

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

## **MINUTES**

May 18, 2017

The South Carolina Commission on Disabilities and Special Needs met on Thursday, May 18, 2017, 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:**

Bill Danielson, Chairman  
Eva Ravenel, Vice Chairman – Via Teleconference  
Mary Ellen Barnwell  
Sam Broughton, Ph.D.  
Katie Fayssoux  
Vicki Thompson

#### **Absent:**

Gary Lemel – Secretary

### **DDSN Administrative Staff**

Dr. Buscemi, State Director; Mr. David Goodell, Associate State Director, Operations; Mrs. Susan Beck, Associate State Director, Policy; Mr. Tom Waring, Associate State Director, Administration; (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 Sign-In Sheet)

### **Georgetown County DSN Board**

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

(See Attachment 4 Sign-In Sheet)

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

(See Attachment 5 Sign-In Sheet)

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

(See Attachment 6 Sign-In Sheet)

York County DSN Board (via videoconference)  
(See Attachment 7 Sign-In Sheet)

Jasper County DSN Board (via videoconference)

News Release of Meeting

Chairman Danielson called the meeting to order and Commissioner Broughton read a statement of announcement about the meeting that was 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.

Adoption of the Agenda

The Commission adopted the May 18, 2017 Meeting Agenda by unanimous consent. (Attachment A)

Invocation

Commissioner Barnwell gave the invocation.

Approval of the Minutes of the April 20, 2017 Commission Meetings

The Commission approved the April 20, 2017 Commission Meeting minutes with a change by unanimous consent.

Public Input

The following individuals spoke during Public Input: Jerry Mize, Carolyn O'Connell, and Deborah McPherson.

Commissioners' Update

Commissioner Thompson spoke of an event in her district.

Nominating Committee

Chairperson Danielson appointed Commissioners Broughton, Fayssoux, and Barnwell to the Nominating Committee for election of the 2017-2018 Commission Officers. The election will be held at the June 15, 2017 Commission Meeting.

State Director's Report

Dr. Buscemi reported on the following:

Video Recording of Commission Meetings – Staff is working on providing a better quality of recording. Retaining and recording issues will need to be

discussed before the agency can present a directive for review. DDSN is looking at other agencies to see what they may do regarding video recording.

\$9 Million for Salary Increases – The state budget process is still ongoing and additional steps must be completed before the increase can be implemented. However, the House and Senate versions of the budget process include \$9 million for wage increases for direct support professionals. The increase will hopefully be included in the initial provider contract awards. A memo to that effect will go out to the network.

CMS – CMS sent out a memo announcing the extension of the timeline to implement the New Final Rule for Home and Community Based Settings to 2022. This information was sent to the stakeholders and the Commission. The extension does not change the site review assessments being performed by PCG on behalf of DHHS.

Conflict Free Case Management – A memo from DHHS was shared widely as it announced the Individual Choice Model. The decision of which providers will deliver case management and which will deliver direct services will be made at an individual level; not an entity level. This is a significant change from the earlier model of each provider having to only deliver case management or direct services, not both. This will require the DSN boards to go through RFP to serve outside their native counties. DDSN will review and evaluate the need to alter the current limitation in the RFP for QPLs to perform either case management or direct services, not both.

Project Search – This is a new program that offers internships at Baptist Easley Hospital to Pickens County students with autism, Down Syndrome and other disabilities.

House Bill 3358 – This bill passed that protects rights of parents with disabilities. This is a step in the right direction for individuals with disabilities.

Think First – Is a national injury prevention foundation that recently received a national award for its efforts. Think First is part of Palmetto Health Injury Prevention that receives prevention grants from DDSN.

Revised Directive – Directive 535-07 has been revised that includes modifications consistent with current law. The draft directive was sent out this morning for public review. DDSN will take feedback on the draft directive prior to finalization.

FOIA – House Bill 3352 passed regarding new FOIA requirements. The bill will have significant implications for some agencies.

Newly Recommended Commissioner – Ms. Lori Unumb has been recommended to serve District 2. Ms. Unumb is scheduled to go before the Senate Medical Affairs Committee Wednesday, May 24, 2017.

### ID/RD Waiver Renewal Status and History

Mrs. Beck provided a summary of the renewal status that was just received this week from DHHS. She spoke of the five major obstacles delaying the renewal process. The waiver was submitted again by DHHS May 3, 2017 and is now on the 90-day clock; however, there is hope that the waiver will be approved before the 90-day timeframe. (Attachment B)

### Waiting List Reduction Efforts

Mrs. Beck gave a brief update on the Waiting List Reduction Efforts. Almost 13,000 individuals have been removed from the waiting list since the onset of the waiting list reduction efforts. She also gave an update on the PDD Waiver stating that enrollment in the waiver has gone down dramatically. Mr. Pat Maley spoke of the efforts to better manage the waiting list which includes a deeper analysis of who is waiting. He added that there is a capacity issue to process individuals in the system. Procedures are being developed to speed up this process. Discussion followed. (Attachment C)

### Advancements to QA Incident Management

Mrs. Beck provided a PowerPoint presentation that gave detailed information of possible personnel actions resulting from provider internal review of ANE allegations, advances in DDSN Incident Management: Reporting Incidents, an example of the reporting process for an adult supported in DDSN residential settings, a recommendation to streamline terminology for increased clarity and transparency, and additional follow-up related to the State Inspector General (SIG) Report Recommendations. Mrs. Beck stated there could be other personnel actions during an investigation for ANE that would warrant action that would not be directly related to the actual ANE investigation. Mrs. Beck also stated that the agency has hired a DDSN Risk Management Coordinator. Mr. Maley gave general comments about the controls in place. Discussion followed. Dr. Buscemi stated that she is uncomfortable with the reliability of the data on disciplinary actions and needs guidance from the Commission with moving forward with disciplinary action. The Commission agreed to have staff collect data on disciplinary actions related to ANE for future reporting. Developing a strategy to measure results was discussed. Dr. Buscemi stated staff would continue to report termination actions in the quarterly reports and work with providers in teasing out terminations in the report. (Attachment D)

### QA Process/Incident Management Reporting

Mrs. Beck provided a detailed presentation of the QA Process and Incident Management Report. Discussion followed as to why allegation rates are increasing. Mrs. Beck provided guidance that the substantiated rates instead of the alleged rates were the most meaningful for analysis. (Attachment E)

### Community Contracts Yearly Comparison

Mr. Waring presented a list of community contracts that were compared on a yearly basis for review and comment. Discussion followed as to whether the Commission should approve contract awards when they increase due to consumer choice of provider. Dr. Buscemi requested that the Commission clarify the expectations of the contract approval process. She advised that denying a contract of a provider in good standing could mean DDSN is violating consumer choice and Medicaid requirements for consumer choice. Chairman Danielson stated the agency would seek the advice from the DDSN General Counsel. (Attachment F)

### Spending Plan Third Quarter Update

Mr. Waring provided an update of the spending plan and a detailed report as to where the agency is on capital improvement/expansion projects along with an analysis of the \$6.6 million funding for the waiting list reduction efforts that has been spent thus far. The agency has met nearly all of its financial goals. Dr. Buscemi stated that the department would not have new funding for waiting list reduction efforts for next fiscal year. There are also recurring costs that are currently funded with one-time funds, such as payment for Intake and State Supported Case Management. (Attachment G)

### Financial Update

Mr. Waring gave an overview of the agency's financial activity through April 30, 2017 and the agency's current financial position. The agency's operating cash balance as of April 30, 2017 is \$63,545,103. The agency is projecting a very small surplus by the fiscal year end. A SCEIS report reflecting budget versus actual expenditures through April 2017 was also provided. (Attachment H)

### Budget Update

Mr. Waring gave an update of the FY 2017-2018 budget request. Both the House and the Senate versions of the appropriation bill include the new \$9 million for the wage increase for the direct care staff. However, there are funding recommendations in other agencies that the two bodies do not agree on and those are being worked out by a budget conference committee. There is no health insurance increase for employees as well as a \$500 projected bonus for state employees making under \$50,000.

### Executive Session

On motion of Commissioner Fayssoux, seconded and passed, the Commission entered into Executive Session to discuss a pending contractual matter with DHHS.

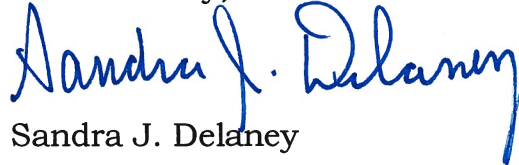
### Enter into Public Session

The Commission entered into Public Session. It was noted that no action was taken in the Executive Session.

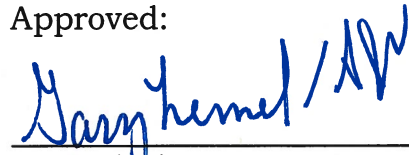
Next Regular Meeting

June 15, 2017 to be held at the Georgetown County DSN Board.

Submitted by,

  
Sandra J. Delaney

Approved:



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Commissioner Gary Lemel  
Secretary



## SC COMMISSION ON DISABILITIES AND SPECIAL NEEDS

## Commission Meeting

May 18, 2017

## Guest Registration Sheet

**(PLEASE PRINT)**

Name and Organization

- |     |                             |                   |
|-----|-----------------------------|-------------------|
| 1.  | Deborah + Heather Mapherson | Richland County   |
| 2.  | Larouyn Olenuel             | Greenville County |
| 3.  | CHUCK NORMAN                | DDSN              |
| 4.  | Melissa Ritter              | DDSN              |
| 5.  | Jessy C Mize                | Oconee DSN        |
| 6.  | Aike Moss                   | Calhoun DSNB      |
| 7.  | Marty Rawls                 | DDSN              |
| 8.  | TIM JUNITA                  | Greenville Newer  |
| 9.  | David Rotholz               | CASC              |
| 10. | Joe White                   | Cherokee Co. DSNB |
| 11. | Shawn Keith                 | Columbus Org      |
| 12. | KEVIN YACOBBI               | DDSN              |
| 13. | Lisa Weeks                  | DDSN              |
| 14. | Stephanie Williams          | Calhoun DSNB      |
| 15. | Bob Jones                   | Newberry DSNB     |
| 16. | Dorothy Goodwin             | Community Options |
| 17. | Thoyd Wager                 | SC DSNB           |
| 18. | Mike Keith                  | Marion-Dillon DSN |
| 19. | Ann Dalton                  | DDSN              |
| 20. | David Goldmintz             | OCD DSNB          |

# SC COMMISSION ON DISABILITIES AND SPECIAL NEEDS

## Commission Meeting

May 18, 2017

### Guest Registration Sheet

**(PLEASE PRINT)**

Name and Organization

- |     |                |                         |
|-----|----------------|-------------------------|
| 21. | Ray Miller     | SCDDC                   |
| 22. | Suzanne Hyman  | Project HOPE Foundation |
| 23. | Shontana Jeff  | KCBDSNB                 |
| 24. | Joyce Davis    | BIASC                   |
| 25. | LINDA LEE      | WCPC - / PADD           |
| 27. | Lorri Unumb    | Autism Speaks           |
| 28. | Dsa-Rson       | CCBOS                   |
| 29. | Bo Dan         | ABDSNB                  |
| 30. | Philip Link    | SC senate.              |
| 31. | Ralph Country  | Aiken Co. Bd. Eds.      |
| 32. | Zenobia Cortez | KCBDSNB                 |
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**SC COMMISSION ON DISABILITIES AND SPECIAL NEEDS**  
**Commission Meeting**  
May 18, 2017

**Guest Registration Sheet**

**(PLEASE PRINT)** Name and Organization

- 1. \_\_\_\_\_
- 2. Sloan Todd Path Finders
- 3. Ronda Ritchie DSSN Dist. II
- 4. Hester Whannemaker DPSN Dist. II
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SC COMMISSION ON DISABILITIES AND SPECIAL NEEDS  
Commission Meeting  
May 18, 2017

**Guest Registration Sheet**

**(PLEASE PRINT)** Name and Organization

- 1. John Hitchman SCODSN
- 2. Della Corneff Henry County DSNB
- 3. Ryan Way Clarendon Co. DSN
- 4. Tally ROGER C/ESCO Services
- 5. Mary Speer Lee Co. DSN Board
- 6. Deborah K. Snow District II Office
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# SC COMMISSION ON DISABILITIES AND SPECIAL NEEDS

## Commission Meeting

May 18, 2017

### Guest Registration Sheet

**(PLEASE PRINT)** Name and Organization

1. Elaine M. Thena PCBDSN

2. Tyler Rex ACDSID

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# SC COMMISSION ON DISABILITIES AND SPECIAL NEEDS

## Commission Meeting

May 18, 2017

### Guest Registration Sheet

**(PLEASE PRINT)**

Name and Organization

1. *Max Able* *Max Abilities of York County*

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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**

**May 18, 2017**

**10:00 A.M.**

1. Call to Order *Chairman Bill Danielson*
2. Welcome - Notice of Meeting Statement *Commissioner Gary Lemel*
3. Invocation *Commissioner Mary Ellen Barnwell*
4. Introduction of Guests
5. Adoption of Agenda
6. Approval of the Minutes of the April 20, 2017 Commission Meeting
7. Public Input
8. Commissioners' Update *Commissioners*
9. Nominating Committee *Chairman Bill Danielson*
10. State Director's Report *Dr. Beverly Buscemi*
11. Business:
  - A. ID/RD Waiver Renewal Status and History *Mrs. Susan Beck*
  - B. Waiting List Reduction Efforts *Mrs. Susan Beck*
  - C. Advancements to QA Incident Management *Dr. Beverly Buscemi*
  - D. QA Process/Incident Management Reporting *Mrs. Susan Beck*
  - E. Community Contracts Yearly Comparison *Mr. Tom Waring*
  - F. Spending Plan Third Quarter Update *Mr. Tom Waring*
  - G. Financial Update *Mr. Tom Waring*
  - H. Budget Update *Mr. Tom Waring*
12. Executive Session
13. Next Regular Meeting (June 15, 2017) – to be held at the Georgetown DSN Board
14. Adjournment

**SCDHHS Intellectual Disability/Related Disabilities (ID/RD) Waiver  
Renewal Process Update**

**Prepared by Mr. Scott Tanner, SC DHHS Director of Operations and Community Options  
Commission Report May 16, 2017**

Below is a description of the five (5) most significant obstacles to renewing the ID/RD waiver in a more expeditious manner.

1. CMS Contractors:

In previous waiver renewals, the CMS team directly handled the majority of the work related to the evaluation of our waiver submissions. Sections of this ID/RD Waiver renewal appear to have been handled mainly by sub-contractors, who may not have been as experienced with the waiver program. They repeatedly posed many questions that served mainly to familiarize them with the state's administrative and operational processes. In addition, many of these questions contained a financial component. As the SCDHHS Ancillary Reimbursement team has very limited capacity, responding quickly to the numerous queries was problematic.

2. Public Notice Process:

After SCDHHS had already completed the public notice process, CMS implemented new guidelines. SCDHHS was required to carry out public notice again according to the new requirements. Preparing for and executing this process takes two to three months.

3. New Federal Regulations:

CMS elected to use the ID/RD renewal's question-and-answer process to track South Carolina's progress in implementing other recent federal regulations. For instance, a number of questions related to the implementation of Person-Centered Planning, Conflict-Free Case Management (CFCM) and the Home and Community Based Services (HCBS) Final Rule.

- While South Carolina was executing the ID/RD renewal, CMS mandated that all states immediately come into compliance with a new CFCM mandate, even though this will be a years-long transition for most states. This issue had not been addressed in the initial SCDHHS submission of the waiver application. To help develop an acceptable model, the state subsequently requested and received Technical Assistance from CMS (through a CMS contractor) for consultation in the development of a plan for a new approach to providing case management services to waiver participants.
- The HCBS Final Rule became effective in 2014. Although the rule gives states until 2019 to develop and implement a CMS-approved statewide transition plan, CMS required that the ID/RD waiver renewal address this process as it relates to its services. While completing the ID/RD renewal, South Carolina became one of the first states to receive preliminary CMS approval for its transition plan.

4. The CMS Review Process:

The CMS waiver renewal process has many opportunities for improvement, especially in relation to technology and its requests for additional information.

5. Post-election Activities:

Immediately following the presidential election, CMS focused exclusively on completing activities that were “on the clock” (having an official deadline). This did not include the ID/RD renewal because CMS had already moved it to the informal process “off the clock.” There was even a period of time in which CMS did not respond to any inquiries whatsoever.

Spring 2017 Update:

SCDHHS received feedback from CMS that they tentatively accepted the responses to their inquiries and requested formal submission of the waiver renewal request. This is a positive sign that CMS is prepared to formally approve the renewal. SCDHHS formally submitted its waiver renewal request on May 3, 2017. CMS has 90 days to provide its approval, however, it’s anticipated CMS approval will be received much more quickly in this instance.

**SC Department of Disabilities and Special Needs**

**Waiting List Reduction Efforts**

As of May 1, 2017 (run on May 3, 2017)

Waiting List	Number of Individuals Removed from Waiting Lists	Consumer/Family Determination		Number of Individuals Services are Pending
		Number of Individuals Enrolled in a Waiver	Number of Individuals Opted for Other Services/ Determined Ineligible	
Intellectual Disability/Related Disabilities (As of July 1, 2014)	1,438 (FY15) 2,109 (FY16) <u>292 (FY17)</u> 3,839	713 (FY15) 1,048 (FY16) <u>198 (FY17)</u> 1,959	534 (FY15) 950 (FY16) <u>66 (FY17)</u> 1,550	45 (FY15) 137 (FY16) <u>148 (FY17)</u> 330
Community Supports (As of July 1, 2014)	2,429 (FY15) 1,838 (FY16) <u>4,112 (FY17)</u> 8,379	698 (FY15) 641 (FY16) <u>942 (FY17)</u> 2,281	1,521 (FY15) 1,047 (FY16) <u>2,046 (FY17)</u> 4,614	14 (FY15) 145 (FY16) <u>1,325 (FY17)</u> 1,484
Head and Spinal Cord Injury (As of Oct 1, 2013)	977	451	330	196
		4,691	6,494	
<b>Total</b>	<b>13,195</b>	<b>11,185</b>		<b>2,010</b>

Waiting List *	Number of Individuals Added Between July 1, 2014 and May 1, 2017	Number of Individuals Waiting as of May 1, 2017
Intellectual Disability/Related Disabilities	6,551 (2,628 since 7/1/16)	7,857
Community Supports	7,520 (3,640 since 7/1/16)	3,118
Head and Spinal Cord Injury	0	0
<b>Total</b>	<b>14,071</b>	<b>10,975</b>

\* There is currently no Head and Spinal Cord Injury (HASCI) Waiver waiting list.

\*\* There are 8,182 unduplicated people on a waiver waiting list. Approximately 25.4 percent of the 10,975 names on the combined waiting lists are duplicates.



**SC Department of Disabilities and Special Needs  
Waiting List Reduction Efforts**

Row #	Total Numbers At Beginning of the Month	2016							2017				
		June	July	August	September	October	November	December	January	February	March	April	May
1	Intellectual Disability/Related Disabilities Waiver Waiting List Total	5,545	5,702	5,815	6,059	6,207	6,362	6,539	6,689	7,099	7,430	7,692	7,857
2	Community Supports Waiver Waiting List Total	3,563	3,028	3,010	2,862	2,788	2,600	2,303	2,418	2,680	3,004	3,025	3,118
3	Head and Spinal Cord Injury Waiting List Total	0	0	0	0	0	0	0	0	0	0	0	0
4	Critical Needs Waiting List Total	137	149	160	147	131	136	136	121	130	117	123	129
5	Total Number <u>Added</u> to the ID/RD, HASCI, and CS Waiting Lists	456	452	346	615	553	450	512	558	1,111	993	859	511
6	Total Number <u>Removed</u> from the ID/RD, HASCI, and CS Waiting Lists	394	830	251	596	381	484	632	293	439	338	576	253
7	Number of Individuals Enrolled in a Waiver by Month	126	139	119	125	128	92	143	97	160	138	137	117
8	Number of Individuals Opted for Other Services/Determined Ineligible by Month	74	103	634	259	182	247	320	121	176	77	106	25
9	Total Number of Individuals Removed from Waiting Lists (Running Total)	8,676	9,412	9,650	10,154	10,667	10,934	11,550	11,822	12,210	12,497	12,947	13,195
10	Total Number of Individuals Pending Waiver Services (Running Total)	1,736	2,084	1,999	2,059	2,251	2,220	2,396	2,341	2,247	2,111	2,132	2,010
11	Total Unduplicated Individuals on the Waiver Waiting Lists (*Approximate)	6,148	6,129	6,246	6,425	6,588	6,663	6,824	6,996	7,409	7,827	8,011	8,182

\*\* There are 8,182 unduplicated people on a waiver waiting list. Approximately 25.4 percent of the 10,975 names on the combined waiting lists are duplicates.

**PDD Waiting List Information**

12	PDD Program Waiting List Total	1,653	1,639	1,630	1,607	1,596	1,583	1,539	1,514	1,443	1,397	1,317	1,259
13	Total Number <u>Added</u> to the PDD Waiting List	34	62	44	50	44	38	22	53	26	18	20	19
14	Total Number <u>Removed</u> from the PDD Waiting List	60	76	53	73	55	51	66	78	97	64	100	77
15	Number of Individuals Enrolled in the PDD <u>State Funded</u> Program by Month	253	241	227	214	206	190	184	189	195	191	182	159
16	Number of Individuals Pending Enrollment in the PDD Waiver by Month	110	137	143	164	169	181	202	221	239	240	271	282
17	Number of Individuals Enrolled in the PDD Waiver by Month	656	631	625	605	591	573	555	536	518	502	484	478

Updated 4/1/2017

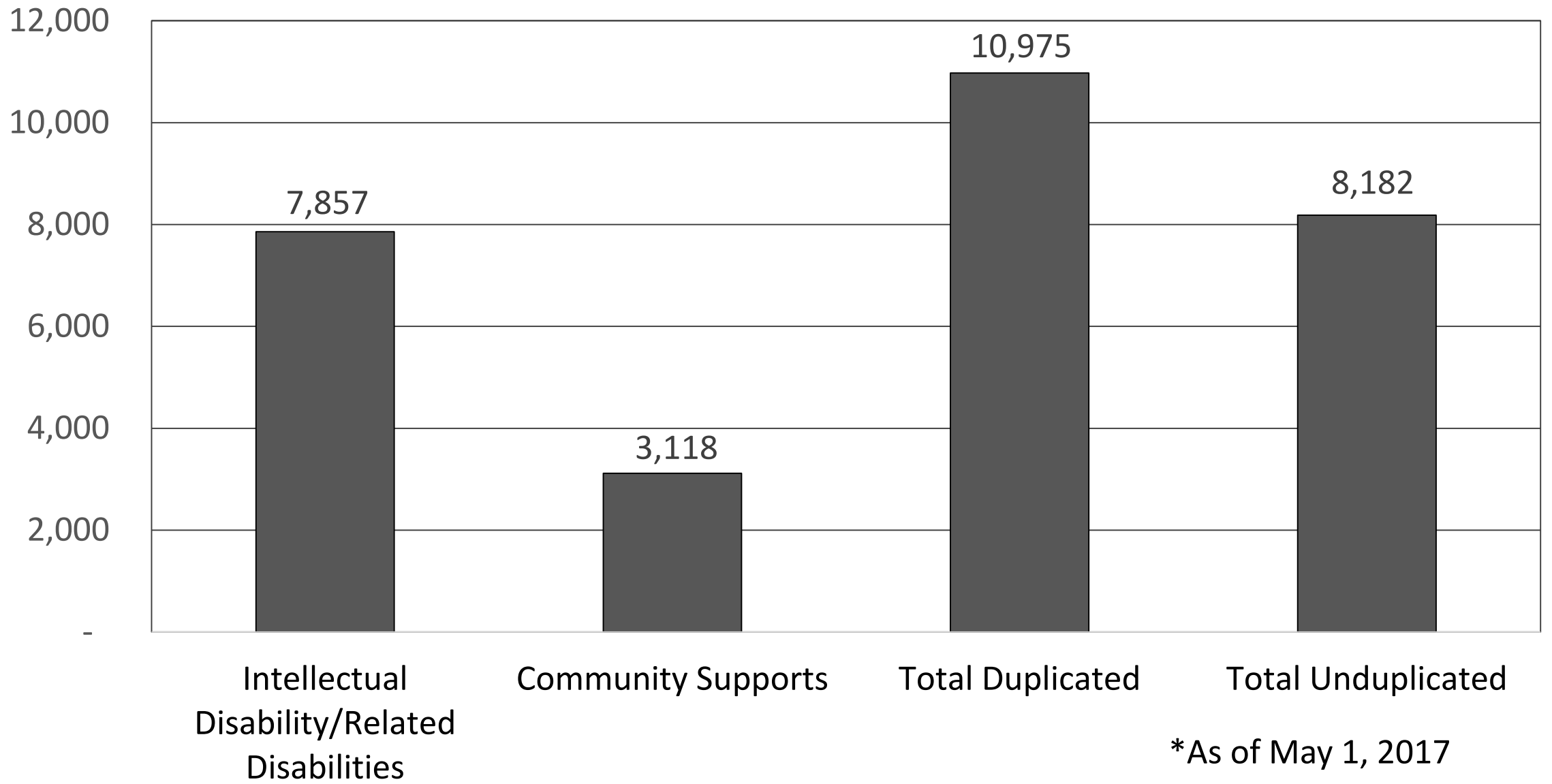
**South Carolina Department Of Disabilities & Special Needs**  
**As Of April 30, 2017**

<b>Service List</b>	<b>03/31/17</b>	<b>Added</b>	<b>Removed</b>	<b>04/30/17</b>
Critical Needs	123	30	24	129
Pervasive Developmental Disorder Program	1317	19	77	1259
Intellectual Disability and Related Disabilities Waiver	7692	203	38	7857
Community Supports Waiver	3025	293	200	3118
Head and Spinal Cord Injury Waiver	0	15	15	0

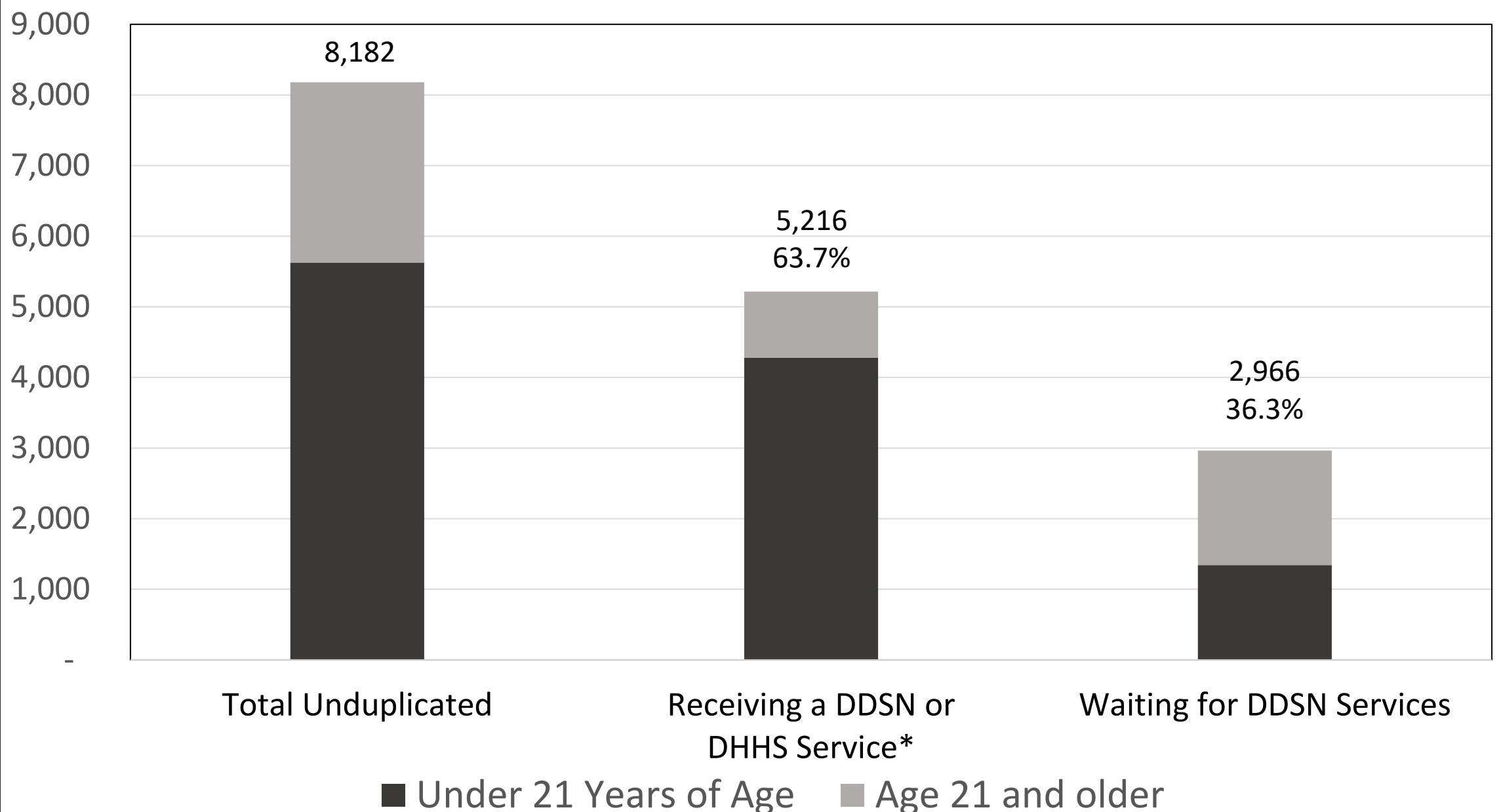
Report Date: 5/4/17

# SC Department of Disabilities and Special Needs

## Intellectual Disability/Related Disabilities and Community Supports Waiver Waiting List Numbers



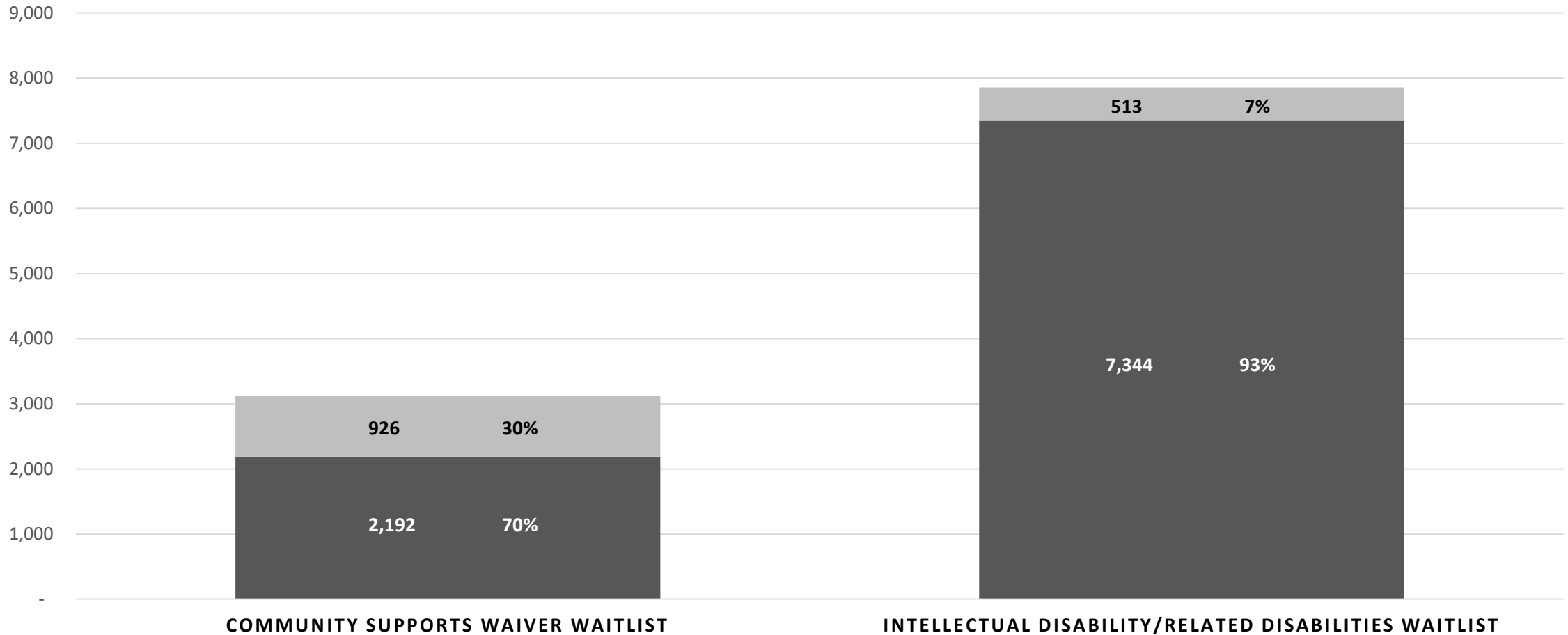
## Additional Analysis of the Number of Individuals Waiting for DDSN Services



\*These services may include: DDSN Family Support Funding, DDSN Family Arranged Respite Funding, and/or Medicaid Services such as prescriptions, personal care, nursing, incontinence supplies, dental, vision, medically necessary Durable Medical Equipment services, etc.

\*As of May 1, 2017

# PERCENT OF INDIVIDUALS ON A WAIVER WAITING LIST PREVIOUSLY OFFERED A WAIVER SLOT



- Individuals have been offered a slot in the indicated Waiver since July 2014. Individual declined the Waiver slot, did not complete the process or was enrolled and later disenrolled and then requested to be placed on the waiting list again.
- Individuals have not been offered a slot in indicated Waiver since July 2014.



**Pervasive Developmental Disorder (PDD) Waiver Status Update**  
**Prepared by Mr. Scott Tanner, SCDHHS Director of Operations and Community Options**  
**Commission Report**  
**May 16, 2017**

The following details have been tentatively approved by CMS:

The PDD Waiver will be terminated on December 31, 2017

SCDHHS plans to increase PDD Waiver service rates to be comparable to the State Plan ASD service rates to prevent the need for providers to move their beneficiaries to receive higher rates.

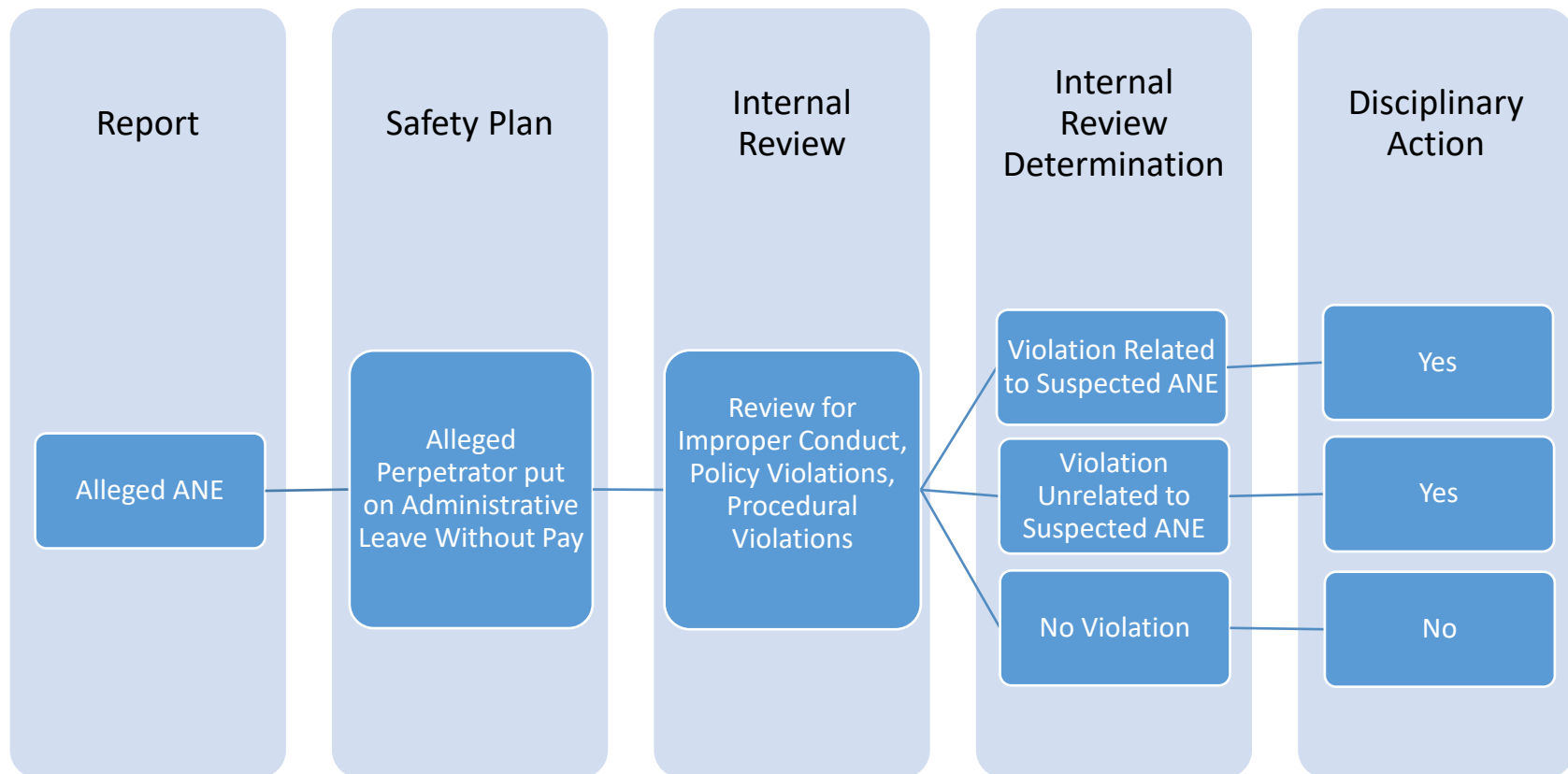
SCDHHS has developed an approach to transition current beneficiaries from the PDD Waiver to State Plan ASD in an orderly fashion over a six-month period beginning in July 2017.

SCDHHS is developing communications to be issued to the many stakeholder groups describing the termination plan as it relates to them in more detail.

The PDD Waiver Transition Plan will be officially approved by CMS as part of the PDD Waiver renewal process.

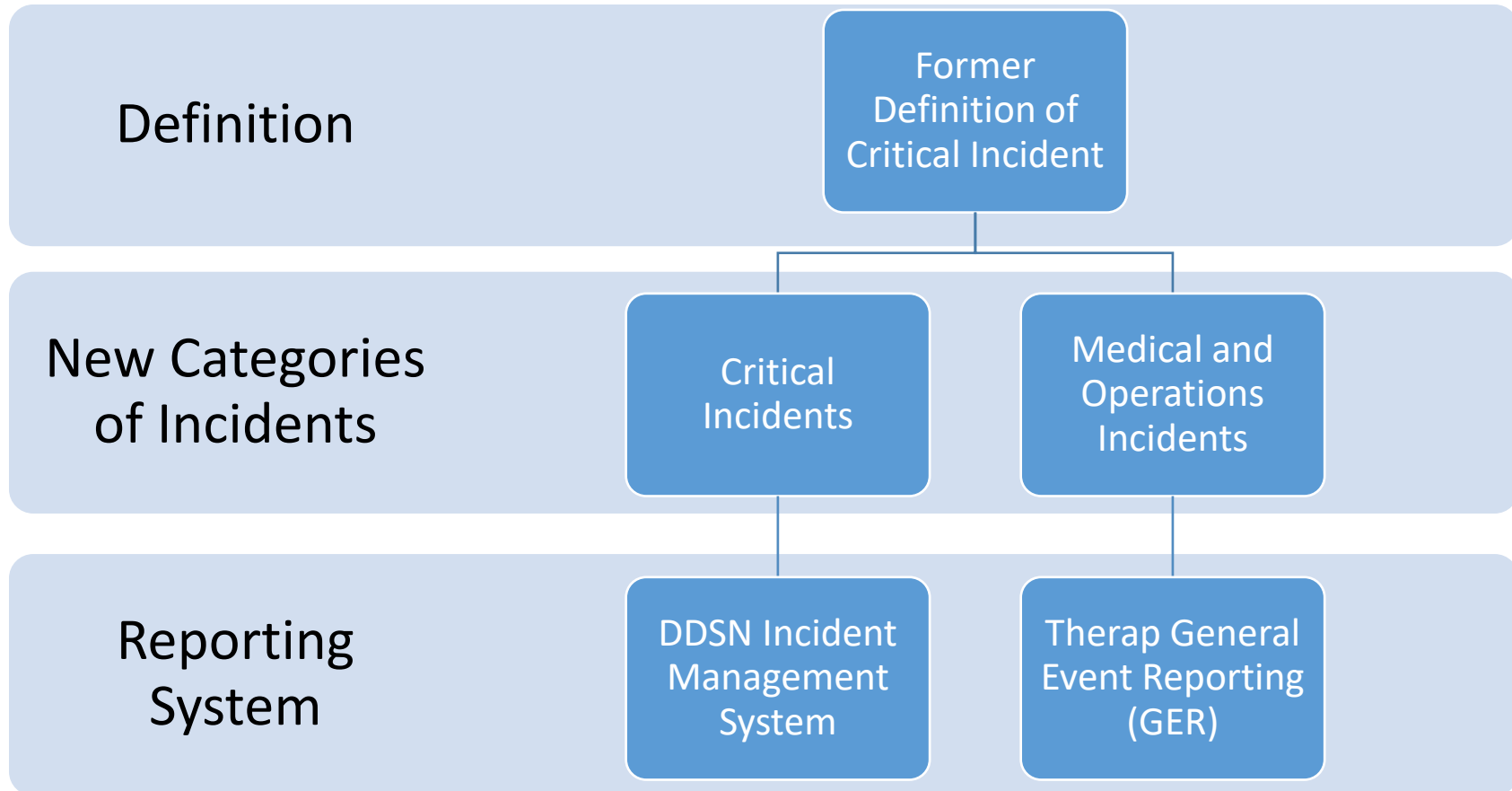
The PDD Waiver Renewal was submitted on Friday, May 5, 2017.

## Possible Personnel Actions Resulting from Provider Internal Review of ANE Allegations



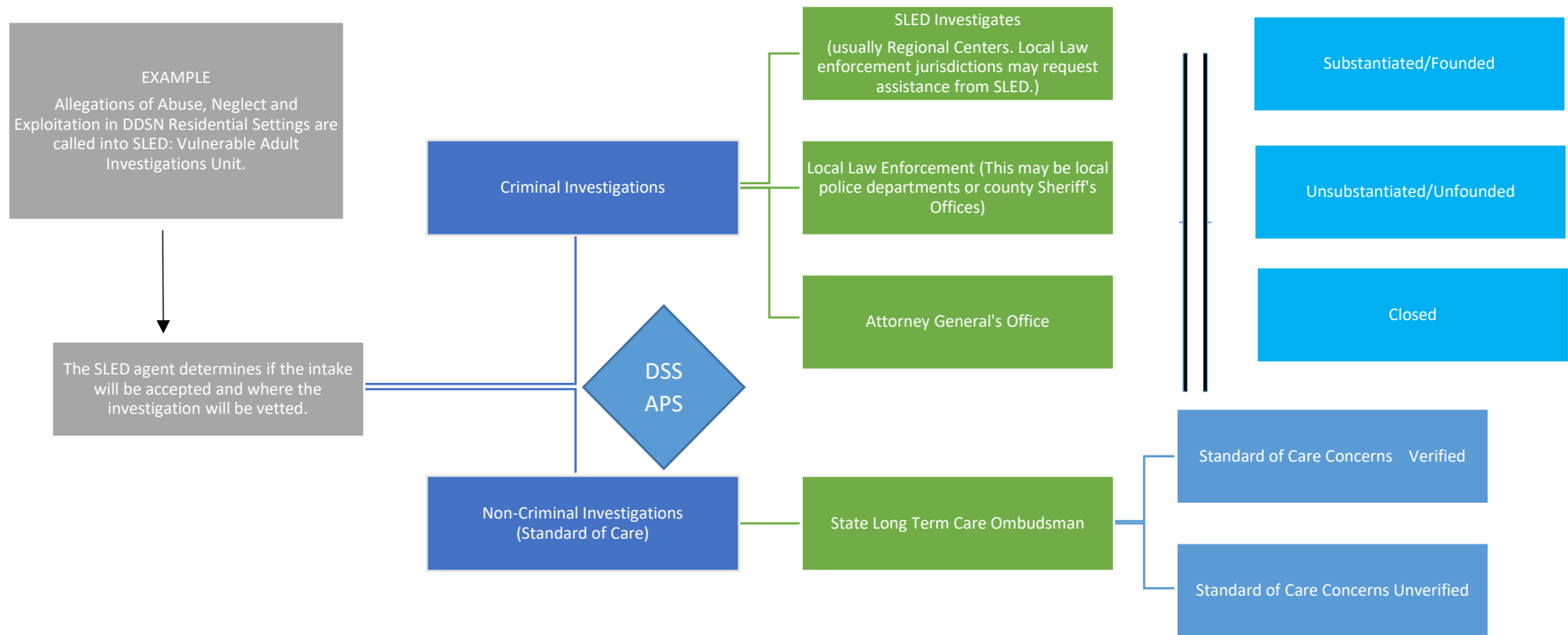
- This provider review process is completely separate from the investigative entity's (SLED, DSS, AG, LLE, SLTCO) investigation of the ANE allegation.
- Personnel actions may result from the provider's internal review but not be related to the allegation of ANE.
- Examples of disciplinary action may include: termination, resignation, written warning, verbal counseling, suspension, or other appropriate action.

## Advances in DDSN Incident Management: Reporting Incidents



- The Commission approved separating Medical and Operations Incidents from Critical Incidents in February 2017.
- The anticipated availability of the Therap GER module will be the first quarter of FY 2017-2018.

## An Example of the Reporting Process for an Adult Supported in DDSN Residential Settings

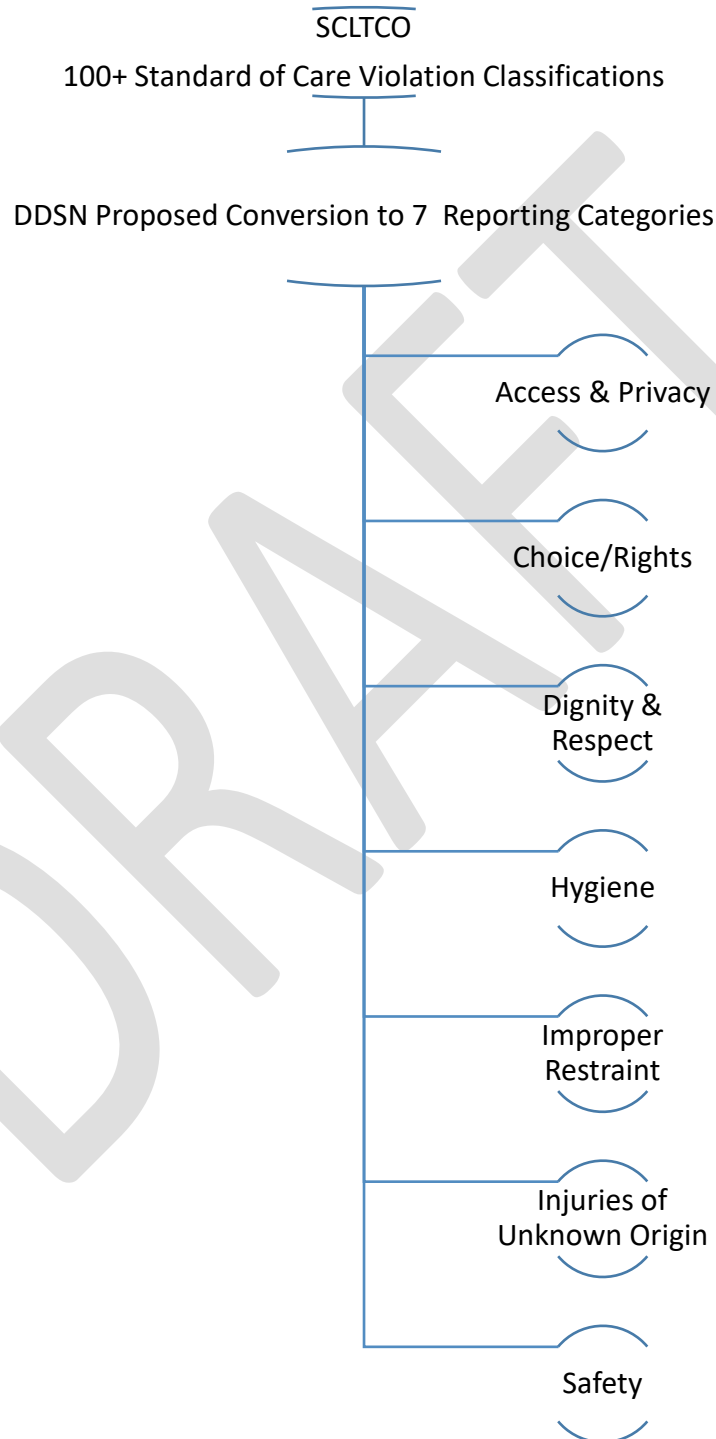


- When a law enforcement investigation leads to an arrest or when DSS determines that an allegation is "founded," DDSN requires the termination of the staff. DDSN currently records the allegation as "substantiated" at the time of arrest.
- Standard of Care Allegations may include non-criminal findings related to resident care, safety, hygiene, privacy, respect, rights, access, restraint, injuries of unknown origin. If the Ombudsman Investigator suspects Abuse, Neglect or Exploitation, they must refer the case back to SLED.
- When the alleged incident took place in a community setting (non-residential) or at a day program, DSS is the investigative entity.

**SC Department of Disabilities and Special Needs  
2016 SC State Inspector General (SIG) Recommendation to Streamline  
Terminology for Increased Clarity and Transparency**

DDSN convened a work group focused on recommendations from the 2016 SIG Report. This active group consists of leadership from SLED, the SC Long Term Care Ombudsman (SCLTOC), DMH, DHHS and DSS. A subgroup focused on the recommendation to simplify reporting of outcomes since each entity utilizes different classifications (i.e., verified, unverified, substantiated, unsubstantiated, founded, unfounded).

Various reporting requirements at the state and federal level prohibit creation of a common classification system. It was determined that DDSN could develop a classification system to crosswalk entity terms. As the figure below indicates, DDSN proposes condensing the 100+ Standard of Care Violations used by the SCLTCO due to federal requirements into 7 representative reporting categories.



**SC Department of Disabilities and Special Needs**  
**Additional Follow-Up Related to State Inspector General (SIG) Report Recommendations**

**DDSN Risk Management Coordinator and Review of Negative Outcomes**

Per the SIG Report Recommendations, DDSN has begun reviewing ANE cases that have been substantiated and those involving instances in which there has been a significant negative outcome. DDSN's Risk Management Coordinator, within the Division of Quality Management, will be completing a more comprehensive, retrospective review of all of the available documentation to look at preventive strategies and what went wrong in the particular situation. This review will be completed after law enforcement has completed their investigation and staff are able to make contact with the consumer and any witnesses. The Risk Management Coordinator has a law enforcement credential and prior investigative experience, as well as long-term care experience.

**Additional In-Depth Review of Critical Incidents and Death Reports**

In addition, we are analyzing critical incidents and death reports more closely to help providers identify trends in reports and target prevention efforts. Death reports will continue to be DDSN Incident Management staff and reviewed by DDSN's Medical Director in addition to the multi-disciplinary Vulnerable Adult Fatality Review Committee that is comprised of multiple state agency and investigative representatives.

**Prevention**

As a prevention/ quality improvement strategy, DDSN is exploring the possibility of using a Learning Management System to include ANE training as well as other topics required for the agency's provider network. This would ensure consistency in the materials used, topics covered, and provide accountability to ensure staff were trained and met competency testing requirements.



# SCDDSN Incident Management Review Summary

May 2017

## ABUSE, NEGLECT, AND EXPLOITATION REPORTING

DDSN has a comprehensive system for collecting data related to abuse, neglect exploitation or other critical incidents. This review covers reporting within the appropriate time frames, completion of internal reviews, and a review of the provider's management action taken, staff training, risk management and quality assurance activities to provide safeguards for the consumers.

- DDSN follows the procedures for reporting allegations of Abuse, Neglect, and Exploitation according to the procedures outlined in the SC Code of Law for Adult/ Child Protective services and the Omnibus Adult Protection Act. The agency also has a system to capture reports of other critical incidents that do not meet the definitions of an abuse, neglect or exploitation allegation.
- Per 534-02-DD, for all allegations of abuse, neglect or exploitation, the alleged perpetrator must be immediately placed on Administrative Leave Without Pay. Based on the outcome of the internal review for improper conduct and any policy or procedural violations, the provider agency may take appropriate disciplinary action consistent with their human resource policies. Allegations substantiated by SLED, Local Law Enforcement or DSS must result in termination of the employee.

## Tracking and Trending Data

DDSN tracks, trends, and analyzes all Incident Management data through statewide and provider-level profile reports. These reports provide raw data with regard to the number of reports made and cases substantiated and also gives a rate per 100 ratio. As an additional measure, the reports breakdown the types of abuse cases within the provider agency and the number of each type of report. A listing of the top four types of reports for the provider and the state as a whole is given for additional comparison. The rate per 100 information is especially useful in providing a comparative analysis among agencies.

- Over the past 5 years, the number of statewide ANE Allegations per 100 individuals in residential services has dropped from a high of 11.5 to a low of 8.8 in FY14. For FY16, the rate per 100 was 10.0. For the first three quarters of FY17, the rate per 100 is 7.9.
- The rate of substantiated abuse per 100 individuals in residential services remains under .25. For the first three quarters of FY17, the rate per 100 is 0.15.
- The number of ANE Allegations per 100 individuals in day services remains low. For FY16, the rate was .72. For the first three quarters of FY17, the rate per 100 is 0.83. One case has been substantiated each year.

## DDSN Review

DDSN has staff dedicated to the review of statewide incident management data. All reports are reviewed for completeness and consistency and to ensure appropriate disciplinary actions, recommendations for training and additional quality management actions to prevent recurrence. Staff ensure reporting procedures are consistent with DDSN policy. Reports are also tracked for various details, including the number of reports, by type, for each provider and other characteristics.

Examples of provider training recommendations and/ QM efforts include the following:

- ✓ Increased staffing to support consumers in day or residential locations or on community outings
- ✓ Development of new/revised policies
- ✓ Additional/ refresher MANDT or crisis intervention training for staff
- ✓ Sensitivity training
- ✓ Appropriate use of restraints
- ✓ Rights/ due process
- ✓ Sign language
- ✓ Revision of supervision plans/ behavior support
- ✓ Evaluation of assistive technology

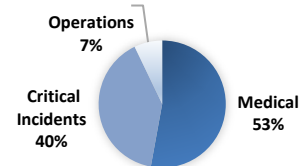
## CRITICAL INCIDENT REPORTING

A Critical Incident is defined as an unusual, unfavorable occurrence that is not consistent with routine operations; has harmful or otherwise negative effects involving people with disabilities, employees, or property; and occurs during the direct provision of DDSN service.

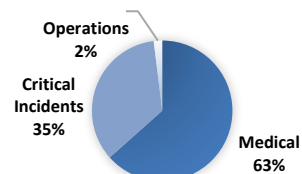
It is also important to remember that Critical Incident numbers are not unduplicated numbers. Critical Incident categories are selected by the reporter and more than one category may be selected for an incident. For example, a van accident would be reported under Motor Vehicle Accidents, but it may also involve injuries and possibly Major Medical. Aggression between 2 consumers may result in Law Enforcement involvement and a report of injuries. With the continued implementation of Therap, DDSN will consider documentation requirements for different types of incidents.

- Statewide, about 15 – 20% of our service population will have a critical Incident of some type each year. The numbers are higher for the Regional Centers due to the medically complex needs and/or behavioral challenges presented by some residents.
- For the past two years, approximately 50% of all critical incidents were related to major medical or hospitalization related reports. This trend continues in FY17 (53%), as DDSN distinguishes medical events from other types of critical incident reports. In the Regional Centers, medical events make up 63% of Critical Incident Reports.
  - The majority of incidents reported to DDSN are for medical issues, accidents, and injuries. Major medical incidents have been steadily increasing, but this is largely impacted by our agency's aging population and increasing medical needs. DDSN will change the reporting process for these incidents in July 2017.
  - There have been more people admitted to the hospital for flu, pneumonia or other respiratory infections, an increase in consumers receiving Hospice care in their DDSN home as opposed to a nursing home, and other medical conditions typically associated with older adults.

**INCIDENTS BY TYPE-COMMUNITY SETTINGS- FY17 (THRU 3/31/2107)**



**INCIDENTS BY TYPE- REGIONAL CENTERS FY17 (THRU 3/31/17)**



**SCDDSN Incident Management Report for FY16/17 (Community Residential, Day Service, and Regional Centers) Thru 3/31/17.**

**Allegations of Abuse/Neglect/Exploitation**

<b>Community Residential</b>	<b>APRIL</b>	<b>MAY</b>	<b>JUNE</b>	<b>JULY</b>	<b>AUGUST</b>	<b>SEPTEMBER</b>	<b>OCTOBER</b>	<b>NOVEMBER</b>	<b>DECEMBER</b>	<b>JANUARY</b>	<b>FEBRUARY</b>	<b>MARCH</b>
<b># of ANE Allegations</b>	56	39	50	30	54	50	38	36	38	43	50	33
<b># ANE Allegations Substantiated</b>	0	0	0	0	0	1	0	0	0	4	0	2
<b># of Staff Terminated for policy and/or procedural violations or employee misconduct (not all terminations are specifically related to allegation of ANE)</b>	3	5	3	3	10	8	12	1	5	8	8	6
<b>Day Services</b>	<b>APRIL</b>	<b>MAY</b>	<b>JUNE</b>	<b>JULY</b>	<b>AUGUST</b>	<b>SEPTEMBER</b>	<b>OCTOBER</b>	<b>NOVEMBER</b>	<b>DECEMBER</b>	<b>JANUARY</b>	<b>FEBRUARY</b>	<b>MARCH</b>
<b># of ANE Allegations</b>	5	2	8	10	7	6	4	8	3	3	24	2
<b># ANE Allegations Substantiated</b>	1	0	0	0	0	0	0	0	1	0	0	0
<b># of Staff Terminated for policy and/or procedural violations or employee misconduct (not all terminations are specifically related to allegation of ANE)</b>	1	1	2	1	3	5	0	1	2	1	0	0
<b>Regional Centers</b>	<b>APRIL</b>	<b>MAY</b>	<b>JUNE</b>	<b>JULY</b>	<b>AUGUST</b>	<b>SEPTEMBER</b>	<b>OCTOBER</b>	<b>NOVEMBER</b>	<b>DECEMBER</b>	<b>JANUARY</b>	<b>FEBRUARY</b>	<b>MARCH</b>
<b># of ANE Allegations</b>	8	6	21	13	8	17	13	11	10	24	7	8
<b># ANE Allegations Substantiated</b>	0	0	0	0	0	1	0	0	0	0	0	0
<b># of Staff Terminated for policy and/or procedural violations or employee misconduct (not all terminations are specifically related to allegation of ANE)</b>	0	2	3	1	0	3	5	0	3	3	1	1

## Critical Incident Reporting

	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH
# of Reports for Critical Incidents in community-based residential programs	117	125	98	136	105	123	131	109	118	134	145	123
# of Reports for Critical Incidents in Day Service Settings	22	19	18	31	22	13	18	10	14	8	14	9
# of Critical Incidents Reported by other service areas	-	-	-	23	12	6	14	25	8	7	0	0
# of total Incidents reported	-	-	-	190	139	142	163	144	140	149	159	132
Medical Events reported to DDSN through the Critical Incident	-	-	-	106 (56%)	83 (60%)	94 (66%)	93 (57%)	94 (65%)	99 (71%)	105 (70%)	108 (68%)	77 (58%)
Behavioral Incidents	-	-	-	63 (33%)	44 (32%)	37 (26%)	51 (31%)	37 (26%)	27 (19%)	40 (27%)	41 (26%)	39 (30%)
Operations related Incidents	-	-	-	21 (11%)	12 (8%)	11 (8%)	19 (12%)	13 (9%)	14 (10%)	4 (3%)	10 (6%)	16 (12%)
# of Critical Incidents Reported- Regional Centers	21	30	23	33	25	30	26	30	30	26	20	32
Medical Events reported to DDSN through the Critical Incident	-	-	-	24 (73%)	18 (72%)	24 (80%)	19 (73%)	27 (90%)	28 (93%)	21 (81%)	19 (99.5%)	22 (69%)
Behavioral Incidents	-	-	-	8 (24%)	5 (20%)	6 (20%)	5 (19%)	2 (7%)	2 (7%)	5 (19%)	1 (.5%)	10 (31%)
Operations related Incidents	-	-	-	1 (3%)	2 (8%)	0	2 (8%)	1 (3%)	0	0	0	0

\*Medical Events reported to DDSN through the Critical Incident Reporting Process. May include Hospital Admissions > 3 days, Major Medical Events (Cardiac, uncontrolled seizures), Choking events, accidents causing injury, falls, etc...) or 2 or more ER visits in 30 days.

\*\* Critical Incidents reflected in this chart include events that involve all aspects of DDSN Service, including those outside of Residential and Day Services. Not all incidents reported include consumers.

## Death Reporting

	APRIL	MAY	JUNE	July	Aug	Sept	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH
# of Deaths Reported- Community Residential	5	5	5	5	7	10	9	6	2	3	7	8
# of Deaths Reported- Regional Centers	1	0	3	0	3	1	0	4	3	1	1	5

**SCDDSN Incident Management Report 5 year trend data**  
**(Community Residential, Day Service, and Regional Centers) Thru 3/31/17.**

**Allegations of Abuse/Neglect/Exploitation**

<b>Community Residential</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017 (thru Q3)</b>
# of ANE Allegations	492	383	437	459	372
Rate per 100	11.5	8.8	9.9	10	7.89
# ANE Allegations Substantiated	1	12	7	4	7
# of Staff Terminated for policy and/or procedural violations or employee misconduct (not all disciplinary action is specifically related to the allegation of ANE)	92 (Day & Res.)	65	74	65	61
<b>Day Services</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017 (thru Q3)</b>
# of ANE Allegations	61	73	65	58	67
Rate per 100	0.82	0.97	0.84	0.72	0.83
# ANE Allegations Substantiated	2	4	4	1	1
# of Staff Terminated for policy and/or procedural violations or employee misconduct (not all disciplinary action is specifically related to the allegation of ANE)	92 (Day & Res.)	14	9	17	13
<b>Regional Centers</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017 (thru Q3)</b>
# of ANE Allegations	111	167	102	110	122
Rate per 100	13.6	22.1	13.5	15.4	17.1
# ANE Allegations Substantiated	1	0	0	2	1
# of Staff Terminated for policy and/or procedural violations or employee misconduct (not all disciplinary action is specifically related to the allegation of ANE)	21	17	16	24	17

<b>Critical Incident Reporting</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017 (thru Q3)</b>
# of Reports for Critical Incidents for participants in Community Day & Residential Settings including medical events and business-operations events that require follow-up. *	1338	1277	1385	1663	1358
<b>Rate per 100</b>	16.9	15.8	16.8	19.2	15.3
# of Reports for Critical Incidents for participants in Regional Centers, including medical events and business-operations events that require follow-up. *	248	224	241	287	252
<b>Rate per 100</b>	31.2	29.6	32	40.1	35.2
<b>Death Reporting</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017 (thru Q3)</b>
# of Deaths Reported- Community Settings	68	59	65	63	57
<b>Rate per 100</b>	1.6	1.4	1.8	1.4	1.2
# of Deaths Reported- Regional Centers	20	31	31	26	18
<b>Rate per 100</b>	2.5	4	4.1	3.6	2.2

\* Critical Incident numbers in this chart reflect events that directly affect DDSN consumers. Not all incidents currently reported as a critical incident include consumers.

# SCDDSN INCIDENT MANAGEMENT REPORTING

## ANE Reports- Disciplinary Action Taken

Per 534-02-DD, for all allegations of abuse, neglect or exploitation, the alleged perpetrator must be immediately placed on Administrative Leave Without Pay. Based on the outcome of the internal review for improper conduct and any policy or procedural violations, the provider agency may take appropriate disciplinary action consistent with their human resource policies. Allegations substantiated by SLED, Local Law Enforcement or DSS must result in termination of the employee.

Disciplinary actions for DDSN and its provider agency personnel have been summarized based on actions documented by the provider in the Incident Management System. The accuracy and completeness of this data depends on the voluntary provider reporting of employee disciplinary action. Additionally, disciplinary action taken as a result of internal reviews may not be directly related to the suspected ANE.

<b>Community Residential &amp; Day</b>	<b>FY14</b>	<b>FY15</b>	<b>FY16</b>	<b>FY17 (thru Q3)</b>
Termination	79	83	82	74
Resignation	1	7	7	16
Written Warning	15	39	10	10
Verbal Counseling	6	7	15	3
Suspension	5	17	10	9
Other disciplinary action	11	47	26	22

<b>Regional Centers</b>	<b>FY14</b>	<b>FY15</b>	<b>FY16</b>	<b>FY17 (thru Q3)</b>
Termination	17	16	24	16
Written Warning	4	13	4	1
Suspension	1	4	1	1
Other disciplinary action	3	19	12	5



**Total Contract Amount By Provider  
Fiscal Year Comparison**

PROVIDER			NET CHANGE		NET CHANGE		NET CHANGE	
	FY2014	FY2015	FY14-FY15	FY2016	FY15-FY16	FY2017	FY16-FY17	
About Play	\$ -	\$ 109,760	\$ 109,760	\$ 555,562	\$ 445,802	\$ 539,838	\$ (15,724)	
Aging with Flair	\$ 992,788	\$ 1,128,720	\$ 135,932	\$ 691,511	\$ (437,209)	\$ 674,797	\$ (16,714)	
Ahead Start	\$ 909,400	\$ 1,305,200	\$ 395,800	\$ 1,688,870	\$ 383,670	\$ 1,574,527	\$ (114,343)	
Aiken	\$ 13,038,365	\$ 17,152,384	\$ 4,114,019	\$ 6,134,750	\$ (11,017,634)	\$ 461,708	\$ (5,673,042)	
Aldersgate	\$ 194,152	\$ 260,190	\$ 66,038	\$ 412,651	\$ 152,461	\$ 764,713	\$ 352,061	
All About Children	\$ -	\$ 12,006	\$ 12,006	\$ 266,021	\$ 254,015	\$ 247,426	\$ (18,595)	
Allendale-Barnwell	\$ 5,670,649	\$ 6,518,494	\$ 847,845	\$ 6,674,752	\$ 156,258	\$ 6,712,166	\$ 37,414	
Anderson	\$ 7,440,270	\$ 8,763,535	\$ 1,323,265	\$ 8,683,356	\$ (80,179)	\$ 9,356,347	\$ 672,991	
Arc of The Midlands	\$ -	\$ 108,935	\$ 108,935	\$ 113,653	\$ 4,718	\$ 454,518	\$ 340,866	
Arc of South Carolina	\$ 42,000	\$ 128,022	\$ 86,022	\$ 156,042	\$ 28,020	\$ 45,703	\$ (110,339)	
Autism Academy of SC	\$ -	\$ 600,000	\$ 600,000	\$ 93,000	\$ (507,000)	\$ -	\$ (93,000)	
Awesome Kids	\$ 9,288	\$ 44,800	\$ 35,512	\$ 43,805	\$ (995)	\$ 40,488	\$ (3,317)	
Babcock	\$ 27,837,449	\$ 33,756,739	\$ 5,919,290	\$ 35,133,203	\$ 1,376,464	\$ 37,075,365	\$ 1,942,162	
Bamberg	\$ 2,316,812	\$ 2,899,401	\$ 582,589	\$ 3,010,792	\$ 111,391	\$ 2,765,137	\$ (245,655)	
Beaufort	\$ 4,206,833	\$ 5,651,224	\$ 1,444,391	\$ 5,599,314	\$ (51,910)	\$ 5,974,821	\$ 375,507	
Berkeley	\$ 8,038,850	\$ 9,690,952	\$ 1,652,102	\$ 9,780,330	\$ 89,378	\$ 10,069,300	\$ 288,970	
Beyon El (Beyond Play)	\$ -	\$ 199,068	\$ 199,068	\$ 492,671	\$ 293,603	\$ 449,865	\$ (42,806)	
Brain Injury Association	\$ 67,500	\$ 67,500	\$ -	\$ 66,500	\$ (1,000)	\$ 63,500	\$ (3,000)	
Bright Start	\$ 2,622,746	\$ 3,275,528	\$ 652,782	\$ 3,523,733	\$ 248,205	\$ 3,268,784	\$ (254,949)	
Brilliant Beginnings	\$ 434,187	\$ 392,130	\$ (42,057)	\$ 412,377	\$ 20,247	\$ 382,385	\$ (29,992)	
Burton Center	\$ 13,027,850	\$ 15,355,921	\$ 2,328,071	\$ 14,458,262	\$ (897,659)	\$ 14,431,086	\$ (27,176)	
Calhoun	\$ 4,667,003	\$ 5,396,085	\$ 729,082	\$ 5,363,750	\$ (32,335)	\$ 5,501,140	\$ 137,390	
CareFocus	\$ 2,442,354	\$ 2,901,491	\$ 459,137	\$ 2,843,802	\$ (57,689)	\$ 3,576,776	\$ 732,975	
Carolina Behavior/Bey	\$ 381,601	\$ 517,700	\$ 136,099	\$ 550,333	\$ 32,633	\$ 494,851	\$ (55,482)	
Carolina Family Services	\$ -	\$ -	\$ -	\$ 4,460	\$ 4,460	\$ 17,840	\$ 13,380	
Carolinas Rehab	\$ 890,000	\$ 500,000	\$ (390,000)	\$ 450,000	\$ (50,000)	\$ 815,000	\$ 365,000	
Channel the Beacon	\$ 2,200	\$ 7,017	\$ 4,817	\$ 6,961	\$ (56)	\$ -	\$ (6,961)	
Charles Lea	\$ 19,796,673	\$ 24,682,708	\$ 4,886,035	\$ 27,395,456	\$ 2,712,748	\$ 28,855,426	\$ 1,459,970	
Charleston	\$ 17,559,814	\$ 21,196,822	\$ 3,637,008	\$ 20,758,000	\$ (438,822)	\$ 21,374,998	\$ 616,998	
Children's Trust Fund	\$ 9,000	\$ 5,000	\$ (4,000)	\$ 5,000	\$ -	\$ 5,000	\$ -	
Cherokee	\$ 3,184,298	\$ 3,893,204	\$ 708,906	\$ 3,945,724	\$ 52,520	\$ 4,062,325	\$ 116,601	
Chesco	\$ 15,879,730	\$ 18,170,526	\$ 2,290,796	\$ 17,412,804	\$ (757,722)	\$ 18,109,725	\$ 696,921	
Chester/Lancaster	\$ 5,304,948	\$ 6,417,236	\$ 1,112,288	\$ 6,531,924	\$ 114,688	\$ 6,475,363	\$ (56,561)	
City of Myrtle Beach	\$ -	\$ 200,000	\$ 200,000	\$ 100,000	\$ (100,000)	\$ -	\$ (100,000)	
Clarendon	\$ 4,781,393	\$ 5,713,754	\$ 932,361	\$ 5,640,880	\$ (72,874)	\$ 5,610,059	\$ (30,821)	
Clear Vision	\$ -	\$ 3,385	\$ 3,385	\$ 2,322	\$ (1,063)	\$ 24	\$ (2,298)	
Clemson University	\$ -	\$ -	\$ -	\$ 200,000	\$ 200,000	\$ -	\$ (200,000)	
Coastal Early Intervention	\$ 27,451	\$ 223,690	\$ 196,239	\$ 223,978	\$ 288	\$ 213,686	\$ (10,292)	
Colleton	\$ 3,922,675	\$ 4,648,727	\$ 726,052	\$ 4,758,367	\$ 109,640	\$ 5,021,195	\$ 262,828	
Community Options	\$ 3,445,356	\$ 4,853,257	\$ 1,407,901	\$ 6,657,450	\$ 1,804,193	\$ 8,678,556	\$ 2,021,106	
Cornerstone Support	\$ -	\$ 17,360	\$ 17,360	\$ 187,551	\$ 170,191	\$ 175,447	\$ (12,104)	
Creative Development	\$ 114,861	\$ 116,980	\$ 2,119	\$ 71,729	\$ (45,251)	\$ 67,480	\$ (4,249)	
Darlington	\$ 3,925,772	\$ 4,710,997	\$ 785,225	\$ 4,430,336	\$ (280,661)	\$ 4,690,515	\$ 260,179	
DSN Advocates	\$ -	\$ 1,635	\$ 1,635	\$ 3,361	\$ 1,726	\$ 130	\$ (3,231)	
Dorchester	\$ 8,516,566	\$ 10,318,047	\$ 1,801,481	\$ 9,934,559	\$ (383,488)	\$ 10,393,465	\$ 458,906	
Easter Seals	\$ 2,782,085	\$ 1,697,950	\$ (1,084,135)	\$ 1,796,900	\$ 98,950	\$ 1,686,993	\$ (109,907)	
ECM Consulting	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 11,088	\$ 11,088	
Epworth	\$ 103,776	\$ 106,322	\$ 2,546	\$ 108,316	\$ 1,994	\$ 106,004	\$ (2,312)	
Excalibur Youth	\$ 303,321	\$ 1,216,912	\$ 913,591	\$ 1,477,498	\$ 260,586	\$ 2,225,776	\$ 748,278	
Fairfield	\$ 3,557,401	\$ 4,154,102	\$ 596,701	\$ 4,167,884	\$ 13,782	\$ 4,300,105	\$ 132,221	
Family Connection	\$ 65,000	\$ 65,000	\$ -	\$ 65,000	\$ -	\$ 85,650	\$ 20,650	
Florence	\$ 11,283,941	\$ 13,192,273	\$ 1,908,332	\$ 12,763,840	\$ (428,433)	\$ 13,194,967	\$ 431,127	
Georgetown	\$ 3,624,861	\$ 4,411,738	\$ 786,877	\$ 4,461,223	\$ 49,485	\$ 4,419,727	\$ (41,496)	
Goodwill Lower	\$ 60,144	\$ 80,080	\$ 19,936	\$ 81,844	\$ 1,764	\$ 82,022	\$ 178	
Goodwill Upper	\$ 34,368	\$ 47,560	\$ 13,192	\$ 46,768	\$ (792)	\$ 46,945	\$ 177	
Greenville	\$ 19,419,655	\$ 23,096,842	\$ 3,677,187	\$ 23,638,883	\$ 542,041	\$ 24,580,043	\$ 941,160	
Greenville Hosp System	\$ 58,372	\$ -	\$ (58,372)	\$ -	\$ -	\$ -	\$ -	
Greenwood Genetics	\$ 9,946,376	\$ 9,911,376	\$ (35,000)	\$ 10,616,376	\$ 705,000	\$ 11,933,676	\$ 1,317,300	
Growing Home SC	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 489,596	\$ 489,596	
Hampton	\$ 1,381,535	\$ 1,693,829	\$ 312,294	\$ 1,672,744	\$ (21,085)	\$ 1,737,169	\$ 64,425	
Hands on Development	\$ 197,575	\$ 232,090	\$ 34,515	\$ 281,239	\$ 49,149	\$ 247,426	\$ (33,813)	
Hermeione Flowers	\$ -	\$ 817	\$ 817	\$ 2,261	\$ 1,444	\$ 32	\$ (2,229)	
Horry	\$ 6,581,329	\$ 7,992,376	\$ 1,411,047	\$ 8,463,259	\$ 470,883	\$ 8,944,957	\$ 481,698	
I Shine	\$ 390,087	\$ 222,010	\$ (168,077)	\$ 222,559	\$ 549	\$ 202,439	\$ (20,120)	

\* Reflects the Operational Separation of Aiken DSN Board and Tri-Development Center

The totals reflect the sum of all contracts for a provider. Most Providers have multiple contracts.

**Total Contract Amount By Provider  
Fiscal Year Comparison**

PROVIDER			NET CHANGE		NET CHANGE		NET CHANGE	
	FY2014	FY2015	FY14-FY15	FY2016	FY15-FY16	FY2017	FY16-FY17	
Jasper	\$ 6,062,098	\$ 7,510,581	\$ 1,448,483	\$ 8,625,217	\$ 1,114,636	\$ 11,720,847	\$ 3,095,630	
Kershaw	\$ 2,261,556	\$ 2,863,577	\$ 602,021	\$ 3,110,830	\$ 247,253	\$ 3,328,649	\$ 217,819	
Kids 1st	\$ 126,220	\$ 159,290	\$ 33,070	\$ 126,007	\$ (33,283)	\$ 561,878	\$ 435,871	
Kid in Development	\$ 373,684	\$ 505,130	\$ 131,446	\$ 638,927	\$ 133,797	\$ 124,166	\$ (514,761)	
Lander University	\$ -	\$ 300,000	\$ 300,000	\$ -	\$ (300,000)	\$ 300,000	\$ 300,000	
Laurens	\$ 8,820,219	\$ 9,904,005	\$ 1,083,786	\$ 9,419,786	\$ (484,219)	\$ 9,589,536	\$ 169,750	
Lee	\$ 3,865,701	\$ 4,517,222	\$ 651,521	\$ 4,424,564	\$ (92,658)	\$ 4,540,963	\$ 116,399	
Lexington District One	\$ -	\$ 225,000	\$ 225,000	\$ 5,000	\$ (220,000)	\$ -	\$ (5,000)	
LifeShare	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 717,058	\$ 717,058	
Lutheran Family	\$ 1,186,260	\$ 2,331,309	\$ 1,145,049	\$ 3,104,131	\$ 772,822	\$ 4,349,477	\$ 1,245,346	
Marion-Dillon	\$ 5,135,265	\$ 6,091,710	\$ 956,445	\$ 5,943,613	\$ (148,097)	\$ 6,084,165	\$ 140,552	
Marlboro	\$ 1,158,061	\$ 1,706,939	\$ 548,878	\$ 1,682,174	\$ (24,765)	\$ 1,655,775	\$ (26,399)	
MIRCI	\$ 783,547	\$ 1,005,928	\$ 222,381	\$ 999,580	\$ (6,348)	\$ 1,040,013	\$ 40,433	
MUSC	\$ 2,500	\$ 2,500	\$ -	\$ 2,500	\$ -	\$ 2,500	\$ -	
Newberry	\$ 4,259,433	\$ 5,057,507	\$ 798,074	\$ 4,925,104	\$ (132,403)	\$ 5,023,150	\$ 98,046	
Oconee	\$ 5,148,475	\$ 6,179,534	\$ 1,031,059	\$ 6,310,743	\$ 131,209	\$ 6,632,821	\$ 322,078	
Oconee School District	\$ -	\$ -	\$ -	\$ 12,900	\$ 12,900	\$ -	\$ (12,900)	
Orangeburg	\$ 9,791,996	\$ 11,222,989	\$ 1,430,993	\$ 11,355,783	\$ 132,794	\$ 11,862,305	\$ 506,522	
PADD	\$ 92,780	\$ 118,606	\$ 25,826	\$ 398,094	\$ 279,488	\$ 370,892	\$ (27,202)	
Palmetto Early Inter	\$ 81,268	\$ 315,220	\$ 233,952	\$ 454,770	\$ 139,550	\$ 384,385	\$ (70,385)	
Palmetto Health Foundation	\$ -	\$ 2,500	\$ 2,500	\$ 1,700	\$ (800)	\$ 1,700	\$ -	
Path Finders Team Services	\$ -	\$ 159,117	\$ 159,117	\$ 227,028	\$ 67,911	\$ 180,000	\$ (47,028)	
Pattison's DREAM	\$ 224,477	\$ 197,717	\$ (26,760)	\$ 191,821	\$ (5,896)	\$ 179,946	\$ (11,875)	
Pediatric Ther/Aiken	\$ 394,630	\$ 449,120	\$ 54,490	\$ 376,848	\$ (72,272)	\$ 359,892	\$ (16,956)	
Pee Dee Kids	\$ -	\$ 64,064	\$ 64,064	\$ 128,867	\$ 64,803	\$ 112,466	\$ (16,401)	
Pickens	\$ 6,027,644	\$ 7,055,489	\$ 1,027,845	\$ 6,941,278	\$ (114,211)	\$ 7,138,633	\$ 197,355	
Pine Grove, Inc	\$ 934,727	\$ 1,040,948	\$ 106,221	\$ 976,488	\$ (64,460)	\$ 983,615	\$ 7,127	
Playworks	\$ 528,535	\$ 740,700	\$ 212,165	\$ 878,821	\$ 138,121	\$ 787,264	\$ (91,557)	
PEP	\$ 3,200	\$ 3,253	\$ 53	\$ 6,806	\$ 3,553	\$ 27,955	\$ 21,149	
Powerful Kid Builders	\$ 19,618	\$ -	\$ (19,618)	\$ -	\$ -	\$ -	\$ -	
Project Hope	\$ -	\$ 125,000	\$ 125,000	\$ 168,000	\$ 43,000	\$ -	\$ (168,000)	
Promising Futures	\$ 81,338	\$ 381,050	\$ 299,712	\$ 522,480	\$ 141,430	\$ 449,865	\$ (72,615)	
Pro-Parents	\$ 20,650	\$ 20,650	\$ -	\$ 20,650	\$ -	\$ -	\$ (20,650)	
Rehab without Walls	\$ 495,000	\$ 400,000	\$ (95,000)	\$ 300,000	\$ (100,000)	\$ 275,000	\$ (25,000)	
Richland-Lexington	\$ 2,168,604	\$ 2,440,756	\$ 272,152	\$ 2,208,127	\$ (232,629)	\$ 2,026,852	\$ (181,275)	
Richland County Dist Two	\$ -	\$ -	\$ -	\$ 47,100	\$ 47,100	\$ -	\$ (47,100)	
Roger C. Peace	\$ 1,040,000	\$ 700,000	\$ (340,000)	\$ 900,000	\$ 200,000	\$ 1,025,000	\$ 125,000	
Roper Rehab.	\$ 150,000	\$ 150,000	\$ -	\$ 450,000	\$ 300,000	\$ 485,000	\$ 35,000	
SAFY of SC	\$ -	\$ -	\$ -	\$ 2,584	\$ 2,584	\$ 398,126	\$ 395,542	
SC Arts Commission	\$ 6,700	\$ 6,700	\$ -	\$ 6,700	\$ -	\$ 6,700	\$ -	
SC Autism Society	\$ 59,000	\$ 192,831	\$ 133,831	\$ 237,809	\$ 44,978	\$ 151,569	\$ (86,240)	
SC Mentor	\$ 14,972,309	\$ 15,487,463	\$ 515,154	\$ 15,172,240	\$ (315,223)	\$ 13,739,991	\$ (1,432,249)	
SC Respite Coalition	\$ 15,555	\$ 92,141	\$ 76,586	\$ 50,000	\$ (42,141)	\$ 159,991	\$ 109,991	
SOS Healthcare	\$ -	\$ 8,000	\$ 8,000	\$ 58,600	\$ 50,600	\$ -	\$ (58,600)	
Spartanburg Dist. Two	\$ -	\$ 225,000	\$ 225,000	\$ -	\$ (225,000)	\$ -	\$ -	
Special Olympics	\$ 265,000	\$ 250,000	\$ (15,000)	\$ 250,000	\$ -	\$ 455,250	\$ 205,250	
Spinal Cord Injury	\$ 64,000	\$ 64,000	\$ -	\$ 64,200	\$ 200	\$ 64,200	\$ -	
Sumter	\$ 7,113,971	\$ 8,371,101	\$ 1,257,130	\$ 8,386,885	\$ 15,784	\$ 8,815,109	\$ 428,224	
Taylor Consultants	\$ 6,254	\$ 55,577	\$ 49,323	\$ 109,345	\$ 53,768	\$ 101,221	\$ (8,124)	
Therapy Solutions	\$ 289,090	\$ 348,267	\$ 59,177	\$ 301,288	\$ (46,979)	\$ 281,166	\$ (20,122)	
ThinkFirst Lowcountry	\$ 1,500	\$ 1,500	\$ -	\$ 1,700	\$ 200	\$ 4,700	\$ 3,000	
Tina Greene	\$ 113,451	\$ 116,480	\$ 3,029	\$ 102,576	\$ (13,904)	\$ 89,973	\$ (12,603)	
Tri-Development Center	\$ -	\$ -	\$ -	\$ 9,935,716	\$ 9,935,716	\$ 16,282,523	\$ 6,346,807	*
UCP of SC	\$ 4,897,500	\$ 5,750,185	\$ 852,685	\$ 6,103,405	\$ 353,219	\$ 6,504,095	\$ 400,690	
Union	\$ 3,323,570	\$ 3,692,850	\$ 369,280	\$ 3,633,209	\$ (59,641)	\$ 3,708,436	\$ 75,227	
University of SC	\$ 1,145,718	\$ 1,179,464	\$ 33,746	\$ 1,353,230	\$ 173,766	\$ 1,229,348	\$ (123,882)	
USC-Moore CD Research	\$ -	\$ -	\$ -	\$ 300	\$ 300	\$ -	\$ (300)	
Upstate Support	\$ 145,898	\$ 165,535	\$ 19,637	\$ 128,604	\$ (36,931)	\$ 112,468	\$ (16,136)	
Vision Institute	\$ 56,429	\$ 175,970	\$ 119,541	\$ 179,338	\$ 3,368	\$ 166,450	\$ (12,888)	
Williamsburg	\$ 2,410,275	\$ 3,354,286	\$ 944,011	\$ 3,133,591	\$ (220,695)	\$ 3,314,815	\$ 181,224	
Willowglen Academy	\$ 809,434	\$ 1,227,710	\$ 418,276	\$ 1,225,673	\$ (2,037)	\$ 1,317,008	\$ 91,336	
Winston's Wish	\$ -	\$ 400,000	\$ 400,000	\$ 175,000	\$ (225,000)	\$ -	\$ (175,000)	
YAP	\$ -	\$ -	\$ -	\$ 14,106	\$ 14,106	\$ 189,024	\$ 174,918	
York	\$ 10,640,246	\$ 12,589,368	\$ 1,949,122	\$ 12,935,179	\$ 345,811	\$ 13,791,536	\$ 856,357	

\* Reflects the Operational Separation of Aiken DSN Board and Tri-Development Center

The totals reflect the sum of all contracts for a provider. Most Providers have multiple contracts.

**Total Contract Amount By Provider  
Fiscal Year Comparison**

PROVIDER	FY2014	FY2015	NET CHANGE		NET CHANGE		NET CHANGE	
			FY14-FY15	FY2016	FY15-FY16	FY2017	FY16-FY17	
York Adult Day Care	\$ 42,980	\$ 43,487	\$ 507	\$ 39,780	\$ (3,707)	\$ 9,345	\$ (30,435)	
<b>TOTAL</b>	<b>\$ 349,107,026</b>	<b>\$ 417,782,733</b>	<b>\$ 68,675,707</b>	<b>\$ 424,823,290</b>	<b>\$ 7,040,557</b>	<b>\$ 447,000,901</b>	<b>\$ 22,177,611</b>	

\* Reflects the Operational Separation of Aiken DSN Board and Tri-Development Center

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The totals reflect the sum of all contracts for a provider. Most Providers have multiple contracts.

South Carolina Department of Disabilities and Special Needs					
FY 2016-2017 Spending Plan - Approved by the DDSN Commission 9-15-16					
Financial Projections for Fiscal Year 2017	Description	Base Expenditures as of July 1, 2016 (Total Funds)	Commitments after July 1, 2016 (Total Funds)	Committed or Expended as of 3/31/17	Balance to be Completed by 6/30/17
<b>Base Expenditures*:</b>					
<b>Agency Budget for Community Contracts</b>	FY 17 Community Contracts - Approved by DDSN Commission June 16, 2016	\$512,682,944		\$512,682,944	\$0
<b>Regional Centers/Community Program Services</b>		\$98,519,758		\$79,190,774	\$19,328,984
<b>Administration</b>		\$7,929,740		\$6,525,108	\$1,404,632
<b>Subtotal</b>		\$619,132,442		\$598,398,826	\$20,733,616
<b>* Base expenditures do not include system wide employee/employer benefit increases or expansion funding.</b>					
<b>Service Development</b>					
<b>Residential Services:</b>					
1. Movement of Individuals from Regional Centers	24 Community Residential Placements		\$3,547,800	\$1,478,250	\$2,069,550
2. Critical Needs Response - New Bed Development - ID/RD, ASD, HASCI	125 Community Residential Placements (dependent on setting necessary to meet individual needs)		\$8,755,000	\$5,765,161	\$2,989,839
<b>At Home Services:</b>					
<b>Head &amp; Spinal Cord Injury (HASCI)</b>					
1. HASCI Waiver - Expansion	10 Waiver Slots as Expanded Service Capacity is Required		\$316,350	\$316,350	\$0
2. HASCI Specialized Post-Acute Rehabilitation - Expansion	Specialized Post-Acute Rehabilitation for 8-10 individuals		\$500,000	\$500,000	\$0
<b>Autism Spectrum Disorder (ASD)</b>					
Community Support (CS) Waiver - Expansion	82 Waiver Slots Expansion		\$1,115,200	\$1,115,200	\$0
<b>Intellectual Disability/ Related Disability (ID/RD)</b>					
Community Support (CS) Waiver - Expansion	668 Waiver Slots Expansion		\$9,084,800	\$9,084,800	\$0
<b>All Disability Populations</b>					
Consumer Needs Assessment	Additional Band Changes and Outliers		\$600,000	\$600,000	\$0
<b>Statewide Initiatives:</b>					
<b>Personal Services and Employer Fringe Benefits Increase</b>					
System Wide Increase	Employee Pay Plan Allocation & Employer Retirement & Health/Dental Insurance Increase		\$18,582,381	\$18,582,381	\$0
<b>Other Initiatives</b>					
1. Expansion of Non-Emergency Respite Beds	Four Beds Statewide for Planned Respite Needs		\$500,000	\$0	\$500,000
2. Greenwood Genetic Center	Expand Neural Tube Defects (NTD) and Genetic Counseling Services		\$1,600,000	\$1,600,000	\$0
<b>Capital Needs</b>					
1. Capital Development/Infrastructure	Required Maintenance, Health/Safety Upgrades, Increase Capacity, Technology Needs	\$2,483,750		\$2,483,750	\$0
2. System Wide State Facilities	Capital Projects Debt Service Funding - Regional Center and Community Providers Statewide	\$3,900,000		\$1,570,379	\$2,329,621
<b>Appropriated Non-Recurring Funds</b>					
Lander Equestrian Services - Proviso 118.16	Lander Equestrian Services		\$300,000	\$300,000	\$0
<b>Projected Expenditures for Funding</b>		<b>\$625,516,192</b>	<b>\$44,901,531</b>	<b>\$641,795,097</b>	<b>\$28,622,626</b>
<b>Total</b>			<b>\$670,417,723</b>		<b>\$670,417,723</b>

<b>South Carolina Department of Disabilities and Special Needs</b>				
<b>Analysis of Planned Expenditures for Waiting List Reduction Effort FY 17</b>				
<b>As of April 30, 2017</b>				
<b>Appropriation</b>	<b>\$6,600,000</b>			
<b>One-time System Capacity Initiatives</b>	<b>\$3,386,250</b>			
<b>Service Expansion</b>	<b>\$3,213,750</b>			
<b>One-time System Capacity Initiatives Approved by Commission 9/15/16:</b>		<b>FY 17 State Funds Committed One-Time</b>	<b>FY 17 State Funds Expended</b>	<b>FY 17 State Funds Remaining</b>
Capital for Day and Residential Capacity Building		\$1,000,000	\$1,000,000	
State Funded Case Management Service to Expedite Enrollment		\$700,000	\$933,764	
Intake Process		\$879,000	\$374,602	
Increase Access to Respite Services		\$70,000	\$54,466	
Equipment and Training Assistance for Service Providers for use with Therap		\$250,000	\$50,000	
Special Olympics - Project Unify		\$200,000	\$200,000	
Workforce Initiatives		\$287,250	\$240,000	
<b>Total One-time System Capacity Initiatives</b>		<b>\$3,386,250</b>	<b>\$2,852,832</b>	<b>\$533,418</b>
<b>Service Expansion:</b>		<b>FY 17 State Funds Committed Recurring</b>	<b>FY 17 State Funds Expended</b>	<b>FY 17 State Funds Remaining</b>
Residential Services: Approximately 115-125 Residential Slots		\$3,540,000	\$1,898,218	
In-Home Supports				
Waiver Services - Community Supports 750 Expansion Slots		\$3,060,000	\$1,199,558	
<b>Total Service Expansion</b>		<b>\$6,600,000</b>	<b>\$3,097,776</b>	<b>\$115,974</b>
<b>Total Service Expansion</b>			<b>\$3,213,750</b>	

## **Capital Project (PIP) Highlights since January 2017 Commission Meeting**

- 13 projects have been closed since January 1, 2017
- 2 projects have been sent to be closed (in process at the Executive Budget Office)
- 6 projects are being prepared to be closed
- 9 new projects have been approved by the Executive Budget Office since January 1, 2017
- Cash Expenditures January 1 – March 31, 2017 = \$366,070.06

<b>Project No.</b>	<b>Description</b>	<b>Date Closed</b>
9837	WC- Outdoor Recreation Area- Construction	3/16/2016
9855	WC- Bldg. 204- HVAC Replacement	3/16/2016
9858	WC-Sloan Bldg.- HVAC Replacement	3/16/2016
9861	WC- Five Bldgs.- Roof Replacements	3/16/2016
9821	MC- Preventive Maintenance/ Lifecycle Refurbishment	5/27/2016
9830	PD-Pecan/Mulberry Bldgs.- Refurbishment	5/27/2016
9843	CC-Highlands Area Adaptive Reuse & Admin- HVAC Replacement	5/27/2016
9845	SW-Reg. Ctrs- Preventive Maintenance/ Lifecycle Refurbishment	5/27/2016
9846	SW- Comm Facilities Upgrade/Preventive Maintenance	5/27/2016
9848	PD/Saleeby Ctrs- Saleeby Center- Shingle Roof Replacement	5/27/2016
9849	CC- Highlands Bathing, Laundry & Developmental Bldgs.- Refurbishment	5/27/2016
9850	CC- Hillside Boiler - Air Handler Replacement	5/27/2016
9852	PD/Saleeby Ctrs- Various Bldgs.- Maintenance	5/27/2016
9859	SW- DDSN Facilities- General Repairs	5/27/2016
9860	PD- Saleeby - Center Wing- Renovations	5/27/2016
9872	CC- Hampton Street & Zeigler St. CRCF Comm Res- Renovations	5/27/2016
9819	CO- Preventive Maintenance/ Lifecycle Refurbishment	6/26/2016
9842	WC- Electrical Power Grid- Campus Wide	8/3/2016
9825	Coastal Center - Jasper Day Program Addition/Administration Building	12/13/2016
9815	Statewide Centers Preventive Maintenance / Life Cycle Refurbishment	1/12/2017
9841	Statewide - Accessible Bathing Improvement	1/19/2017
9851	Coastal Center Canteen, Electrical and Safety Upgrades	1/19/2017
9854	Statewide - Centers Info Technology Fiber Network Repairs	1/19/2017
9856	Statewide Community Facility Energy Efficiency Upgrades	1/19/2017
9880	Midlands Center Demolition	1/19/2017
9838	Statewide - Agency Energy Plan Implementation	4/11/2017
9612	Midlands Center - Security Dormitory	4/17/2017
9809	Whitten Center, Various Dorms Repair/Renovation	5/5/2017
9814	Midlands - Residential Kitchen Refurbishment	5/5/2017
9820	Whitten - Prev Maintenance/Lifecycle Refurbishment	5/5/2017
9862	Whitten - Essential Buildings HVAC Replacements	5/5/2017
9865	Coastal Center - Highlands 510 HVAC	5/5/2017
9797*	Midlands Center - Dorms and Gym Upgrades/Renovations	in process
9867*	Coastal - Energy Efficient Lighting Replacement Improvements	in process

\*Required paperwork is being completed to close out these projects with Central Government



**Projects approved on CIPs more than 5 years ago**

<b>Project No.</b>	<b>Project Name</b>	<b>Year Approved by Commission</b>	<b>Budget on an Approved A-1</b>	<b>Committed Unspent Balance</b>	
9853	Statewide - Paving/Roads Sitework	2011	158,139.34	77,747.29	Continual maintenance as needs arise. The Department has a consultant who is identifying road/parking lot/sidewalk needs (tree roots causing tripping hazards). SCDDSN is replacing the affected areas to meet ADA standards.
9857	Midlands Center - Renovations and Replacements	2011	175,000.00	120,177.87	This project has a very general scope that can be used for many areas when failure occurs. This allows the Department to meet the needs as they arise.
9863	Central Office Safety/Code/Energy Repairs	2012	2,800,808.17	65,641.18	These funds will be used in the near future to accommodate additional needs.
9864	Statewide Sitework Lifecycle	2012	248,000.00	100,327.92	This project has a very general scope that can be used for many areas when failure occurs. This allows the Department to meet the needs as they arise.
9866	Coastal Center - Gymnasium Roof Replacement	2012	247,500.00	109,664.50	Project funds will be used to replace the flooring in the gym caused by water damage due to roof issues.
9868	Regional Centers Energy Management Controls System Replacement	2012	245,000.00	168,542.20	Recently awarded a contract for this project as approved at the December 2016 Commission Meeting.
9869	Statewide - Fire Alarm & HVAC Equipment Replacement	2012	249,938.30	197,608.46	Regional Center and Community residences have constant needs that fit the scope of this project.
9870	Statewide - Building Envelope Repairs	2012	240,000.00	98,568.25	To be closed to fund Non-PIP Maintenance Fund
<b>Total</b>			<b>4,364,385.81</b>	<b>938,277.67</b>	

At project close out, residual balances may be transferred to other projects with the approval of the Executive Budget Office.

Projects as presented at the May 2017 Commission Meeting (2013-2017 CPIPs)

Project No.	Project Name	Year Approved by Commission	Budget on an Approved A-1	Committed Unspent Balance	
9871	Statewide - Community Facility Life Cycle Repairs	2013	237,452.20	208,591.39	To be closed to fund Non-PIP Maintenance Fund
9873	Coastal - Drainage, Landscaping, Door and Window Replacement	2012	200,000.00	183,980.00	
9874	Statewide - Network Infrastructure/Telphone System Replacement for Coastal, Midlands, Pee Dee/Saleeby Center & Central Office	2013 2013	840,000.00	285,603.72	
9875	Whitten - Eight Dormitories Renovations	2012	163,760.63	163,760.63	
9876	Whitten Center - Dorms and Kitchen Upgrades	2013 2013	249,900.00	23,672.90	To be closed to fund Non-PIP Maintenance Fund
9877	Statewide - Fire Protection Repair/Replacement	2013	249,000.00	168,912.43	
9878	Statewide - Emergency Generators	2013	240,000.00	226,187.57	
9879	Midlands Center Consumer Life Improvement Preventive Maintenance	2013	238,000.00	236,020.00	
9881	Pee Dee/Saleeby Centers Consumer Life Improvement Preventive Maintenance	2013 2012	214,242.21	65,261.14	To be closed to fund Non-PIP Maintenance Fund
9882	Statewide - Accessible Bath Equipment Phase II	2013	215,000.00	57,989.92	To be closed to fund Non-PIP Maintenance Fund
9883	Coastal - Centerview HVAC Replacement	2013	249,500.00	24,245.00	To be closed to fund Non-PIP Maintenance Fund
9884	Coastal - Consumer Life Improvements	2013	202,000.00	194,427.00	
9885	Whitten Center Preventive Maintenance	2014	326,500.18	326,500.18	
9886	Midlands Center Preventive Maintenance	2014	390,000.00	21,292.97	

Project No.	Project Name	Year Approved by Commission	Budget on an Approved A-1	Committed Unspent Balance
9887	Statewide Facilities Preventive Maintenance & License Conversion	2014	400,000.00	321,632.73
9888	Pee Dee/Saleeby Centers Preventive Maintenance	2014	522,000.00	516,454.92
9889	Pee Dee Pecan Dorms/Support Bldgs Roof Repairs	2015	350,000.00	66,305.15
9890	Statewide - Emergency Generators	2014	225,000.00	225,000.00
9891	Coastal Center Highlands 510 Roof Replacement	2015	273,900.00	19,000.00
9892	Coastal Center - Preventive Maintenance	2014	249,000.00	180,619.54
9893	Pee Dee - Williamsburg Day Program Addition	2015	825,000.00	788,970.02
9894	Whitten - Regional Office Building/Staff Residence Demolition	2013 2014	249,500.00	249,500.00
9895	Whitten - Consumer Life Improvements	2013	248,000.00	248,000.00
9896	Midlands - Campus-Wide Preventive Maintenance	2015	225,000.00	225,000.00
9897	Pee Dee/Saleeby Centers - Campus Wide Preventive Maintenance	2015	240,000.00	240,000.00
9898	Statewide Community Facilities Preventive Maintenance	2015	240,000.00	240,000.00
9899	Coastal Center - Campus-Wide Preventive Maintenance	2015	195,000.00	180,536.86
9900	Coastal Center - Dental Clinic Renovations	2014	3,735.00	3,735.00
9901	Coastal Center Roof Repairs	2015	750,000.00	722,000.00
9902	Statewide - Community Facilities - Preventive Maintenance	2016	499,950.00	499,950.00
9903	Whitten Center - Campus Wide - Preventive Maintenance	2015	247,500.00	247,500.00

Substantially completed. Project to remain open for 1 year Warranty Period.

Substantially completed. Project to remain open for 1 year Warranty Period.

Engaged in construction.

Engaged in construction.

Project No.	Project Name	Year Approved by Commission	Budget on an Approved A-1	Committed Unspent Balance	
9904	Coastal Center - Preventive Maintenance	2016	200,000.00	200,000.00	Approved by Executive Budget Office 3/7/2017
9905	Midlands Center - Preventive Maintenance	2016	220,000.00	220,000.00	Approved by Executive Budget Office 3/7/2017
9906	Pee Dee/Saleeby Center - Preventive Maintenance	2016	245,000.00	245,000.00	Approved by Executive Budget Office 3/7/2017
9907	Statewide - Accessible Bathing/Lifting Equipment	2016	245,000.00	245,000.00	Approved by Executive Budget Office 3/7/2017
9908	Statewide - Regional Centers - Preventive Maintenance	2016	240,000.00	240,000.00	Approved by Executive Budget Office 3/7/2017
9909	Statewide - Site Infrastructure Preventive Maintenance	2016	200,000.00	200,000.00	Approved by Executive Budget Office 3/7/2017
9910	Whitten Center - Preventive Maintenance	2016	200,000.00	200,000.00	Approved by Executive Budget Office 3/7/2017
9911	Pee Dee - Sumter Day Program Site Improvements	2016	240,000.00	240,000.00	downtown for approval
9912	Statewide - Energy Management Wireless Gateway and Wireless Controllers	2016	245,000.00	245,000.00	downtown for approval

**Total**      11,793,940.22      9,195,649.07

At project close out, residual balances may be transferred to other projects with the approval of the Executive Budget Office.

## FY16-17 Capital Grant Commitments

Service Provider	Site	Expended or Projected Award
<b>Residential</b>		
Bamberg DSNB	Bamberg	120,000
Berkeley Citizens	Moncks Corner	88,000
CareFocus	Summerville	11,800
CHESCO Services	Shiloh	100,000
CHESCO Services	Kershaw	60,000
CHESCO Services	Wallace	100,000
Colleton DSNB	Walterboro	87,000
Colleton DSNB	Walterboro	18,750
Community Options	Columbia	75,000
Community Options	Greer	75,000
Community Options	Lyman	75,000
Community Options	Spartanburg	75,000
Community Options	Summerville	75,000
Community Options	Summerville	75,000
Community Options	Summerville	75,000
Disabilities Board of Charleston	Ladson	88,000
Disabilities Board of Charleston	North Charleston	88,000
Disabilities Board of Charleston	North Charleston	88,000
Excalibur Youth Services	Easley	139,088
Fairfield DSNB	Winnsboro	45,000
Florence DSNB	Florence	88,000
Georgetown DSNB	Georgetown	87,000
Pickens DSNB / Anderson DSNB	Central	250,000
Sumter DSNB	Sumter	170,000
Sumter DSNB	Sumter	180,000
United Cerebral Palsy	Sumter	88,000
<b>Total Residential</b>		<b>2,421,638</b>
<b>Day and Administration</b>		
Allendale/Barnwell DSNB	Barnwell	200,000
Bamberg DSNB	Denmark	541,475
Charles Lea Center	Chesnee	175,000
Community Options	Columbia	2,500
Dorchester DSNB	Summerville	50,000
Orangeburg DSNB	Orangeburg	635,000
<b>Total Non-Residential</b>		<b>1,603,975</b>
<b>Total Capital Commitments FY16-17:</b>		<b>4,025,613</b>

**SC Department of Disabilities and Special Needs**  
**FY 2017 Monthly Financial Summary - Operating Funds**  
**Month Ended: April 30, 2017**

	<u>General Fund (Appropriations)</u>	<u>Medicaid Fund</u>	<u>Other Operating Funds</u>	<u>Federal and Restricted Funds</u>	<u>Total</u>
<b>FY 2016 Unreserved Cash Brought Forward</b>	<b>\$ 939,561</b>	<b>\$ 527,877</b>	<b>\$ 877,569</b>	<b>\$ 16,190</b>	<b>\$ 2,361,197</b>
<b><u>FY 2017 YTD Activity</u></b>					
<b><u>Receipts/Transfers</u></b>					
Revenue	\$ 240,453,324	\$ 345,253,242	\$ 6,692,662	\$ 555,239	\$ 592,954,467
Interfund Transfers	\$ (20,000,000)	\$ 20,000,000	\$ -	\$ -	\$ -
<b>Total Receipts/Transfers</b>	<b>\$ 220,453,324</b>	<b>\$ 365,253,242</b>	<b>\$ 6,692,662</b>	<b>\$ 555,239</b>	<b>\$ 592,954,467</b>
<b><u>Disbursements</u></b>					
Personal Services	\$ (39,515,312)	\$ (12,731,123)	\$ (49,035)	\$ (169,538)	\$ (52,465,008)
Fringe Benefits	\$ (16,257,548)	\$ (5,475,740)	\$ -	\$ (70,698)	\$ (21,803,986)
Other Operating Expense	\$ (130,686,221)	\$ (324,522,992)	\$ (1,881,925)	\$ -	\$ (457,091,138)
Capital Outlays	\$ -	\$ (150,832)	\$ (85,800)	\$ -	\$ (236,632)
<b>Total Disbursements</b>	<b>\$ (186,459,081)</b>	<b>\$ (342,880,687)</b>	<b>\$ (2,016,760)</b>	<b>\$ (240,236)</b>	<b>\$ (531,596,764)</b>
<b>Outstanding Accounts Payable Balance</b>	<b>\$ (8,133)</b>	<b>\$ (164,010)</b>	<b>\$ (1,654)</b>	<b>\$ -</b>	<b>\$ (173,797)</b>
<b>Unreserved Cash Balance - 4/30/2017</b>	<b>\$ 34,925,671</b>	<b>\$ 22,736,422</b>	<b>\$ 5,551,817</b>	<b>\$ 331,193</b>	<b>\$ 63,545,103</b>

1 \$5,000,000 of the total cash balance has been reserved for future Medicaid Settlements

FM Budget vs Actual									
Author JGRANT			Status of Data 5/5/2017 05:10:37						
Filter		Information							
Table									
Fiscal year	Business area	Funded Program - Bud	Original Budget	Budget Adjustments	Current Budget	YTD Actual Expense	Balance Before Commitments	Commitments and Other Transactions	Remaining Balance
2017	DDSN	ADMINISTRATION	\$ 7,278,969.00	\$ 172,575.00	\$ 7,451,544.00	\$ 5,460,839.34	\$ 1,990,704.66	\$ 231,199.51	\$ 1,759,505.15
		PREVENTION PROGRAM	\$ 257,098.00	\$ 338,202.00	\$ 595,300.00	\$ 241,285.00	\$ 354,015.00	\$ 275,820.00	\$ 78,195.00
		GREENWOOD GENETIC CENTER	\$ 11,358,376.00	\$ 0.00	\$ 11,358,376.00	\$ 10,677,827.00	\$ 680,549.00	\$ 680,549.00	\$ 0.00
		CHILDREN'S SERVICES	\$ 14,859,135.00	\$ 7,251,573.00	\$ 22,110,708.00	\$ 11,605,414.75	\$ 10,505,293.25	\$ 2,250.00	\$ 10,503,043.25
		BabyNet	\$ 9,312,500.00	\$ 0.00	\$ 9,312,500.00	\$ 9,312,500.00	\$ 0.00	\$ 0.00	\$ 0.00
		IN-HOME FAMILY SUPP	\$ 102,211,827.00	-\$ 18,156,678.81	\$ 84,055,148.19	\$ 41,418,888.76	\$ 42,636,259.43	\$ 7,137,442.19	\$ 35,498,817.24
		ADULT DEV&SUPP EMPLO	\$ 67,475,832.00	\$ 14,540,225.00	\$ 82,016,057.00	\$ 65,942,479.80	\$ 16,073,577.20	\$ 0.00	\$ 16,073,577.20
		SERVICE COORDINATION	\$ 22,707,610.00	\$ 50,145.00	\$ 22,757,755.00	\$ 16,160,999.74	\$ 6,596,755.26	\$ 658,318.73	\$ 5,938,436.53
		AUTISM SUPP PRG	\$ 14,113,306.00	\$ 22,720.00	\$ 14,136,026.00	\$ 8,877,927.71	\$ 5,258,098.29	\$ 702,032.70	\$ 4,556,065.59
		Pervasive Developmental Disorder (PDD)	\$ 10,780,880.00	-\$ 500,000.00	\$ 10,280,880.00	\$ 4,314,483.88	\$ 5,966,396.12	\$ 1,206,778.25	\$ 4,759,617.87
		HD&SPINL CRD INJ COM	\$ 3,040,532.00	\$ 1,112,987.00	\$ 4,153,519.00	\$ 3,254,844.79	\$ 898,674.21	\$ 0.00	\$ 898,674.21
		REG CTR RESIDENT PGM	\$ 73,912,065.00	\$ 1,545,925.00	\$ 75,457,990.00	\$ 55,123,653.13	\$ 20,334,336.87	\$ 2,584,541.99	\$ 17,749,794.88
		HD&SPIN CRD INJ FAM	\$ 26,258,987.00	\$ 2,214,629.00	\$ 28,473,616.00	\$ 14,718,678.07	\$ 13,754,937.93	\$ 2,991,866.13	\$ 10,763,071.80
		AUTISM COMM RES PRO	\$ 23,557,609.00	\$ 900.00	\$ 23,558,509.00	\$ 12,012,572.43	\$ 11,545,936.57	\$ 51,679.42	\$ 11,494,257.15
		INTELL DISA COMM RES	\$ 311,439,097.00	\$ 1,422,861.00	\$ 312,861,958.00	\$ 250,535,379.80	\$ 62,326,578.20	\$ 16,823,675.85	\$ 45,502,902.35
		STATEWIDE CF APPRO		\$ 0.00	\$ 0.00		\$ 0.00		\$ 0.00
		STATEWIDE PAY PLAN		\$ 0.00	\$ 0.00		\$ 0.00		\$ 0.00
		STATE EMPLOYER CONTR	\$ 29,857,979.00	\$ 737,492.00	\$ 30,595,471.00	\$ 21,803,986.02	\$ 8,791,484.98	\$ 0.00	\$ 8,791,484.98
		DUAL EMPLOYMENT				\$ 8,802.05	-\$ 8,802.05	\$ 0.00	-\$ 8,802.05
		Lander University Equestrian		\$ 300,000.00	\$ 300,000.00	\$ 300,000.00	\$ 0.00	\$ 0.00	\$ 0.00
		<b>Result</b>	<b>\$ 728,421,802.00</b>	<b>\$ 11,053,555.19</b>	<b>\$ 739,475,357.19</b>	<b>\$ 531,770,562.27</b>	<b>\$ 207,704,794.92</b>	<b>\$ 33,346,153.77</b>	<b>\$ 174,358,641.15</b>