewal. DDSN spoke with DHHS about keeping the services in the waiver that were recommended to be removed and DHHS concurred. DDSN and DHHS staff are working very hard to meet the mid March deadline to get support coordination in the waiver. Dr. Lacy stated that one person suggested pest control and dental be considered as new services to the HASCI waiver, but since DDSN has no new money, DHHS and DDSN will not be adding these new services at this time. DHHS is adding incontinent supplies to their Medicaid state plan so the HASCI will allow supplies beyond what the state plan covers. Participants should not experience a change in what they are currently getting. Dr. Buscemi stated that DHHS has expressed interest in moving the HASCI waiting list. DDSN is working with DHHS on the details; however, she does not have anything concrete to share right now.

### **Silver Palmetto Award**

Ms. Lois Park Mole presented information on the 2012 Silver Palmetto Award that is given annually to a city or town in South Carolina that has best demonstrated exceptional support and commitment to the people we serve during the previous year. Chairman Fred Lynn presented the city of Marion with the 2012 Silver Palmetto Award at the Municipal Association of SC in Columbia, SC on February 13, 2013. Employment is a priority of DDSN and the City of Marion reached out on its own to create meaningful work opportunities for individuals with disabilities and special needs in 2012.

### **Supports Intensity Scale (SIS)**

Dr. Kathi Lacy stated that SIS interviews were suspended until families and advocates were contacted. DDSN drafted letters that would be sent to families and consumers and asked the Advisory Group for their input of these letters. Dr. Lacy provided a copy of the information that was put together to send out to families. Discussion followed. It was agreed that a summary that is better to understand and that will get individuals attention needs to be provided. (Attachment C)

### **Quality Management System Data**

Dr. Kathi Lacy reviewed the quality management handouts stating the data was an additional six months of data from what was provided at the Commission Work Session in August 2012. Dr. Lacy stated DDSN requires internal administrative and management reviews whenever there is an allegation of abuse and emphasized the personnel action DDSN and it providers take that go well beyond what the law requires to ensure consumer health, safety and welfare. Various staff training was discussed. (Attachment D)

### **State Director's Report**

Dr. Buscemi reported on the following topics:

PDD Line Therapist Increase – The \$2.00 per hour increase for PDD line therapists has been approved by CMS. Dr. Buscemi discussed the different processes that need to take place before it is implemented. DDSN has discussed these processes with DHHS and will pursue the increase going directly to the therapists.

Dental Coverage - Dental services are still covered under the ID/RD Waiver. DHHS deleted dental coverage for adults nearly two years ago from the Medicaid State plan. Neither DDSN or DHHS has made changes to dental coverage in the ID/RD Waiver however prior authorization for some dental services is required. Denta-Quest is the third party entity responsible for prior authorization which is similar to private insurance.

DMH Property Sale – Dr. Buscemi wanted to address a question about why DMH was allowed to keep all the proceeds from the sale of the DMH property on Bull Street versus dividing 50/50 with the Budget and Control Board. She explained when the property was deeded to DMH it was specified that if the land was ever sold all proceeds would stay with DMH. All other state property, including DDSN, when sold, has to be divided 50/50 with the Budget and Control Board.

DHHS LAC Audit – Dr. Buscemi wanted to address a question about a statement in last year's LAC audit report of DHHS. DDSN gave an advance payment of \$13 million to DHHS. The audit comment actually had little to do with DDSN. DHHS applied it to the previous fiscal year when DDSN gave DHHS advance payment because rates were set too high. Dr. Buscemi explained that as a state agency DDSN cost settles with DHHS. Over the past several years, due to budget cuts and efficiencies found many of the rates were set higher than the agency's actual cost. Because DDSN knew this and could put a dollar figure to it, DDSN gave DHHS back the \$13 million in advance.

LAC Audit – DDSN has submitted all requested information to the LAC including status of all 63 recommendations from the previous LAC audit. Included in the requested information was an interested parties list. LAC contacted all persons/organizations on the list stating to contact LAC if the party wishes to, but is not required to. It is the person /organization's choice.

Waiting List – Commissioner Eva Ravenel previously asked about unduplicated waiting list numbers and Dr. Buscemi stated she has numbers to report today. DDSN staff looked at the ID/RD, CSW and PDD waiver waiting lists. HASCI was not included because the population does not really overlap with the other waivers. For the three waivers, the total number of people waiting is about 8300 people. Of those, about 6700 are non-duplicated meaning they are only on one waiting list. This means that about 1600 are on more than one list which is about 18-20 percent. Given the nature of our waiting list it would be a good estimate that approximately 15 percent at any time are duplicative.

Governor Haley/Executive Order – Governor Haley issued an Executive Order developing a task force to evaluate the state's current regulatory burdens on all type and sizes of businesses in the state and to propose recommendations to relieve those burdens. The Governor has directed all cabinet agencies and encouraged all other state agencies to identify their current and proposed statues, rules, regulations and policies that are a burden on the state's economy. Each agency is to submit a written report to the task force by May 15, 2013 and the task force's report is due to the Governor and members of the General Assembly by November 15, 2013.

Greenville DSN Board – Mr. David Goodell is slowly transitioning back to DDSN.


Next Regular Meeting Date

Chairman Fred Lynn announced the next regular Commission Meeting is scheduled for Thursday, March 21, 2013 with the starting time to be announced later.

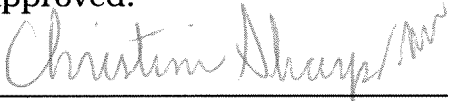
Adjournment

With no further business, Chairman Fred Lynn adjourned the meeting.

Submitted by,

  
Sandra J. Delaney

Approved:

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Commissioner Christine Sharp  
Secretary

SC COMMISSION ON DISABILITIES AND  
**Commission Meeting**

Attachment 1

February 21, 2013

**Guest Registration Sheet**

**(PLEASE PRINT)**

Name and Organization

1. Stephanie Williams Culham DSNB
2. Phil Clarkson BIA SC
3. LINDA VELDHEER DDSN
4. Jimmy BURTON BURTON CENTER
5. Bob Drake Burton Center
6. Ed
7. Valerie Bisby SCDDC
8. Thornwell Simons P + A
9. Marcia Lindsay ZAC
10. Donna H Hall Babcock Center
11. Lisa Weeks DDSN
12. Richard Wnek DDSN
13. Leanne Johnston SCHSP
14. Shondala Hall DDSN
15. Mary Leitner RLDSNB
16. Doreen Early SCSCA
17. KATHLEEN ROBERTS WHITTEN CENTER PARENTS CLUB SC PADD
18. Mike Keith Martin-Pickens DSN
19. Ann Dalton SCIDDSN
20. Dean Reed Colson BDSN

# SC COMMISSION ON DISABILITIES AND SPECIAL NEEDS

## Commission Meeting

February 21, 2013

### Guest Registration Sheet

**(PLEASE PRINT)**

Name and Organization

- 21. Beth Bunge Bright Start
- 22. Daniel Davis - DDJW
- 23. Stephanie Broders Family Connecta of SC
- 24. Maricen Smith " "
- 25. Dorothy Goodwin Community Options
- 27. Ralph Canby Aiken Co. Bd of Dis.
- 28. ~~Debra Davis~~ BIASC
- 29. ~~Debra M. James~~ PC DSN/BA
- 30. George Macky SC DSHS
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SC COMMISSION ON DISABILITIES AND  
Commission Meeting  
February 21, 2013

**Guest Registration Sheet**

**(PLEASE PRINT)** Name and Organization

- 1. Alice Shock, Berkeley Citizens, Inc
- 2. Rufus Britt - DDSN
- 3. Ronda Ritchie - DDSN Dist. II
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**SC COMMISSION ON DISABILITIES AND  
Commission Meeting**  
February 21, 2013

**Guest Registration Sheet**

**(PLEASE PRINT)** Name and Organization

- 1. Susan John - Henry County DSN
- 2. J. H. D. - SC D. PSW
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SC COMMISSION ON DISABILITIES AND SF  
Commission Meeting  
February 21, 2013

Attachment 4

**Guest Registration Sheet**

**(PLEASE PRINT)** Name and Organization

1. J. N. King DDSM

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SC COMMISSION ON DISABILITIES AND S  
Commission Meeting  
February 21, 2013

Guest Registration Sheet

**(PLEASE PRINT)**

Name and Organization

1. Mary Poole YCBDSN

2. Michelle Shaffer YCBDSN

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**SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS**

**A G E N D A**

**South Carolina Department of Disabilities and Special Needs  
3440 Harden Street Extension  
Conference Room 251  
Columbia, South Carolina**

**February 21, 2013**

**10:00 A.M.**

1. Call to Order *Chairman Fred Lynn*
2. Welcome - Notice of Meeting Statement *Commissioner Christine Sharp*
3. Invocation *Commissioner Fred Lynn*
4. Introduction of Guests
5. Adoption of Agenda
6. Approval of the Minutes of the January 17, 2013 Meeting
7. Public Input
8. Report from DSN Boards *Mr. Jimmy Burton*
9. Commissioners' Update *Commissioners*
10. Business:
  - A. Silver Palmetto Award *Ms. Lois Park Mole*
  - B. Budget Update *Mr. Tom Waring*
  - C. Targeted Case Management *Dr. Beverly Buscemi*
  - D. Head and Spinal Cord Injury Waiver Renewal *Dr. Kathi Lacy*
  - E. Supports Intensity Scale *Dr. Kathi Lacy*
  - F. Quality Management System Data *Dr. Kathi Lacy*
11. State Director's Report *Dr. Beverly Buscemi*
12. Next Regular Meeting Date (March 21, 2013)
13. Adjournment

***PLEASE SILENCE CELL PHONES DURING THE MEETING. THANK YOU.***

**South Carolina Department of Disabilities and Special Needs  
Budget Request Considerations for FY 2013 - 2014**

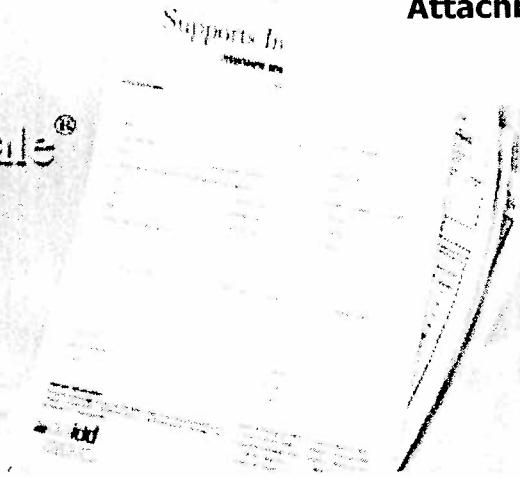
**Attachment B**

Program Need	Description of Need	State Funds	Executive Budget
1. <b>Meet Federal Requirements/Initiatives</b>	<p>This request is necessary to comply with Federal requirements and new initiatives while maintaining current service levels for consumers receiving services this year. Federal compliance changes require new state funds to manage reduced reimbursement rates for administrative costs in waiver services and consumer room and board costs. New dual eligible initiative (both Medicaid and Medicare) requires new state funds to serve consumers age 65 years old or older who do not live in institutional settings. The Affordable Care Act (ACA) is facilitating movement away from paper records for all service providers resulting in new state funds needed to transition to electronic health records related to consumer care.</p> <p>Reduced reimbursement rates for Administration - \$500,000                      Reduced reimbursement rates for Room and Board - \$700,000                      New DHHS Dual Eligibility Initiative - \$600,000                      Transition to Electronic Health Records - \$400,000</p>	<p align="right"><b>\$2,200,000</b></p>	<p align="right">\$500,000 \$700,000 \$600,000 \$400,000</p>
2. <b>Assure Safety and Quality of Care and Address Needs of Individuals Living with Aging Caregivers</b>	<p>This request is to assure safety and quality of care and address the growing residential service needs of individuals living with elderly caregivers. Service funding rates must be sufficient to cover the actual cost of care as a maintenance of effort to the providers of services. If the increased costs of gasoline, oil, electricity, food, medical professionals and other goods and services are not covered, eventually local providers will have to reduce the scope and quality of care below acceptable standards, eliminate the services for which there is insufficient funding, or stop providing services. This request will also provide necessary residential supports and services for 75 individuals living with caregivers aged 70 years old or older. As of June 30, 2012, there were over 1,100 individuals with severe disabilities being cared for by parents age 72 and over. Over 400 of these caregivers are 80 years old or older themselves and their sons and daughters with a disability are in their 50's or 60's. As the parent's age increases, the likelihood of their becoming disabled or dying increases significantly. When these fragile family arrangements fall apart, DDSN must respond to the health and safety risks of the individual with the disability who cannot care for him/herself.</p> <p>Service funds sufficient to cover Actual Cost of Care - \$2.5 Million                      75 Beds for Individuals Living with Aging Caregivers - \$1.350 Million</p>	<p align="right"><b>\$3,850,000</b></p>	<p align="right">\$569,762 -</p>
3. <b>Boost the Continued Transition of Individuals and Maintain Provision of Quality Care to Consumers</b>	<p>This request is to maintain the provision of quality care as required. It represents the state's need to boost the continued transition of individuals with very complex needs from institutional (ICF/ID) settings to less restrictive community settings while maintaining quality care. DDSN has managed this movement to community settings within its own resources for the past 18 years. With increasing cost of care for those individuals leaving the regional centers, the department no longer has the funding capacity to maintain the quality of care at the regional centers as well as to insure the quality of care for those individuals moving into the community. New state funds are required to continue to meet the federal mandate of allowing those individuals desiring to live in the community to move out of the regional centers. This request will allow 50 individuals with the most complex medical and behaviorally challenging needs to move without jeopardizing their health and safety. This request will also allow the agency to expand the utilization of the Supports Intensity Scale (SIS) to better assess individuals' needs. This SIS is a validated and reliable tool which can</p>	<p align="right"><b>\$3,600,000</b></p>	<p align="right"><b>\$1,100,000</b></p>

**South Carolina Department of Disabilities and Special Needs  
Budget Request Considerations for FY 2013 - 2014**

Program Need	Description of Need	State Funds	Executive Budget
4. <b>Increase and Improve Access to In-Home Individual and Family Supports</b>	<p>enable the agency to ensure individual consumers are getting the right amount of supports and services and ensures equity across consumers by matching support levels to individual needs. This request also provides for the increased cost of providing care and addressing nursing and supervision needs of consumers. Quality cannot be reduced and staffing ratios must be maintained and meet compliance standards. Workforce issues must be addressed to recruit and retain quality staff who provide essential 24/7 nursing care and direct supervision and care of consumers.</p> <p>Olmstead US Supreme Court decision/Service funds required to - \$1.5 Million                      transition 50 individuals from region centers to community settings                      Expand use of Supports Intensity Scale (SIS) - \$600,000                      Workforce Recruitment and Retention – Nurses and Direct Care - \$1.5 Million</p>	<p align="center"><b>\$3,375,000</b></p>	<p align="center"><b>\$1,100,000</b></p> <p align="center">-\$600,000 -\$500,000</p>
	<p><b>This request is to prevent unnecessary and expensive out-of-home placements by providing individuals and their family caregivers with the supports necessary to maintain them in their homes.</b> It represents the need to increase and improve access to respite services critical to helping parents and other family caregivers cope with the stress of providing daily care and supervision to their loved one. Supply and demand requires an increase in the hourly rate paid to respite providers to attract and retain more caregivers and providers on a statewide basis. This request will also provide approximately 700 individuals with severe disabilities on waiting lists with in-home supports and services necessary to keep them at home with family and prevent unnecessary and expensive out-of-home placements. As of June 30, 2012, there are about 3,300 consumers on the waiting list for Intellectual Disability/Related Disabilities Community Services and 390 awaiting Head and Spinal Cord Injury Community Services. There were also 1,300 individuals awaiting a day support service. This request also responds to South Carolina's need to fully fund over time the remaining cost of post-acute rehabilitation that enables people with traumatic brain or spinal cord injuries to obtain an appropriate level of specialized rehabilitation after the injury and acute hospital stay. Currently in the state, there is a serious gap in access to post-acute rehabilitation that is specialized for traumatic brain or spinal cord injuries. The estimated total cost of care would be \$68 million; however, \$56.5 million of this expense could be covered by private insurance, Medicare and other government reimbursements. This fiscal year, DDSN will have \$2,084,000 in recurring funding for this program. The State funding needed for the balance to cover the uninsured/underinsured and Medicaid State matching funds would be \$9,420,000. Due to the amount of funding needed, DDSN is only requesting \$500,000 in additional funding at this time. This amount would serve 10 additional individuals.</p> <p>Increase hourly rate from \$8.30 to \$10.30 per hour for Respite Caregivers - \$1 Million                      Move 700 individuals off Waiting Lists and provide In-home Supports - \$1.875 Million                      Increase Post-acute Rehabilitation service capacity by 10 individuals - \$500,000 (40 now)</p>	<p align="center"><b>\$13,025,000</b></p>	<p align="center">\$500,000 \$600,000 -</p> <p align="center"><b>\$4,969,762</b></p>
	<b>Total</b>		

## AAIDD Supports Intensity Scale®



### WHAT IS THE SUPPORTS INTENSITY SCALE?

The Supports Intensity Scale (SIS) is a national assessment used to determine the level of supports needed for an adult with a disability to be as successful as possible. The SIS encompasses all areas of a person's life (home living, community living, employment, etc.). Please visit [www.siswebsite.org](http://www.siswebsite.org) to read more about the SIS.

### WHAT SHOULD YOU CONSIDER WHEN SETTING UP A SIS INTERVIEW?

- The assessment generally takes about 2 hours but please plan ahead for 3 hours. If for any reason an individual may not be able to participate in the full interview, please make arrangements accordingly.
- In addition to the individual, we need at least 2 respondents and no more than 5 respondents that are willing to participate. Ideally, one respondent from Residential/Family and the other respondent from Day Support/Vocational. Again, 2 respondents are needed at all times and families are encouraged to be a respondent. A respondent is someone that knows the individual being interviewed (caregiver, family member, spouse, case manager, job coach, etc.).
- Please consider the individual's schedule, respondents' schedule and other factors (meal times, shift changes, etc.) when choosing a time for the interview.
- The assessment is facilitated as a discussion among ALL respondents and the individual interviewed; full participation is expected. Please make sure that the individual's guardian/family is invited and encouraged to participate.
- Due to the nature of the assessment and sensitive topics, please make sure ONLY the individual interviewed and the chosen respondents are in the room. Please make sure the respondents are people that the individual being interviewed feels comfortable talking in front of.

### WHAT SHOULD YOU ASK OF THE RESPONDENTS?

- Be open and frank in discussions
- Full participation (ALL RESPONDENTS EQUALLY!!!)
- Know the individual being interviewed (at least 3 months)
- Please no food, cell phones, videotaping, audiotaping, laptops or other distracting devices

For further information or for questions about scheduling, please contact:  
 Kristin Penninger  
 (803) 935-5625  
[Kristin.penninger@uscmed.sc.edu](mailto:Kristin.penninger@uscmed.sc.edu)



Dear Parent/Family Member:

Your family member with a disability or related disability has been selected to participate in an evaluation using the Supports Intensity Scale in the next several weeks. You will be contacted soon to set up the evaluation.

The Supports Intensity Scale (SIS) is a standardized assessment designed to measure the pattern and intensity of supports an adult with intellectual disabilities requires in order to be successful living in community settings, such as in their own home, their families' home or in a community residential setting.

It measures the general support needs or assistance each person has in basic areas like health and safety, home living, community living, etc. Generally speaking, it measures what someone can do on his/her own plus any help he/she needs from someone else in order to successfully complete tasks. When help from someone else is needed, the type of help (e.g., reminders, hands on assistance), the frequency with which help is needed (e.g., every hour, every day) and the amount of time it takes to help (e.g., 15 minutes, 2 hours) are all measured.

*"We all lead supported lives and that support comes from all over. It might be a doctor, mechanic or a friend. We all need to remember that while some of us might need supported living services, they are just one of the means to supported life, not the end."*  
*Charles Galloway, 1993*

The SIS is not like other assessments; it does not focus on skill deficits. Instead, the SIS focuses on what the person can do – it is strength-based. It has been proven to reliably measure, the intensity of one's support needs relative to others with similar disabilities repeatedly over time, including people with disabilities across the nation.

The SIS is administered by trained, qualified interviewers during semi-structured interviews. The SIS interview will be scheduled so the person and other people important to them can attend. Questions are asked in the interview and answered by the person and/or "respondents." A respondent is someone who knows the individual well. This may be a family member, staff person or friend. Interviews typically last about two hours. There is no cost.

Results of the evaluation are provided in writing following the interview. The results may be shared with service providers (e.g., day program, residential, or service coordination) to aid in service planning for the person to ensure his/her goals are identified and appropriate supports are in place. It will not be used as a resource allocation tool at this time.

We hope you will participate in this interview with your family member and believe that you will find the experience positive and helpful.

If you have any questions about the SIS, you may want to visit [www.siswebsite.org](http://www.siswebsite.org), the DDSN website at [www.ddsn.sc.gov](http://www.ddsn.sc.gov) under "Recent News" or call Janet Priest, Director of Intellectual/Related Disability at 1-888-376-4636 to discuss or learn more about it.

Sincerely,

Doreen Chapel, MSW  
Program Director, Supports Intensity Scale Project

Date

Name Address

Dear:

Thank you for your/your family member's participation in the Supports Intensity Scale (SIS) interview. Attached you will find a summary of the information learned during the interview. This information is being provided to you/your family member for informational purposes only. However, if shared with your/your family member's current service providers (e.g., Service Coordinator, Day Program, etc.) it could aid them with your/your family member's service planning. It is not approved to be used for resource allocation at this time.

When reviewing the results, you will see "Total Raw Score", "Total Score" and "Percentile" ratings. Also, you will see the "Percentile" graphed on a chart for each of the six life activities domains. The SIS compares the level of support you/your family member needs in each domain against the level of support needed by other people who are over 18 years of age who have a developmental disability or related disability. The SIS has been used to help thousands of people with disabilities across the country and the results are reliable. Therefore, for example, if your graph shows a "5" this means that out of 100 people, 95 people need more support than you/your family member. If the graph shows a "90", this means that out of 100 people, 10 people need more support than you/your family member. A higher number on the graph indicates greater supports are needed in that area.

If you have any questions about this information or if you would like a more detailed report, please feel free to contact Ms. Janet Priest at the South Carolina Department of Disabilities and Special Needs at 1-888-376-4636. Also, please call her if you would like to provide any feedback about your experience.

Thanks again for your participation.

Sincerely,

Doreen Chapel, MSW  
Program Director, Supports Intensity Scale Project

Attachment

# **REGIONAL CENTERS - PROFILE**

## **Statewide**

**FY's 2008-2013 (through 12/31/12)**

**ALLEGED ABUSE CASES REPORTED:  
Statewide Data**

Regional Centers

Consumer resided in Regional Center

**# Served in Regional Centers:**

(Based on CDSS data-unduplicated #)

thru 12/31/12

FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>
	1,009	873	838	812	816	770

**Total # Cases Reported:**

FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>
	142	140	107	75	136	57

**Rate Per 100:**

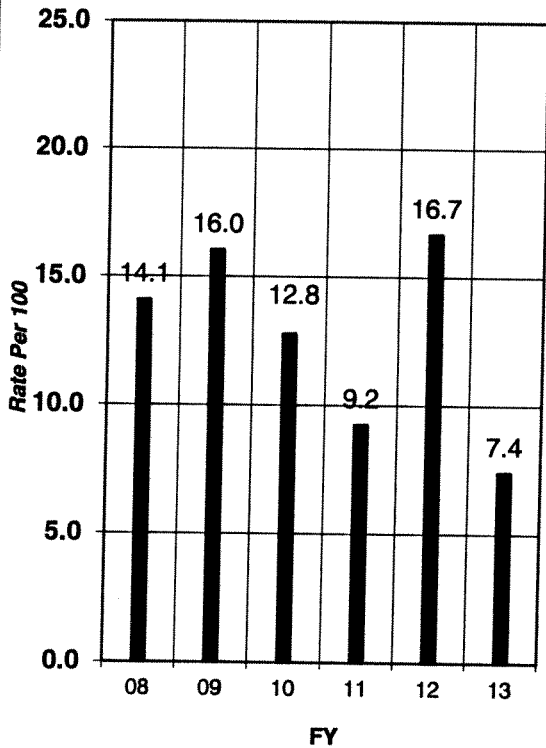
FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>
	14.1	16.0	12.8	9.2	16.7	7.4

**# Cases Reported (Substantiated):**

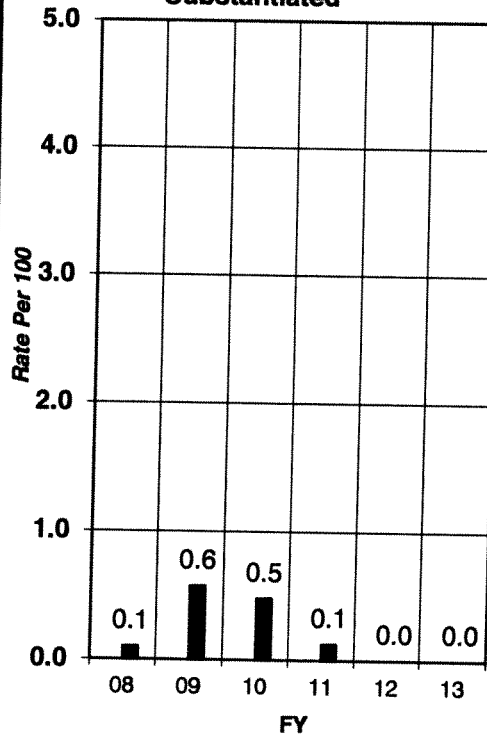
FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>
	1	5	4	1	0	0

FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>
	0.1	0.6	0.5	0.1	0.0	0.0

**Rate Per 100 - Alleged Abuse Reported Statewide**

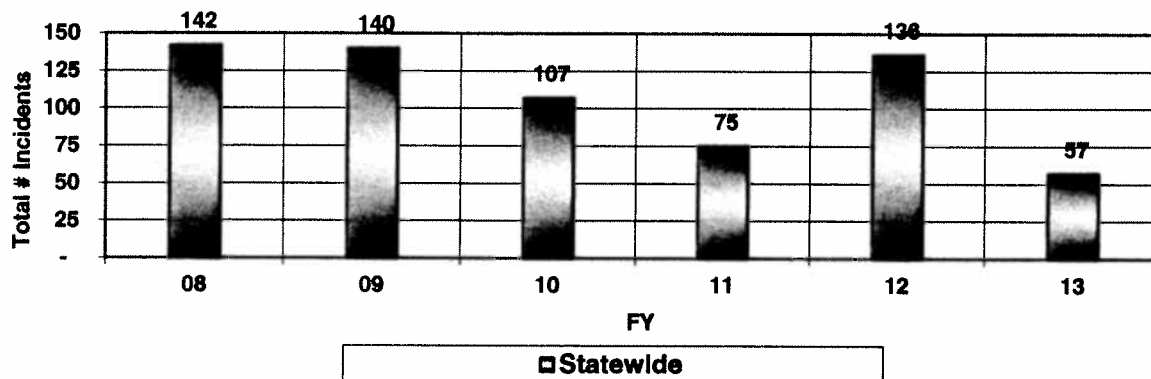


**Rate Per 100 - Alleged Abuse Reported Statewide - Substantiated**



# Alleged Abuse Reported (By Type) Regional Centers

Statewide			(#'s for type incidents may be duplicated, i.e., more than one type may be checked)									
FY	Total # Incidents	Rate Per 100	Physical	Sexual	Psychological	Neglect	Verbal	Threatened	Providing Substances	Exploitation	Complicity	Other
08	142	14.1	98	9	19	23	0	0	0	2	0	0
09	140	16.0	113	4	8	5	0	0	0	12	0	0
10	107	12.8	84	3	12	12	0	0	0	0	0	0
11	75	9.2	58	1	5	11	0	0	0	0	0	0
12	136	16.7	102	7	16	16	0	0	0	9	0	0
13	57	7.4	48	0	1	6	0	0	0	2	0	0



## Top 4 # Types-Statewide

FY 08	Phy	Neg	Psych	Sxd
	98	23	19	9
FY 09	Phy	Exp	Psych	Neg
	113	12	8	5
FY 10	Phy	Psych	Neg	Sxd
	84	12	12	3
FY 11	Phy	Neg	Psych	Sxd
	58	11	5	1
FY 12	Phy	Psych	Neg	Exp
	102	16	16	9
FY 13	Phy	Neg	Exp	Psych
	48	6	2	1

**Critical Incidents REPORTED:  
Statewide Data**

**Regional Centers**

**# Served in Regional Centers:**

(Based on CDSS data-unduplicated #)

thru 12/31/12

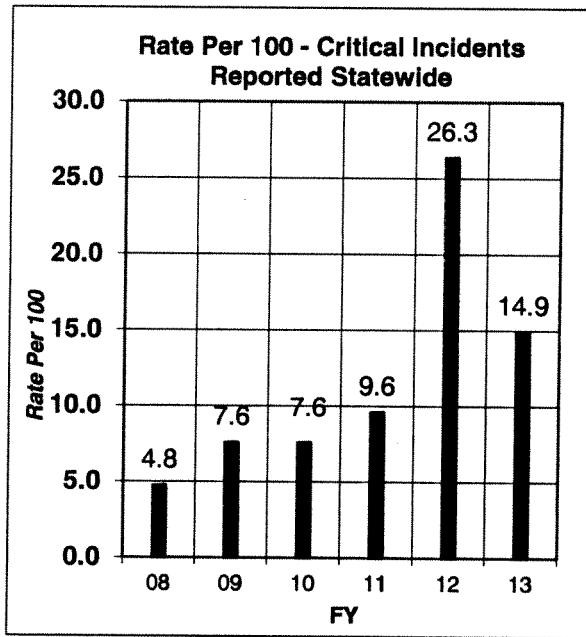
<i>FY</i>	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>
	1,009	882	844	813	816	770

**Total # Cases Reported:**

<i>FY</i>	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>
	48	67	64	78	215	115

**Rate Per 100:**

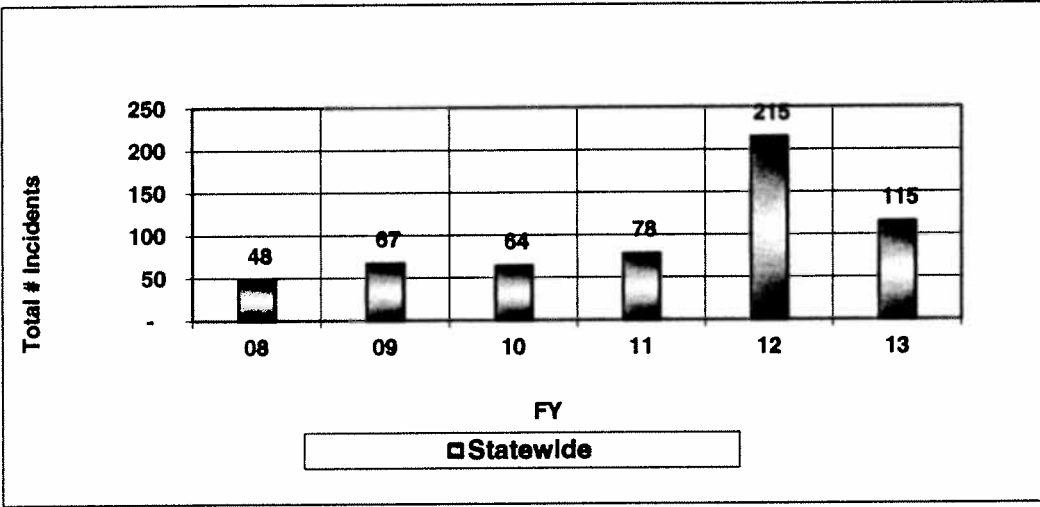
<i>FY</i>	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>
	4.8	7.6	7.6	9.6	26.3	14.9



# Critical Incidents Reported (By Type) Regional Centers

**Statewide** (#'s for type incidents may be duplicated, i.e., more than one type may be checked)

FY	Total # Incidents	Rate Per 100	Accident	Aggression/Assault	Communicable Disease	Criminal Arrest	Elopement	Fall	Fire	Firms/ Weapons/ Explosives	Hospital Adm>3 days	Illegal Substances	Injury	Law Enforcement	Major Medical	Malicious Use of Lang to Consumers	MedTreatment (not followed)	Medication Errors	Motor Vehicle	Other	Property Damage	Sexual/Sxl Assault	Suicide	Theft-Money	Theft-Property
08	48	4.8	3	7	1	5	1	0	0	1	0	1	7	2	9	0	0	0	3	8	3	2	1	0	1
09	67	7.6	10	6	0	4	2	9	2	0	0	0	25	3	19	2	0	0	3	4	0	4	0	0	2
10	64	7.6	2	5	0	1	4	7	1	1	0	0	14	0	28	0	1	1	0	3	1	0	0	0	2
11	78	9.6	2	1	0	3	4	5	0	1	0	0	9	0	33	0	0	3	4	4	3	1	2	1	2
12	215	26.3	1	4	3	0	4	8	3	0	0	0	37	4	89	3	0	2	1	52	1	2	1	1	0
13	115	14.9	0	1	1	0	0	4	0	1	30	0	5	1	60	2	0	1	0	12	0	1	1	0	1



Top 4 # Types-Statewide				
FY	MM	Oth	Agg	Inj
08	9	8	7	7
09	Inj	MM	Acc	Fall
09	25	19	10	9
10	MM	Inj	Fall	Agg
10	28	14	7	5
11	MM	Fall	Elp	MV
11	33	5	4	4
12	MM	Oth	Inj	Fall
12	89	52	37	8
13	MM	Hosp	Oth	Inj
13	60	30	12	5

**DEATHS REPORTED:**

**Statewide Data**

Based on Deaths Where Individual Resided in Regional Center

(Death may have occurred @ home w/family, in hospital, or in regional center)

**# Served-Unduplicated # in Regional Centers:**

(Based on CDSS data)

thru 12/31/12

FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>
	1,009	873	838	812	816	770

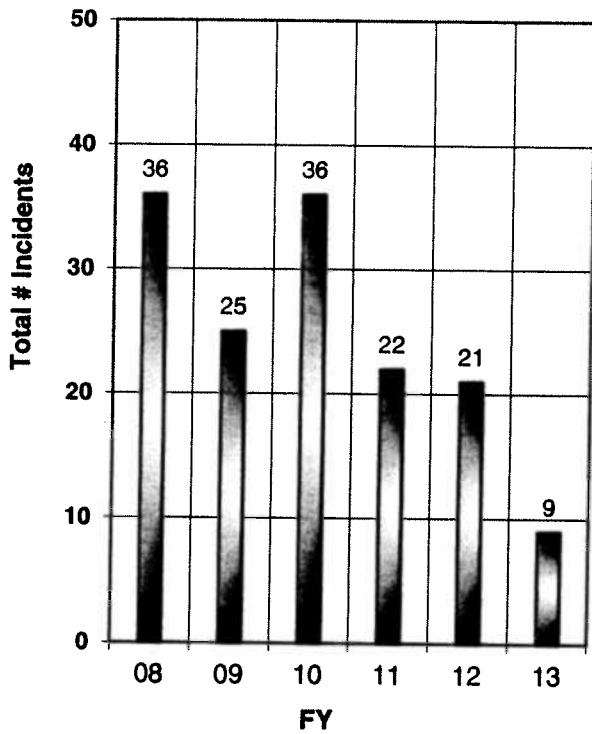
**Total # Cases Reported:**

FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>
	36	25	36	22	21	9

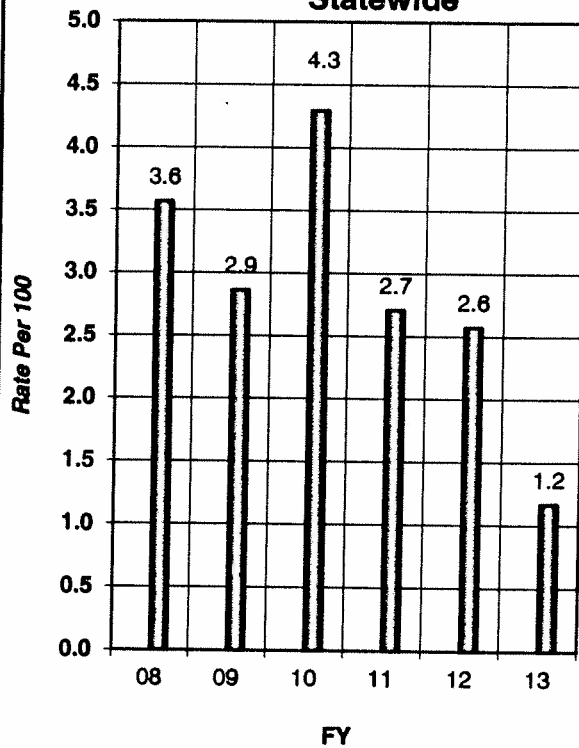
**Rate Per 100:**

FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>
	3.6	2.9	4.3	2.7	2.6	1.2

**# Incidents Statewide**



**Rate Per 100 - Deaths Reported Statewide**





**SC Department of Disabilities and Special Needs**

**COUNTY PROFILE DATA**

**Allegations of Abuse, Neglect, Exploitation Reported**

*Community Residential and Day Services*

**Statewide**

**FY's 2008 - 2013 (through 12/31/12)**

Data updated 2/7/13

**ALLEGED ABUSE CASES REPORTED:**

**Community Residential**

**Statewide Data**

Location of Incident: Community Residential Programs (excludes Regl Ctrs, home, community, other)

**# Served in Residential Placement (excluding Regional Centers):**

(Based on CDSS data-unduplicated #)

thru 6/30/12 thru 12/31/12

FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>	% Change FY 08-12
	4,099	4,288	4,226	4,241	4,248	4,232	3.6%

**# Allegations Reported**

FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>	% Change FY 08-12
	526	510	426	420	413	233	-21.5%

**Rate Per 100:**

FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>	% Change FY 08-12
	12.8	11.9	10.1	9.9	9.7	5.5	-24.2%

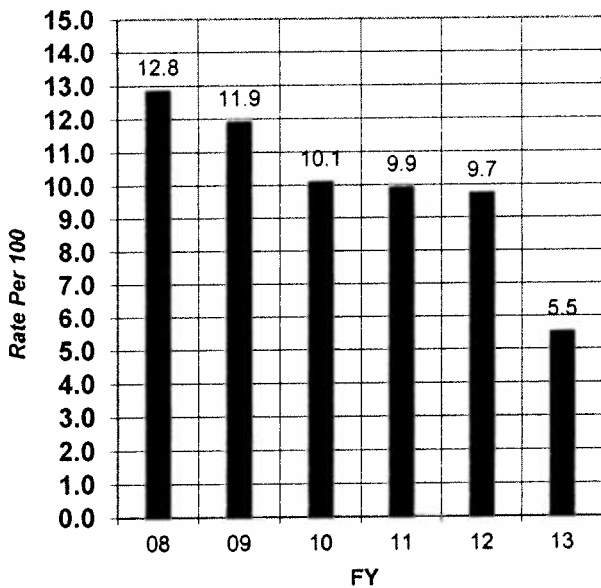
**# Allegations Reported (Substantiated):**

FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>	% Change FY 08-12
	50	17	18	10	8	0	-84.0%

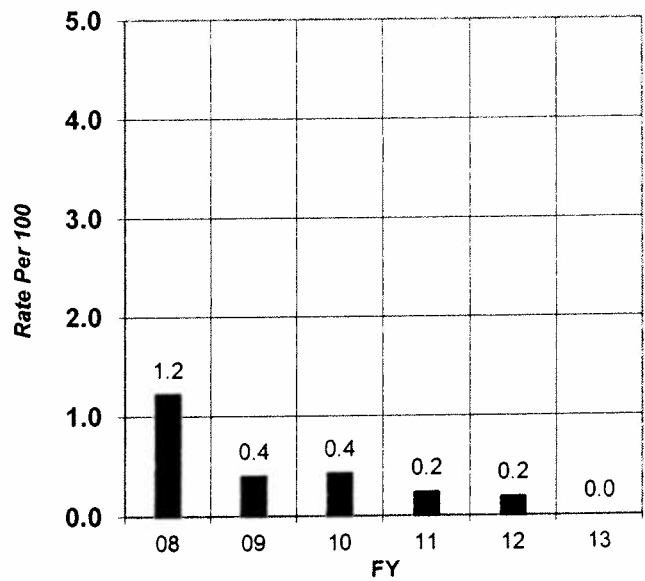
**Rate Per 100 (Allegations Substantiated):**

FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>	% Change FY 08-12
	1.2	0.4	0.4	0.2	0.2	0.0	-84.6%

**Rate Per 100 - Alleged Abuse Reported Statewide**



**Rate Per 100 - Alleged Abuse Reported Statewide - Substantiated**

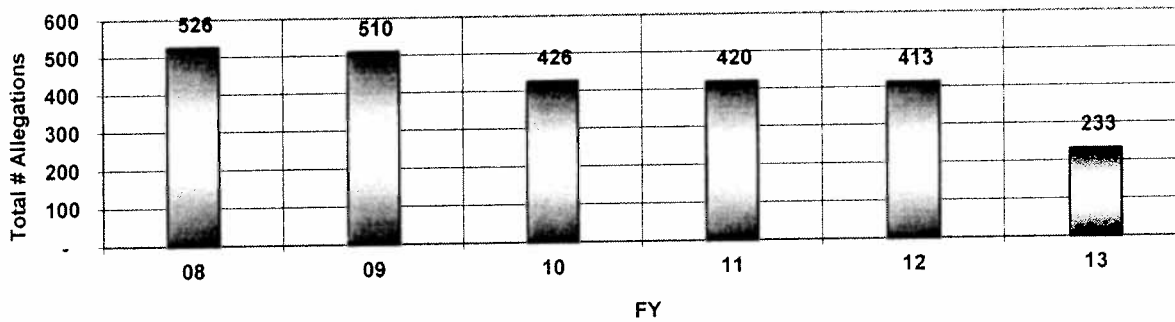


# Alleged Abuse Allegations Reported (By Type) Community Residential Pr

Statewide			(#'s for type incidents may be duplicated, i.e., more than one type may be checked)									
FY	#	Rate Per 100	Physical	Sexual	Psychological	Neglect	Verbal	Threatened	Providing Substances	Exploitation	Complicity	Other
08	526	12.8	249	21	105	113	0	0	0	75	0	1
09	510	11.9	259	15	94	126	0	0	0	63	0	0
10	426	10.1	208	6	90	94	0	0	0	52	0	0
11	420	9.9	176	8	115	102	0	0	0	50	0	0
12	413	9.7	197	17	92	103	0	0	0	43	0	0
13	233	5.5	92	3	32	98	0	0	0	19	0	0

% Change FY 08-12												
	-21.5%	-24.2%	-63%	-86%	-70%	-13%	NA	NA	NA	-75%	NA	-100%

**Total # Allegations (Statewide)  
Community Residential Programs**



### Top 4 # Types-Statewide

FY	Physical	Neglect	Psych	Exploit
FY 08	249	113	105	75
FY 09	259	126	94	63
FY 10	208	94	90	52
FY 11	176	115	102	50
FY 12	197	103	92	43
FY 13	98	92	32	19

**ALLEGED ABUSE CASES REPORTED: Day Services**

**Statewide Data**

Location of Incident: Day Services

**# Served in Day Services:**

(Based on CDSS data-unduplicated #)

Note: Includes Work Crew, Enclave, Supp Emp, Center Based,  
but counted as one individual if more than one service recd

FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>	% Change FY 08-12
	7,779	7,617	7,581	7,404	7,421	7,255	-4.6%

**Total # Allegations Reported:**

FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>	% Change FY 08-12
	97	96	52	98	71	41	-26.8%

**Rate Per 100:**

FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>	% Change FY 08-12
	1.2	1.3	0.7	1.3	1.0	0.6	-23.3%

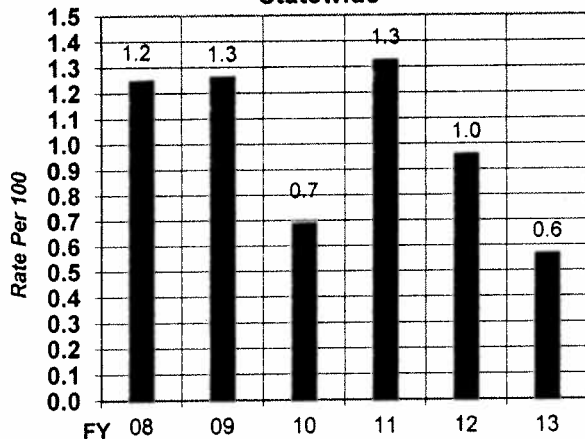
**# Allegations Reported (Substantiated):**

FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>	% Change FY 08-12
	3	6	2	1	2	0	-33.3%

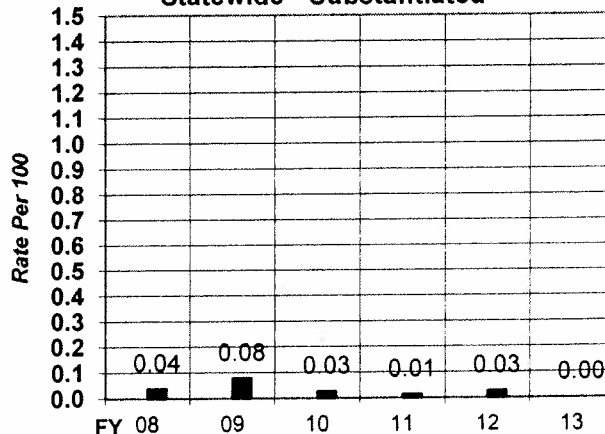
**Rate Per 100 (Allegations Substantiated):**

FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>	% Change FY 08-12
	0.04	0.08	0.03	0.01	0.03	0.00	-30.1%

**Rate Per 100 - Alleged Abuse Reported Statewide**



**Rate Per 100 - Alleged Abuse Reported Statewide - Substantiated**



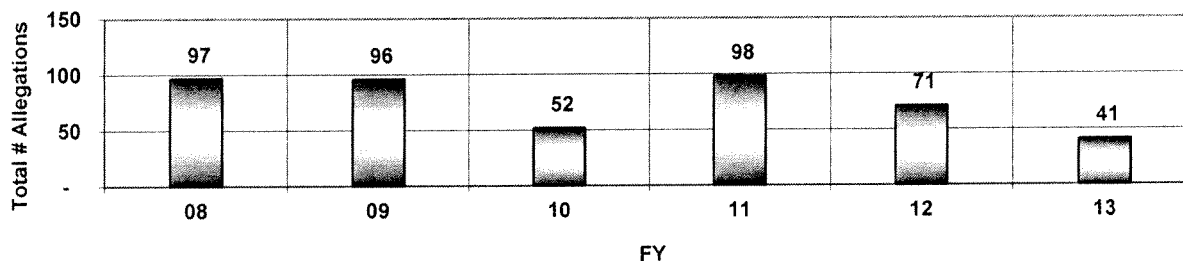
## Alleged Abuse Allegations Reported (By Type) Day Programs

Statewide			(#'s for type incidents may be duplicated, i.e., more than one type may be checked)										
FY	#	Rate Per 100	Physical	Sexual	Psychological	Neglect	Verbal	Threatened	Providing Substances	Exploitation	Complicity	Other	
08	97	1.2	45	4	22	25	0	0	0	6	0	0	
09	96	1.3	30	7	18	35	0	0	0	28	0	0	
10	52	0.7	23	3	16	7	0	0	0	4	0	0	
11	98	1.3	35	3	18	29	0	0	0	17	0	0	
12	71	1.0	38	4	11	17	0	0	0	4	0	0	
13	41	0.6	10	1	6	15	0	0	0	10	0	0	

### % Change FY 08-12

	-26.8%	-23.3%	-78%	-75%	-73%	-40%	NA	NA	NA	67%	NA	NA
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**Total # Allegations (Statewide)  
Day Programs**



### Top 4 # Types-Statewide

	Physical	Neglect	Psych	Exp
FY 08	45	25	22	6
	Neglect	Physical	Exp	Psych
FY 09	35	30	28	18
	Physical	Psych	Neglect	Exp
FY 10	23	16	7	4
	Physical	Neglect	Psych	Sexual
FY 11	35	29	18	17
	Physical	Neglect	Psych	Sxl/ Exp
FY 12	38	17	11	4 ea
	Neglect	Physical	Exp	Psych
FY 13	15	10	10	6

**SC Department of Disabilities & Special Needs**

**COUNTY PROFILE DATA**

**Critical Incidents**

Statewide

**FY'S 2008 - 2013 (through 12/31/12)**

Based on data run 2/7/13

**CRITICAL INCIDENTS REPORTED:**

**Statewide Data**

Location of Incident: All incidents reported (excluding Regional Centers)

**# Served-Unduplicated # served in Community Residential or Day Services:**  
 (Based on CDSS data) thru 6/30/12 thru 12/31/12

<u>FY</u>	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>	<u>% Change FY 08-13</u>
	8,251	8,186	8,103	7,907	7,881	7,763	-4.5%

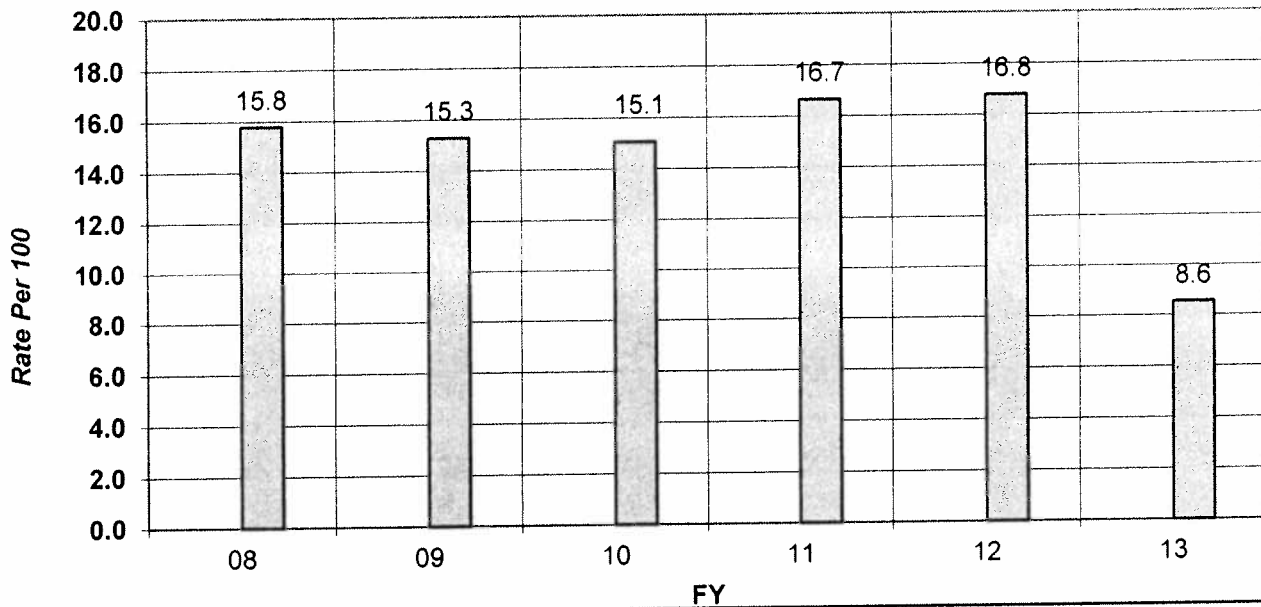
**Total # Cases Reported:**

<u>FY</u>	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>	<u>% Change FY 08-13</u>
	1,303	1,252	1,221	1,318	1,323	664	1.5%

**Rate Per 100:**

<u>FY</u>	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>	<u>% Change FY 08-13</u>
	15.8	15.3	15.1	16.7	16.8	8.6	6.3%

**Rate Per 100 - CI Cases Reported Statewide**



# Critical Incident Cases Reported (By Type)

Statewide (#'s for type incidents may be duplicated, i.e., more than one type may be checked)

FY	Total # Incidents	Rate Per 100	Accident	Aggression/Assault	Communicable Disease	Criminal Arrest	Elopement	Fall	Fire	F'arms/ Weapons/ Explosives	Hosp Admissions >3 Days	Illegal Substances	Injury	Law Enforcement	Major Medical	Malicious Use of Prof/Disresp Lang to Consumers	Medical Treatment (not followed)	Medication Errors	Motor Vehicle	Other	Property Damage	Sexual/Sxl Assault	Suicide	Theft-Money	Theft-Property
08	1,303	15.8	188	203	10	21	101	182	25	15	NA	9	266	203	277	30	34	10	117	123	89	22	12	22	35
09	1,252	15.3	138	182	10	19	101	182	17	6	NA	8	243	194	363	22	41	17	96	133	76	16	30	30	41
10	1,221	15.1	50	150	13	26	60	114	11	8	NA	10	171	118	412	10	10	11	54	114	33	15	31	8	20
11	1,318	16.7	52	156	10	12	60	92	6	3	NA	10	138	117	495	9	9	12	52	104	29	19	20	14	35
12	1,323	16.8	32	142	6	30	76	109	11	5	NA	8	135	96	475	18	2	15	42	129	20	18	24	17	37
13	664	8.6	26	79	3	8	14	54	6	1	71	3	48	35	229	2	3	4	12	51	12	6	15	11	21

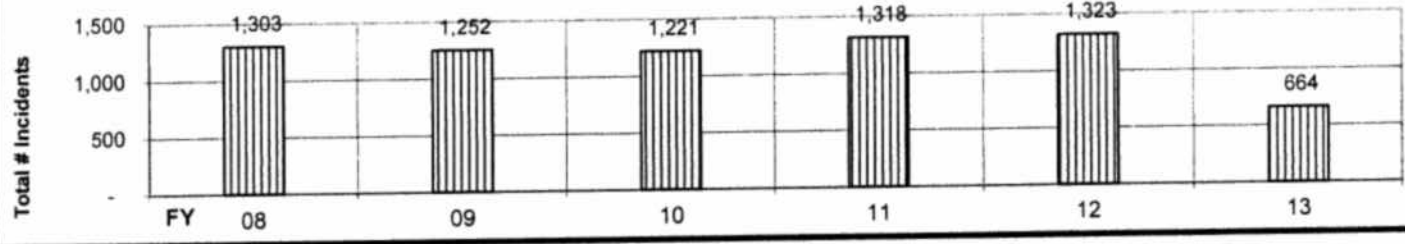
% Change FY 08-12

1.5%	6.3%	-86%	-61%	-70%	-62%	-86%	-70%	-76%	-93%	-	-67%	-82%	-83%	-17%	-93%	-91%	-60%	-90%	-59%	-87%	-73%	25%	50%	-40%
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## Top 4 # Types-Statewide

	MM	Inj	LE	Agg
FY 08	277	266	203	203
	MM	Inj	LE	Fall/Agg
FY 09	363	243	194	182 ea
	MM	Injury	Agg	LE
FY 10	412	171	150	118
	MM	Agg	Inj	LE
FY 11	495	156	138	117
	MM	Agg	Inj	Oth
FY 12	475	142	135	129
	MM	Agg	Hosp	Fall
FY 13	229	79	71	54

## Total # Incidents Statewide





**SC Department of Disabilities and Special Needs**

**COUNTY PROFILE DATA**  
**Deaths**

Community Residential Services

**FY'S 2008 - 2013 (through 12/31/12)**

Based on Statewide data run 2/7/13

**DEATHS REPORTED:**

**Statewide Data**

Based on Deaths Where Individual Resided in DSN Operated CR Facility (CRCF, CTH, ICF, SLP)  
 (Death may have occurred @ home w/family, in hospital, in community or in community program)

**# Served-Unduplicated # receiving Community Residential Services:**

FY	(Based on CDSS data)		thru 6/30/12		thru 12/31/12		% Change FY 08-12
	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>	
	4,099	4,288	4,226	4,241	4,248	4,232	3.6%

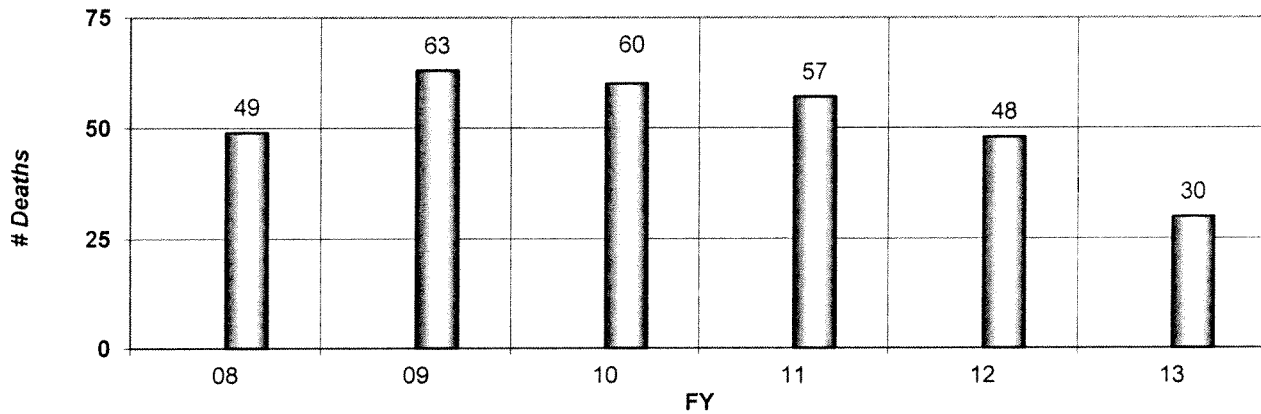
**Total # Deaths Reported:**

FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>	% Change FY 08-12
	49	63	60	57	48	30	-2.0%

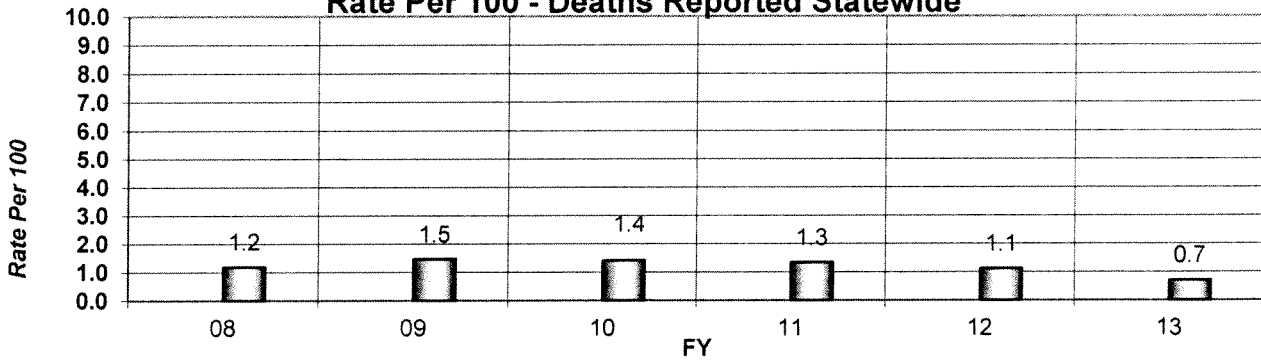
**Rate Per 100:**

FY	<u>08</u>	<u>09</u>	<u>10</u>	<u>11</u>	<u>12</u>	<u>13</u>	% Change FY 08-12
	1.2	1.5	1.4	1.3	1.1	0.7	-5.5%

**Total # Deaths Reported Statewide**



**Rate Per 100 - Deaths Reported Statewide**



# Deaths Reported (Residence Type)

Statewide			Individual's Residence Type:					
FY	Total # Cases	Rate Per 100	CRCF	CTHI	CTH II	ICF	SLP I	SLP II
08	49	1.2	5	1	29	11	2	1
09	63	1.5	5	2	37	17	1	1
10	60	1.4	7	1	38	10	4	0
11	57	1.3	9	3	28	12	1	4
12	48	1.1	4	2	25	11	4	2
13	30	0.7	4	1	17	5	1	2

% Change FY 08-12								
	-2.0%	-5.5%	-20%	0%	-41%	-55%	-50%	100%

