

SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS

MINUTES

June 15, 2023

The South Carolina Commission on Disabilities and Special Needs met on Thursday, June 15, 2023, 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 In-Person

Stephanie Rawlinson – Chairman

Barry Malphrus – Vice Chairman

Gary Kocher, MD

Eddie Miller

David Thomas

Michelle Woodhead

DDSN Administrative Staff

Janet Priest, Associate State Director of Operations; Harley Davis, Ph.D., Chief Administrative Officer; Quincy Swygert, Chief Financial Officer; Courtney Crosby, Internal Audit Director; Lori Manos, Associate State Director of Policy; Carolyn Benzon, Deputy General Counsel; Greg Meetze, Chief Information Officer; Preston Southern and Jana Brown, Information Technology Division; and Christie Linguard, Executive Assistant.

Notice of Meeting Statement

Chairman Rawlinson called the meeting to order and read a statement of announcement about the meeting that was distributed to the appropriate media, interested persons, and posted at the Central Office and on the website in accordance with the Freedom of Information Act.

Welcome

Chairman Rawlinson welcomed everyone to the meeting. She read Robin Blackwood's resignation letter into the records, and thanked Ms. Blackwood for her service on the Commission over the past years. (Attachment A)

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Adoption of the Agenda

On a motion by Commissioner Thomas, seconded by Commissioner Miller, the meeting agenda was unanimously approved as written by the Commission. (Attachment B)

Invocation

Commissioner Malphrus gave the invocation.

Approval of Commission Meeting Minutes

Commissioner Thomas made a motion to approve the minutes from the May 18, 2023 regular Commission meeting; this motion was seconded by Commissioner Malphrus and unanimously approved by the Commission. (Attachment C)

Commissioners' Update

Commissioner Miller noted that many positive changes have come about because of Robin Blackwood; he thanked her for her services rendered to this Commission.

Commissioner Malphrus thanked Robin Blackwood for her services and noted that she will be vitally missed from the Commission. Commissioners Kocher and Woodhead both echoed Commissioner Malphrus' sentiments and wished Robin Blackwood well.

Chairman Rawlinson encouraged fellow Commissioners to get involved with the parent groups at the Regional Centers in their areas.

Nominations for Officers

The floor was opened to receive nominations for Chairman. Commissioner Woodhead nominated Ed Miller; there being no other nominations, by unanimous acclamation, Commissioner Miller was elected as the Chairman.

The floor was opened to receive nominations for Vice Chairman. Commissioner Miller nominated Commissioner Michelle Woodhead. Commissioner Thomas nominated Commissioner Barry Malphrus; however, Commissioner Malphrus withdrew his name. Therefore, by unanimous acclamation, Commissioner Woodhead was elected as the Vice Chairman.

Lastly, the floor was then opened to receive nominations for Secretary. Commissioner Miller nominated Commissioner Kocher. Commissioner Kocher nominated Commissioner Thomas who asked that his name be withdrawn.

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Therefore, by unanimous acclamation, Commissioner Kocher was elected as Secretary.

Public Input

There was no public input.

Programs and Services

Ms. Nancy Smith, General Manager of the South Carolina State Fair (Fair), spoke to the Commission about the Sensory Friendly Morning at the Fair this year, which will be held on Thursday, October 19, 2023, from 10:00 AM – 12:00 PM. Exceptional Citizens Day will be on the same day. (Attachment D)

Policy Committee

Independent Living Skills Program Standard – Ms. Manos reminded the Commission that this Standard was added to the Intellectual Disability and Related Disabilities (ID/RD) and Head and Spinal Cord Injury (HASCI) Waivers at the last renewal. These are the Service Standards. There was one public comment from Able SC requesting that there be a limit to the provider enrollment qualification portion, which we cannot do now, because the minimum qualifications have already been outlined in the document has been already approved by the Centers for Medicare and Medicaid Services (CMS). Commissioner Thomas made a motion to approve the Service Standards as presented; this motion was seconded by Commissioner Miller. The Standards were unanimously approved by the Commission. (Attachment E)

Old Business

Ongoing Projects List Update

Chairman Rawlinson commenced by reading the ongoing list to include the answers. After reading the question and answer to the first question, Commission members felt they should have an opportunity to review. Some Commissioners asks that appropriate staff be present if any questions should come up prior to July's meeting. Commissioner Thomas made a motion to put this agenda item on next month's agenda; the motion was seconded by Commissioner Malphrus and unanimously approved by the Commission. (Attachment F).

New Business

- A. Approval for Fiscal Year 2024 Contracts Over \$200,000

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Mr. Swygert called the Commission members' attention to the list of each contract and a brief description of each over \$200,000 presented for approval. Discussion was held about the Greenwood Genetics Center and who is responsible for overseeing the pass-through monies. Chairman Rawlinson suggested a representative from Greenwood Genetics be invited to a future Commission meeting to discuss the financial aspect of pass-through monies. It was noted that since Robin Blackwood has resigned from this Commission, she can no longer serve on the Greenwood Genetics Board of Directors. On a motion by Commissioner Miller, seconded by Commissioner Thomas, all contracts presented were approved as presented. (Attachment G)

B. Financial Update

Mr. Swygert presented the FY23 Spending Plan vs Actual as of May 30, 2023. To date, the Agency has expended \$902M, 96.05% of our approved spending plan of \$939.1M. The agency is currently 4.38% over budget. Commissioner Thomas made a motion to approve the Financial Update, seconded by Commissioner Miller and unanimously approved by the Commission. (Attachment H)

Chairman Rawlinson noted that this Agency will be in Governor McMaster's \$5.0 million study of state agencies.

Executive Session

Chairman Rawlinson announced that the Commission will go into Executive Session for the purpose of discussing a personnel matter regarding the hiring of a state director. At 11:16 AM, on a motion by Commissioner Thomas, seconded by Commissioner Malphrus, the commission voted unanimously to enter into executive session.

Rise Out of Executive Session

Upon rising out of executive session at 11:57 AM, Chairman Rawlinson announced that no motions were made, no decisions made, and no votes taken during executive session. She thanked everyone for all their support throughout her two years as Chairman of this Commission. She also clarified that the staff has tried to answer her questions over the last two years. Lastly, she wished the new officers the best of luck and will work to keep the Agency moving into the right direction.

Commissioners Woodhead and Miller thanked Chairman Rawlinson for her leadership. Commissioner Miller asked that we all continue to work together to serve those with disabilities and special needs.

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Action on Item(s) Discussed in Executive Session, if needed

There were no action items.

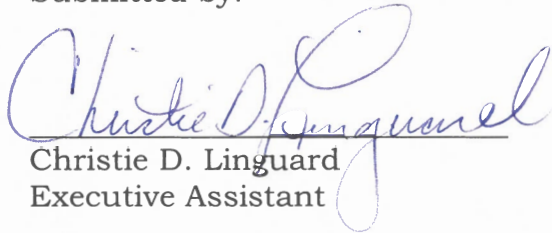
Next Regular Meeting

July 20, 2023 at 10:00 AM


Adjournment

On a motion by Commissioner Miller, seconded by Commissioner Malphrus and approved by the Commission, the meeting was adjourned at 12:00 P.M.

Submitted by:


Christie D. Linguard
Executive Assistant

Approved by:


Commissioner Gary Koche, M.D.
Secretary

June 1, 2023

Honorable Governor Henry McMaster
SC State House
1100 Gervais Street
Columbia, SC 29201

Dear Governor McMaster:

May 2023 marked four full years of my service to the SC Commission for the Department of Disabilities and Special Needs. I am grateful for your confidence in my ability to represent District 4 in the Upstate of SC for the last four years as it's been a privilege to help impact system-level changes for the betterment of individuals with disabilities in SC.

It's very important to me to be a positive champion for disability related issues, which is why it is the right time for me to use my energy, ideas, and passion to serve in other capacities to help and support individuals with disabilities, including my son. His disability is requiring a new level of care and my involvement as he enters a big transition. He needs to access more school and community supports, and I must be more actively involved to ensure he receives what is available in Greenville as he enters high school next year.

Effective immediately, I am no longer able to serve as the 4th district Commissioner. I know many disability advocates from the 4th district should you need recommendations. It is my hope that DDSN will be included in your \$5M budget request to analyze health agencies and determine how the DDSN system can better serve individuals with disabilities and their families. If I can ever be of assistance to your administration's efforts, please let me know.

Sincerely,



Robin Blackwood
Commissioner District 4

CC: Kristy Quattrone
Constance Holloway
Stephanie Rawlinson



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 (TEAMS)
Columbia, South Carolina**

June 15, 2023

10:00 A.M.

1. Call to Order *Chairman Stephanie Rawlinson*
2. Notice of Meeting Statement *Chairman Stephanie Rawlinson*
3. Welcome
4. Adoption of Agenda
5. Invocation *Commissioner Barry Malphrus*
6. Approval of the May 18, 2023 Commission Meeting Minutes
7. Commissioners' Update *Commissioners*
8. Nominations for Officers *Commissioner Ed Miller*
 1. Chairman
 2. Vice Chairman
 3. Secretary
9. Public Input
10. Programs and Services
South Carolina State Fair *Nancy Smith, CFE
General Manager*
11. Commission Committee Business
Policy Committee *Committee Chair Barry Malphrus*
Independent Living Skills Program Standard
12. Old Business:
Ongoing Projects List Update *Chairman Stephanie Rawlinson*

13. New Business:

1. Approval for Fiscal Year 2024 Contracts Over \$200,000
2. Financial Update

Mr. Quincy Swygert
Mr. Quincy Swygert

14. Executive Session

- Personnel Matter – Discuss the Hiring of a State Director for SCDDSN

15. Rise Out of Executive Session

16. Action on Item(s) Discussed in Executive Session, if needed

17. Next Regular Meeting – July 20, 2023 at 10:00 AM

18. Adjournment

SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS

MINUTES

May 18, 2023

The South Carolina Commission on Disabilities and Special Needs met on Thursday, May 18, 2023, 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 In-Person

Stephanie Rawlinson – Chairman

Barry Malphrus – Vice Chairman

Gary Kocher, MD

Eddie Miller

Michelle Woodhead

Microsoft Teams

David Thomas

Robin Blackwood - Secretary

DDSN Administrative Staff

Constance Holloway, Interim State Director/General Counsel; Harley Davis, Ph.D., Chief Administrative Officer; Quincy Swygert, Chief Financial Officer; Courtney Crosby, Internal Audit Director; Lori Manos, Associate State Director of Policy; Janet Priest, Associate State Director of Operations; Liz Lemmond, Director of Human Resources; Morgan Foster, Human Resources Manager; Carolyn Benzon, Deputy General Counsel; Stephanie Turner, Autism Division Director; Mark Kaminer, Information Technology Division; and Christie Linguard, Executive Assistant.

Notice of Meeting Statement

Chairman Rawlinson called the meeting to order and Commissioner Woodhead read a statement of announcement about the meeting that was distributed to the appropriate media, interested persons, and posted at the Central Office and on the website in accordance with the Freedom of Information Act.

Welcome

Chairman Rawlinson welcomed everyone to the meeting. She announced that this week is Employee Appreciation Week at the Agency. She also thanked Commissioner Malphrus for presiding over last month's meeting in her absence.

Adoption of the Agenda

On a motion by Commissioner Miller, seconded by Commissioner Malphrus, the meeting agenda was unanimously approved as written by the Commission. (Attachment A)

Invocation

Chairman Rawlinson gave the invocation.

Approval of Commission Meeting Minutes

Commissioner Malphrus made a motion to approve both the minutes from the April 20, 2023 Special Called Public Hearing regarding Regulations for the Agency and the April 20, 2023 regular Commission meeting; this motion was seconded by Commissioner Woodhead and unanimously approved by the Commission. (Attachment B)

Commissioners' Update

Commissioner Kocher noted that he has had conversations with a couple of constituents regarding the rules of the Americans with Disabilities Act (ADA) Compliance not being adhered to in the public. Chairman Rawlinson suggested that calls like this be directed to Disability Rights South Carolina.

Commissioner Miller reminded everyone that the Dr. Mary McLeod Bethune Legacy Festival will take place this weekend in Mayesville, SC. Interim Director Constance Holloway will be in the parade this year; and the Agency's communication staff will be present to handout brochures and answer any questions for the public on Saturday.

Commissioner Woodhead announced that the Roger C. Peace Rollin' Tigers wheelchair basketball team won the national championship.

Chairman Malphrus stated that the bill to make this Agency a cabinet agency did not pass. Things will remain as they are now until the foreseeable future.

Chairman Rawlinson explained that there was a glitch in sending out the meeting notice for this month's Commission meeting. She asked that any provider who did not receive the notice to let Ms. Linguard know as soon as possible. As a reminder, the Commission meetings take place every third Thursday of the month, beginning at 10:00 AM. Materials are posted on our website.

Chairman Rawlinson went on to thank all of the parents of our Regional Center consumers for their emails and text messages. She announced that a Coastal

Regional Center parent texted her about an upcoming event, the Annual Memorial Service, to remember those consumers that have passed away in the Center. This event will take place at the Coastal Regional Center in the gazebo on May 24, 2023 at 2:00 PM.

Chairman Rawlinson compiled a list of ongoing Agency projects that she would like an update on from the executive team by the next Commission meeting in June. She sent this information to the Agency's director. She passed a copy of the document to fellow Commission members and informed Commissioners Blackwood and Thomas that she will email them a copy.

Lastly, Chairman Rawlinson acknowledged that she received a copy of the *Pee Dee's Juice Journal* monthly booklet. She encouraged fellow Commission members and the general public to reach out to executive directors in other Regional Centers to see if they produce similar documentation so that everyone can be kept informed.

Public Input

There was no public input.

Programs and Services

Ms. Laurel Ybarra-Kane, Manager of Education and Interpretation at the SC State Museum, began by thanking the Commission for having her as a presenter today. She also thanked the Agency's staff for the partnership the Museum has established with the Agency. She went on to discuss the Museum's Accessibility Mornings Project (2nd Saturday every month). Ms. Ybarra-Kane spoke about the disability resources and educational team trainings at the Museum. The Disability Pride Day is July 8, 2023 from 10:00 AM – 3:00 PM, featuring Zot Artz, Community Partners, Sensory Room, ASL, Silent Discos and much more. This is a donation-based event that is free to the public. (Attachment C)

Employee Recognition and Service Award Ceremony

Ms. Foster began by presenting service pins to central office employees that have been a state employee for 10, 20 and 30+ years. During the employee appreciation events that will be held at the Regional Centers throughout this month, staff members who have reached their milestone years of state service during the 2022 calendar year will also be recognized. The employees presented were thanked for their hard work, dedication and service. Each Regional Center selected an Employee of the Year, who was introduced by their respective Facility Administrator and recognized by the Commission. Each employee exemplified the Agency's vision, mission and values and have far exceeded the expectations of their positions. Each recipient received a bonus and a certificate. Ms. LaToya

Tillman of the Midlands Regional Center was announced as the overall Employee of the Year for the Agency.

Old Business

A. Quarterly Incident Management Report

Ms. Dalton briefly spoke on the five-year incident trend data for Community-Based Services (including Residential and Day Service Settings) and Regional Centers through March 31, 2023. She also discussed compliance monitoring during reporting and implementation of the upcoming E-training associated with competency-based testing in a Learning Management System (LMS) for the provider network in the upcoming fiscal year. Questions were asked and answered regarding the State Law Enforcement Division (SLED) cases and reporting to the Commission. (Attachment D).

B. Update on Sage Squirrel Consulting, LLC & EdMetric, LLC

Dr. Davis began by stating that Sage Squirrel Consulting, LLC (SSC) has scheduled two listening sessions targeting persons supported and their families. In addition, the Agency has received and is reviewing priorities summarized by SSC from their conversations with partners, persons supported and their families.

DDSN and the Department of Health and Human Services (DHHS) attended a demonstration hosted by the state of Missouri to showcase their homegrown level of need tool. We are awaiting some additional information from Missouri to make a final determination of which level of need assessment tool to pilot in South Carolina.

Commissioner Blackwood asked for an update on the co-operative training for providers. Dr. Davis noted that this initiative got pushed back a bit due to the need to solicit providers for residential habilitation to support children. She will speak with providers at the upcoming monthly meeting on this Monday to discuss what types of co-operative training the providers would like to engage in currently.

New Business

Financial Update

Mr. Swygert presented the FY23 Spending Plan vs Actual as of April 30, 2023. To date, the Agency has expended \$817M, 87.05% of our approved spending plan of \$939.1M. The agency is currently 3.72% over budget. Commissioner Miller made a motion to approve the Financial Update, seconded by

Commissioner Blackwood and unanimously approved by the Commission.
(Attachment E)

Director's Update

Interim Director Holloway spotlighted Eric Jacobs of the Midlands Regional Center for his 31 years of service here at the Agency. Director Holloway announced the passing of a long-time employee, Ms. Catherine "Cathi" Margaret Browder, who was an Autism Administrator at the Pee Dee Regional Center. Heartfelt condolences are sent to her family, friends and staff at Pee Dee Regional Center. Lastly, she gave updates on the Agency. (Attachment F)

Next Regular Meeting

June 15, 2023 at 10:00 AM

Adjournment

On a motion by Commissioner Kocher, seconded by Commissioner Miller and approved by the Commission, the meeting was adjourned at 11:41 A.M.

Submitted by:

Approved by:

Christie D. Linguard
Executive Assistant

Commissioner Stephanie Rawlinson
Chairman

Sensory Friendly Morning (Plans as of June 2023)

THURSDAY, OCTOBER 19

10 A.M.- NOON.

Exceptional Citizens day at the South Carolina State Fair will begin a little quieter this year. The lights and sounds of the Fair will be a little lower from 10 a.m.-noon on Thursday, Oct. 19, 2023, when the S.C. State Fair hosts a Sensory-Friendly Morning. During Sensory-Friendly Morning, the S.C. State Fair will create an environment designed with children and adults with autism or sensory processing disorders in mind. The goal for the morning is to enable families who have a member, whether child or adult, with special needs to visit, explore and enjoy the fair.

Sensory Friendly Morning Highlights

- At 10 a.m. on Thursday, Oct. 19, children and adults with autism or sensory processing disorders are welcome to enter the fairgrounds, as our guest, up to one hour before the gates officially open to the public at 11 a.m.
- The barns will be open and the animals and their owners will be delighted to have guests see the animals and their morning routines.
- Select rides (tickets required) will be running with no music or lights from 10 a.m.-noon. (Games will start at 12:00 noon.)
- Buildings will open with a more peaceful atmosphere from 10 a.m.- noon.
- Food vendors will start to serve at 10 a.m.
- Quiet and more peaceful strolling acts will perform starting at 10 a.m.
- Guests may visit the Petting Zoo, Heritage Village, the xxxxx exhibit and the Pro Kitchen Cookie Kitchen.

Frequently Asked Questions

Do I need to pre-register?

There is no need to pre-register for this event.

Where should I park?

At the large public parking area called the Lexington Medical Center Fair Park, which will open no earlier than 9 a.m. at Gate 6. It costs \$10 to park. The GPS address is 901 George Rogers Blvd., Columbia, S.C. There are accessible spots on a first come first serve basis. Buses may drop guests off at the entry gate and then proceed to park.

Do I pay for admission?

Our Sensory Sensitive Friends and Exceptional Citizens along with one assistant or friend is welcome to enter the fairgrounds together as our guest on Thursday, Oct. 19.

Sensory Friendly Morning General Information:

- Sights and Sounds:
 - Sounds, lights and motion will be turned down as much as possible during the fair.
 - Noise-canceling headphones are recommended.
 - Please be aware that usual sights and sounds on the fairgrounds will return at noon, starting with the National Anthem music on the PA system and the raising of the American flag near the South Gate.
- For the safety and security of all guests, everyone will still be required to follow the mandatory clear bag policy and go through the metal detectors. Staff will make this process as sensory friendly as possible.
- All rides and games will begin at 12:00 noon.
- If you need special accommodations, ask for the gate superintendent.
- Use the story board found at [SCStateFair.org/sensoryfriendly](https://www.scsatefair.org/sensoryfriendly) to help plan your trip.
- The Cantey Building, which includes flowers, fine art, photography and student art tends to be a quieter building throughout the fair.
- The gates will open to the general public at 11 a.m. They will be told on Oct. 19 that it is sensory-friendly morning. Guests will be asked to respect the quietness of the fairgrounds until noon.
- Visit [SCStateFair.org/sensoryfriendly](https://www.scsatefair.org/sensoryfriendly) for updated or additional details.





South Carolina
Department of Disabilities
and Special Needs

Independent Living Skills (ILS) Program Standards

June 15, 2023 (NEW)

Effective July 1, 2023

DEFINITIONS:

Independent Living Skills (ILS): Services that develop, maintain and improve the community living skills of a waiver participant.

The service includes direct training from a qualified staff person to address the identified skill development needs of a waiver participant in the areas of:

- Communication skills.
- Community living and mobility.
- Interpersonal skills.
- Reduction/elimination of problem behavior.
- Self-care.
- Sensory/motor development involved in acquiring functional skills.

ILS training must be provided in either:

- the participant's home, or
- community settings typically used by the general public.

Desired Outcomes:

1. Increase the participant's independence by teaching skills so tasks and activities can be performed with decreased dependence on caregivers;
2. Increase the participant's opportunities to interact with people without disabilities who are not paid caregivers;
3. Increase the participant's ability to plan and carry out daily schedules, routines, and interactions similar to those of people without disabilities of the same chronological age;
4. Provide skill training in an environment where the skill will be used; and
5. Assist in the development of decision making skills necessary for all aspects of daily living.

Waiver participants requesting Independent Living Skills training must meet the following criteria:

- Must be at least 18 years of age and no longer able to participate in programs funded by the public school system;
- Must express a willingness to participate in an ILS program and demonstrate an ability to learn and perform the needed skills, as indicated by the assessment data; and
- Must have an identified outcome on their Support Plan related to independent living.

General Information:

- The Provider Agency may not impose requirements upon participants or their representative in addition to those set forth herein.
- ILS providers may not provide skilled care (i.e., care which requires nurse training/supervision and written certification).
- Providers must follow all applicable DDSN policies through provision of this service.

	Standard	Guidance
1.	Independent Living Skills will only be provided by DDSN qualified providers.	ILS providers must complete the DDSN provider qualification process, receive written documentation of their determination to meet the specified requirements, and be enrolled with SCDHHS.
2.	Independent Living Skills will be provided in accordance with the applicable DDSN Directives, procedures, and guidance.	
3.	<p>Each program will employ ILS Trainers (ILST) who meet the following qualifications:</p> <ul style="list-style-type: none"> A. Are at least 18 years of age. B. Have a high school diploma or equivalent (GED). C. Have the ability to speak, read, and write English. D. Have at least one year of experience with the target population. E. Are capable of following the Plan of Care with minimal supervision. F. Have no record of abuse, neglect, crimes committed against another or felonious conviction of any kind. G. Are free of communicable diseases. H. Maintain a valid driver's license and are insurable. I. Have references from past employment. 	<p>Documentation demonstrating competencies in Item C must be maintained in the staff's file.</p> <p>Background checks must be done in accordance with DDSN Directive 406-04-DD: Criminal Record Checks and Reference Checks of Direct Caregivers.</p> <p>Refer to DDSN Directive 603-06-DD: Tuberculosis Screening.</p>
4.	<p>Each program will employ an ILS Supervisor (ILSS) who meets the following criteria:</p> <ul style="list-style-type: none"> A. Bachelor's Degree; 	

	<p>B. At least five years of experience working with the target population; and</p> <p>C. Completed minimum training requirements outlined in the ILS Standards.</p>	
5.	<p>The ILS Supervisor must:</p> <p>A. Meet each recipient of ILS services prior to completion of his/her ILS plan.</p> <p>B. Provide input during the participant's functional assessment phase.</p> <p>C. Review and sign all completed ILS plans, indicating approval.</p> <p>D. Observe each ILS worker during the active delivery of services to a participant at least once per quarter.</p> <p>E. Review the participant's progress toward identified goals/objectives with the ILST and evaluate the need for revisions to the interventions specified on the plan as needed, but at least quarterly.</p> <p>F. Provide ongoing supervision and training to staff.</p>	
6.	<p>Prior to providing services, the Independent Living Skills staff must meet the requirements for criminal background checks.</p>	<p>Checks must be done in accordance with DDSN Directive 406-04-DD: Criminal Record Checks and Reference Checks of Direct Caregivers.</p> <p>No person may provide/supervise ILS who has been convicted, pled guilty, or nolo contendere to:</p> <p>a. Abuse, neglect or mistreatment of a consumer in any health care setting.</p>

		<ul style="list-style-type: none"> b. An “Offense Against the Person” as provided for in Title 16, Chapter 3. c. An “Offense Against Morality or Decency” as provided for in Title 16, Chapter 15. d. Contributing to the delinquency of a minor as provided for in S.C. Code Ann. § 16-17-490 (Supp. 2022). e. The common law offense of assault and battery of a high and aggravated nature. f. Criminal domestic violence, as defined in S.C. Code Ann. § 16-25-20 (Supp. 2022). g. A felony drug-related offense under the laws of this state. h. A person who has been convicted of a criminal offense similar in nature to a crime previously enumerated when the crime was committed in another jurisdiction or under federal law; has a substantiated history of child abuse and/or neglect and/or convictions of those crimes listed in SC Sex Offender Registry. <p>Criminal Record Checks of Direct Care Staff, as defined in S.C. Code Ann. § 44-7-2910</p>
7.	Staff must be screened for tuberculosis prior to working with participants and comply with subsequent screenings.	Refer to DDSN Directive 603-06-DD: Tuberculosis Screening.
8.	<p>Staff must be trained and deemed competent in accordance with DDSN Directive 567-01-DD: Employee Orientation, Pre-Service and Annual Training Requirements.</p> <p>The ILST/ILSS must demonstrate competency by successful completion of exams designed to measure knowledge in the areas of:</p> <ul style="list-style-type: none"> 1. Confidentiality. 2. Supervision. 	Understanding disabilities training must be specifically related to person requiring services.

	<ol style="list-style-type: none"> 3. Prevention of abuse and neglect. 4. First aid. 5. Fire Safety/disaster preparedness. 6. Understanding disabilities. 7. Signs and symptoms of illness and seizure disorders. 8. Basic teaching strategies for people with disabilities. 	
9.	<p>There will be a staff development/in-service education program operable in each provider organization in which all staff are required to participate.</p>	<p>From DDSN Directive 567-01-DD: Employee Orientation, Pre-Service and Annual Training Requirements: staff must be periodically required to demonstrate continuing competency on the most critical information and skills taught in the curriculum. Providers have wide latitude in designing the format of such rechecks.</p> <p>Encouraging staff commitment to continuing personal and professional development will expand the capacity to provide quality services and supports. Staff should routinely be exposed to information regarding training resources and opportunities. Supervisors must be working with staff to identify annual personal and professional goals.</p>
10.	<p>ILS participants must:</p> <ul style="list-style-type: none"> • Be at least 18 years of age and no longer able to participate in programs funded by the public school system; • Must express a willingness to participate in an ILS program and demonstrate an ability to learn and perform the needed skills, as indicated by the assessment data; and • Must have an identified outcome on their Support Plan related to independent living. 	<p>ID/RD and HASCI Waiver Manuals</p>

11.	<p>ILS services are delivered in a manner that ensures the participant's rights are protected including but not limited to his/her right of privacy, dignity and respect, and freedom from coercion and restraint.</p>	<p>Rights include: Human Rights, Constitutional Rights, and Civil Rights.</p> <ul style="list-style-type: none"> • Each individual's right to privacy, dignity, and confidentiality in all aspects of life is recognized, respected, and promoted. • Personal freedoms are not restricted without due process. • Participants are expected to manage their own funds to the extent of their capability. • Due process is upheld, including Human Rights Committee review of restriction of personal freedoms.
12.	<p>Independent Living Skills participants are supported to make decisions and exercise choice regarding the specific focus of training.</p>	
13.	<p>Independent Living Skills participants are free from abuse, neglect, and exploitation.</p>	
14.	<p>Independent Living Skills will only be provided to participants authorized by a DDSN qualified Case Manager.</p> <p>Services provided in the absence of an authorization or in excess of the amount (units) authorized are not reimbursable.</p>	<p>Electronic service authorizations will be issued in Therap for approved participants.</p> <p>Case Managers may only authorize services based on the following authorization schedule:</p> <ul style="list-style-type: none"> • Assessment and Plan: up to eight (8) hours one time, annually (32 units) • Ongoing ILS Training Services: up to 15 hours (60 units) per week <p>Documentation must be provided as justification to support the need for the number of units authorized.</p>
15.	<p>Within 15 business days of receipt of a referral, the Independent Living Skills provider will notify the Waiver Case Manager in writing of their intent to:</p> <ul style="list-style-type: none"> • Accept the individual for service, • Accept the referral for services, or • Reject the referral. 	

	Service Provision	Guidance
16.	<p>Within 30 days after acceptance of the referral, but prior to the provision of Independent Living Skills training, the ILS Trainer must complete the Independent Living Skills assessment and with input from the waiver participant and oversight by the ILS Supervisor. An updated assessment must be completed annually at the time of planning.</p> <p>The assessment identifies the abilities/strengths and interest/preferences of the participant in the following areas:</p> <ul style="list-style-type: none"> • Money Management/Consumer Awareness. • Food Management. • Personal Appearance and Hygiene. • Health. • Housekeeping. • Housing. • Transportation. • Emergency and Safety Skills. • Knowledge of Community Resources. • Interpersonal Skills. • Legal Skills. • Coping Skills. 	<p>The assessment must identify the necessary areas of skill development and essential information to maintain the participant’s health, safety, supervision and rights protection. The plan must identify specific outcomes sought through provision of ILS.</p> <p>A copy of the Assessment must be available and accessible to the ILST.</p>
17.	<p>Based on the results of the ILS Assessment, within 30 days of the assessment completion date and annually</p>	<p>The initial Independent Living Skills plan must be completed within 30 days of assessment completion.</p>

	<p>thereafter, the Independent Living Skills plan outlining the training goals and objectives must be completed by the ILST with involvement from the participant and/or his legal guardian and other identified supports the plan must be approved by the ILS Supervisor prior to implementation.</p>	<p>At a minimum, a new plan must be completed within 365 days of the existing plan.</p> <p>The ILS Supervisor must review and approve the plan within 30 days of the assessment completion date.</p> <p>Participants are encouraged to invite significant people of their choice to participate in their assessment and/or plan meeting(s).</p> <p>A person-centered service plan will assist the individual in achieving personally defined outcomes in the most integrated community setting, ensure delivery of services in a manner that reflects personal preferences and choices, and contribute to the assurance of health and welfare.</p>
18.	<p>The ILS plan must contain:</p> <ul style="list-style-type: none"> • Measurable goals, that are specific to the participant, and are based on his/her interests, preferences, strengths, and experience with the expected outcome of meeting the participants goal to achieve greater independence in the identified areas. • A description of the objectives/activities identified to support the person’s goal for independence in the identified areas. • Timelines for achievement, and review/assessment of progress toward the goals and objectives. • Emergency contact information. • Relevant medical information. • Any information necessary to support the person during the provision of ILS services. 	<p>Objectives/activities must focus on the areas of skill development identified in the participant’s Independent Living Skills plan and must be based on his/her abilities/strengths, interests/preferences.</p> <p>All critical and emergency information for this individual must be documented in the plan. Known medications taken by the individual must be listed and any assistance of medicating must be documented (self-medicate or assisted medicate). All known relevant medication information must be documented including specific instructions concerning individual reactions, side effects or restrictions to medicine must be documented.</p>
19.	<p>The interventions in the plan must support the provision of Independent Living Skill Services as defined in these standards.</p>	

20.	As soon as the plan is developed and approved by the Independent Living Skills Supervisor, it must be implemented.	
21.	The ILS training provided must be focused on the achievement of the participant's desired outcomes as described in his/her ILS plan.	
22.	Data must be collected as specified in the plan and documentation must be present to show that the service was rendered on the dates for which reimbursement is requested.	Data documenting the response to training must be sufficient to measure the progress.
23.	<p>Data entries must be:</p> <ul style="list-style-type: none"> • True and accurate; • Complete; • Logically sequenced; • Typed; and • Dated and signed by the staff making the entry. 	
24.	The plan must be amended when significant changes are necessary.	Significant changes may include but are not limited to: interventions are not appropriate, interventions are not supporting progress, and/or the participant's life situation has changed.
25.	<p>A record shall be maintained, for each participant, which contains, at a minimum, the items listed below:</p> <ul style="list-style-type: none"> • Current plan that supports the provision of the service being delivered; • Data to support the implementation of the plan collected at the time services were delivered. 	

	<ul style="list-style-type: none"> • Record of unusual behavior incidents which are recorded at the time of occurrence; • Record of illness and accidents; • Authorization for emergency medical service and medication administration; and • Record of critical incidents. 	
26.	Any evidence of illness or injury shall be documented in the participant's record and action shall be taken to obtain necessary medical treatment of the individual and to safeguard others from contagion.	
27.	Reporting requirements are performed correctly.	<p>According to the DDSN Finance Manual and applicable DDSN Directives.</p> <ul style="list-style-type: none"> • 100-09-DD: Critical Incident Reporting • 505-02-DD: Death Reporting and Mortality Review Requirements. • 200-14-DD: Community Capital Funding Applications. • 534-02-DD: Procedures for Preventing and Reporting Abuse, Neglect, or Exploitation of People Receiving Services from DDSN or a Contract Provider Agency.
28.	ILS providers may not provide skilled care.	No skilled care of any kind may be provided as part of this service.



June 9, 2023

SC Department of Disabilities & Special Needs
3440 Harden Street Ext
PO Box 4706
Columbia, South Carolina 29240

Re: Public Comment: Independent Living Skills (ILS) Program Standards

To Whom It May Concern:

Able South Carolina (Able SC) is a change agent committed to fostering an inclusive society that empowers individuals with disabilities to live fully-engaged and self-directed lives. We challenge stereotypes, protect disability rights and champion social reform. Able SC is a federally recognized Center for Independent Living, a non-residential, community-based, not-for-profit organization that provides individual and systems advocacy to create options and choices for South Carolinians with disabilities to live independent lives. Able SC is required through the Rehabilitation Act of 1973 to be directed and staffed by a majority of professionals with disabilities. This is a point of organizational pride, as the majority of our Board of Directors have significant disabilities and over 80% of our staff have disabilities. Core services provided by Able SC include systemic and individual advocacy, peer mentoring, independent living skills training, information, and referral services, youth transition services, and institution transition and diversion services. Our services promote self-sufficiency and independence for South Carolinians with disabilities.

Able SC's base federal funding was established by Title VII of the Rehabilitation Act and reflects Congressional findings that Americans with disabilities form one of the most disadvantaged groups in society. The Act sets a national goal of providing individuals with disabilities the tools they need to make informed choices and decisions and to achieve equality of opportunity in education, the pursuit of economic and personal self-sufficiency, civic involvement, and participation in community life. The Act recognizes that an individual cannot successfully obtain and maintain a job if basic living needs are not met, and therefore, Centers for Independent Living were created.

The federal government recognizes that Centers for Independent Living do not receive adequate federal funding to provide services. Therefore, the federal government requires each Center for Independent Living to diversify funding via other means, including state appropriations, contracts with state agencies, private and public grants, fundraising, etc. In South Carolina, there are three federally recognized Centers for Independent Living that can provide statewide services via this waiver.

www.able-sc.org

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SOUTH CAROLINA

While we are strongly encouraged by the Independent Living Waiver, we caution to only open this to experienced and professional organizations required via the Rehabilitation Act of 1973, as amended, to provide independent living skills services. Suggested language should include:

- (1) Are a federally recognized Center for Independent Living which are a private nonprofit agency for individuals with significant disabilities (regardless of age or income) that is not residential; is consumer-controlled; is community-based; takes a cross-disability approach; is designed and operated within a local community by individuals with disabilities; and provides an array of independent living services, including, at a minimum, independent living core services as they are defined in 29 United States Code (U.S.C.) §705(17) and Title VII, Chapter I, Subchapter C of the Rehabilitation Act, as Amended by the workforce innovation and opportunity act (WIOA) of 2014.
- (2) Have a philosophy that promotes the consumer's ability to live independently in the most integrated setting or the maximum community inclusion of persons with significant disabilities. This philosophy includes the following independent living services: advocacy, independent living skills training, peer counseling, information and referral services, youth transition, diversion services, and community transition. S

This is a proven success in many states across the United States and separates Independent Living skills services from other typical providers who do not have the expertise to provide services individually or within the philosophy of independent living.

Able SC wholeheartedly supports the efforts of the Department of Disabilities and Special Needs to ensure there are services to adequately build independent living skills for consumers with the most significant disabilities in South Carolina.

Please do not hesitate to contact me with any questions.

Best,

Kimberly Tissot
President & CEO

www.able-sc.org

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SCDDSN Ongoing Projects

1. **HCBS Settings Regulation**

The Home and Community-Based Services (HCBS) Settings Regulation implementation has been underway for a number of years.

Have we reached 100% compliance in all settings in South Carolina (SC) where HCBS are delivered, including DDSN-supported residential and day services settings?

2. **Conflict-Free Case Management in HCBS Settings**

Regulation requires Case Managers to be conflict free by 12/31/23, with a transition benchmark of 50% transition by 12/31/22 and 100% by 12/31/23.

Is SCDDSN is on track to meet the 100% benchmark by December 31, 2023?

3. **Waiver Enrollment and State Level Case Management**

In FY2022, three state level case managers were hired with plans to hire additional five in FY2023.

Have we hired the additional staff?

When will the new enrollment system be in place and when will the commission learn about this new process?

4. **Person-Centered Thinking Training and Learning Management System (LMS) contractual and procurement processes were initiated in FY2022**

Has full LMS implementation started in FY2023?

5. **Information Technology**

Technology Refresh:

In 2022, DDSN performed assessments on all technology infrastructure.

Is DDSN is staying current and compliant with industry standards and information security requirements?

Automation:

In 2022, DDSN was working to improve its office automation efforts. IT was working with various departments to help automate manual processes.

Where are we in this process?

Digitizing:

In 2022, DDSN was working to expand its Electronic Document Management System capabilities. IT was working through the discovery process to determine the needs of the various DDSN departments.

Where are we in this process?

Website Redevelopment:

In 2022, DDSN was engaged in a website redevelopment project that would modernize DDSN's web presence.

Where are we in this process?

Contract Management System:

In 2022, DDSN was working to implement an electronic contract management system.

Is this process in place and how is it working?

Endpoint protection:

In 2022, DDSN security and IT teams implemented Microsoft Endpoint Protection.

Is this working?

6. **Apprenticeship SC and Direct Support Professional (DSP) Career Ladder Program at DDSN started in 2022**

Is this program up & running? Is it working? What are the outcomes?

7. In 2022, DDSN overhauled pay structure for DSPs in coordination with the division of State Human Resources in the SC Department of Administration. The goal was to address recruitment and retention of DSPs at DDSN Regional centers by providing DSPs additional career advancement opportunities and the chance to earn greater pay.

What are the stats on this change?

8. **Interdisciplinary Technical Advisory Committee (ITAC)**

Is this working?

9. Restoration of Positive Behavior Supports Training with University of SC (UofSC) Center for Disability Resources (CDR). DDSN renewed the contract for provision of this training in 2022.

What have been the benefits to the service delivery system under this training based on our reports?

10. Corrective Action Plan (CAP) Process for Identified Material Deficiencies. This process was supposed to allow DDSN to assess provider accountability and better protect those that we serve.

How is this working?

11. **Autism Strategic Planning**

In 2022 DDSN was working with partner agencies, including SC DHHS, the SC Department of Mental Health, and the SC Department of Social Services, to develop a state level autism strategic plan to ensure individuals with autism spectrum disorder have timely evaluations and eligibility determinations, and that early intervention and other services are available and accessible.

Is this plan complete and if so when will it be presented to the commission?

12. **Crisis Stabilization and Dually Diagnosed Individuals**

Where are we on our Crisis stabilization facilities? When will they open?

13. **Council on Quality and Leadership CQL and Post-Payment Claims Review**

DDSN engaged CQL in 2022 and implemented The Basic Assurances® process as a way to require providers to improve the quality of services delivered over time. The goal was to allow DDSN to move from compliance to quality.

How is this process moving forward?

Where are we in the implementation of this?

14. **Post-Payment Claims Review**

In 2023, DDSN was to implement a post-payment claims review process in coordination with SC DHHS. The post-payment claims review process would require review of a subset of service-specific indicators, to include verification of eligibility, inclusion of proper authorizations, evidence of service planning, and evidence of service delivery.

Have we started this?

How is it going?

15. **DDSN-Owned Properties and Deferred Maintenance at Regional Centers**

As part of Proviso 36.6, which went into effect 7/1/22, DDSN prioritized deferred maintenance at DDSN-owned properties across the state. An agency directive was modified that outlines the process for providers occupying these properties to complete these deferred projects, and

this directive is currently in effect. In addition, DDSN is ensuring deferred maintenance at Regional Centers is completed, including painting, roof replacements, bathroom upgrades, and purchase of new furniture, mattresses and other supplies for residents and staff of Regional Centers.

Where is SCDDSN at in compliance process?

What % of the work is completed?

16. **Risk Assessment and Mitigation Strategies**

In 2022, the biggest risk to services provided by DDSN in SC is the shortage of providers willing to serve individuals with ID/RD and related disabilities, head and spinal cord injury, and autism spectrum disorder, especially those that have high behavioral needs and/or additional mental health diagnoses. In order to best mitigate this identified risk, DDSN recommended:

Rate increases for human service providers that will help with recruitment efforts in the current labor market

Solution-based interagency collaborations to ensure these individuals have access to all available services provided by these agencies, as this is their right, and

Data sharing across agencies who share service populations, which can be strengthened with legislative mandates.

Hiring a provider recruiter to recruit new providers to SC.

Have we addressed all of these areas?

If not, what are the agencies plans to do so?

17. **Zero Tolerance for Abuse & Neglect**

The commission adopted a zero-tolerance policy for abuse and neglect in our regional centers. ANE reports resulting in arrest is down from 12 to 4 this year. That's good! ANE reports with admin findings is up from 43 to 60 this year. This is concerning.

Why do we think this number is up when we are offering additional training and have a zero-tolerance policy?

Obviously, ANE with an arrest result in employee dismissal.

What are the employee consequences for admin findings?

18. **DHHS Audit of DDSN Waivers is taking place**

What kind of audit is this?

19. Cameras in Regional Centers.

Did DDSN add additional cameras in facilities?

Did DDSN add cameras to the exteriors of facilities?

How long does DDSN hold recordings now with no incident?

How long does DDSN hold recordings of reported incidents?

How long does DDSN hold recordings of incidents with administrative findings?

How long does DDSN hold recordings of incidents with criminal findings?

20. **Tech First State Status**

The commission voted to have DDSN assist the providers association's efforts to make SC a tech first state.

Where does this process stand?

What are the next steps?

FY24 CONTRACTS FOR APPROVAL

Renewal requests for items listed below are for existing contracts, scheduled to end June 30th, and are over the executive limitation's threshold of \$200K. There are no new contracts which need approval at this time. Subsequent renewal requests, or approvals, for new or existing contracts will be included as part of regularly scheduled commission meetings.

Contract	FY24 Amount	FY23 Amount	Brief Description
Babcock Center <i>Medical Model Residential</i>	\$1,121,574	\$1,121,574	Medical Model Residential are ICF facilities housing individuals with higher intense medical needs. For example, individuals with feeding tubes or colostomy bags require more intense nursing and cannot necessarily be handled by DSPs alone. FY23 contains amendment.
Charles Lea Center <i>Medical Model Residential</i>	\$1,527,326	\$1,527,326	Medical Model Residential are ICF facilities housing individuals with higher intense medical needs. For example, individuals with feeding tubes or colostomy bags require more intense nursing and cannot necessarily be handled by DSPs alone.
SC Respite Coalition <i>Caregiver Training</i>	\$257,000	\$257,000	This is a continuation of the existing contract for respite training for caregivers & families. The contract also includes background checks for caregivers.
Special Olympics <i>Unified Sports Program</i>	\$250,000	\$250,000	The DDSN Contract with Special Olympics provides funding for the Special Olympics of South Carolina Inc. for their Unified Sports Program. This funding is for offering Unified Sports programs in all available sports, to recruit athletes for available sports, and to offer competition and training opportunities in all available sports.
USC - Center for Disabilities Resources <i>Attendant Care</i>	\$200,000	\$200,000	This is a continuation of an existing contract that provides nursing oversight of the self-directed attendant care program. Activities include reviewing participant assessments for self-direction, conducting match visits between workers and Waiver participants, and tracking recertification requirements of workers.

Contract	FY24 Amount	FY23 Amount	Brief Description
USC - Center for Disabilities Resources <i>Training & Technical Assistance</i>	\$316,699	\$316,699	This is a continuation of an existing contract that provides training programs and technical assistance for DDSN staff. The contract also includes positive behavior supports training to those referred to by DDSN.
Greenwood Genetic <i>Greenwood Genetic Center Combined Services & * Carol Campbell Project</i>	\$13,945,200	\$11,945,200	The Greenwood Genetics Center (GGC) contract provides funding to support the work of the GGC as well as for services they provide to DDSN eligible individuals. This funding for GGC comes to DDSN under a Special Item Funded Program that is built into our Agency’s base appropriations from the legislature. The scope of services includes autism research, genetic testing, genetic counseling, and neural tube defect prevention. The amount of this contract for the previous year was \$8.3 million and grew because of Medicaid billing.
Palmetto Psychiatry Consultants, LLC <i>Dr. Jesse Raley</i>	\$249,000 <i>(maximum)</i>	\$249,000 <i>(maximum)</i>	This is a continuation of an existing contract. However, for FY 23, additional services are being purchased and the rate per hour increased (from \$210 to \$255). These changes resulted in a \$101,000 increase to the maximum amount which may be billed during the year. The additional services being purchased include: <ul style="list-style-type: none"> i. Participation in the Interdisciplinary Technical Assistance Committee (ITAC); and ii. Outreach and training to various behavioral health professionals, other service providers including to, medical professionals and other professionals who deliver services and support to those eligible for DDSN services.

**Assumption - \$2M Carol Campbell Project will not be included in Governor’s budget vetoes as this was included in the Executive Budget*

FY 23 Spending Plan VS Actual Expenditures - thru 5/30/2023

Category	Approved Spending Plan	Cash Expenditures YTD	SCDHHS Monthly "Wash" Expenditures with Revenue YTD *	Total Monthly Expenditures YTD	Remaining Spending Plan	Spending Plan Deviation with Actual
DDSN spending plan budget	\$ 939,135,153	\$ 299,109,916	\$ 602,896,794	\$ 902,006,710	\$ 37,128,443	REASONABLE
Percent of total spending plan remaining	100.00%	31.85%	64.20%	96.05%	3.95%	
% of FY Remaining					8.33%	
Difference % - over (under) budgeted expenditures					4.38%	

Methodology & Report Owner: DDSN Budget Division