



# **COMMUNITY SERVICES STANDARDS**

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## COMMUNITY SERVICES STANDARDS

The mission of the South Carolina Department of Disabilities and Special Needs (DDSN) is to assist individuals with disabilities and their families through choice in meeting needs, pursuing possibilities; and achieving life goals and minimize the occurrence and reduce the severity of disabilities through prevention. Consistent with the agency's mission, the intent of DDSN Community Service is to provide individuals with an Intellectual Disability or a Related Disability (ID/RD), Autism Spectrum Disorder (ASD), Traumatic Brain Injury (TBI), Spinal Cord Injury (SCI), and Similar Disability (SD) the supports needed in order for them to meet their needs, pursue possibilities and achieve their life goals.

[DDSN Directive 700-07 DD: Employment First](#): While all of the DDSN Day Services (i.e., Career Preparation, Community Services, Day Activity and Support Center) and Employment Services (i.e., Individual and Group) can be provided in integrated community settings and can lead to meaningful outcomes, DDSN promotes employment outcomes (and individual employment in particular) as the most meaningful outcomes for adults of working age.

### **DEFINITIONS:**

Community Services are aimed at developing one's awareness of interaction with and/or participation in their community through exposure to and experience in the community and through teaching such concepts as self-determination, self-advocacy, socialization and the accrual of social capital. Services will be provided in facilities licensed by the state. On site attendance at the licensed facility is not required to receive services that originate from the facility.

Transportation will be provided from the individual's residence to the habilitation site when the service start time is before 12:00 Noon. Transportation will be available from the individual's habilitation site to their residence when the service start time is after 12:00 Noon. The cost for transportation is included in the rate paid to the provider.

Fifty percent (50%) of the total units received in Community Services must be delivered in a community location/setting (i.e. outside the facility and not in the individual's home).

Core Activities related to Community Services include:

- Assistive Technology Supports.
- Independent Living Skills.
- Informed Choice.
- Social Capital.
- Community Engagement.

Day Services: Day Services are services delivered in/or originating from a DDSN Licensed Day Facility. Day Services include Employment Services-Group, Career Preparation, Community Services, Day Activity and Support Center.

### **ANTICIPATED OUTCOMES:**

The primary goal/outcome of Community Services is to enhance the individual's independence, support informed choice and develop real life skills through participation in natural settings within the community while working to expand relationships and natural supports.

Services are based upon the preferences and choices of each individual and designed to measure progress toward outcomes specified in the individual's Day Services Plan. Regardless of skill level, adults with disabilities will experience activities of their choice that help to enrich their days and make a meaningful difference in their lives.

Activities should occur in natural settings that do not isolate participants from others without disabilities.

Expected goals/outcomes of Community Services include:

- Demonstrated increased independent living skills in natural settings within the community.
- Communicate, through informed choice, interests and preferences.
- Establishment of social capital by expanding relationships and cultivating natural supports.
- Obtaining needed assistive technology.
- Greater community engagement and participation.

It is expected that Community Services be provided in a manner that promotes:

- Dignity and respect.
- Health, safety and well-being.
- Individual/family/legal guardian participation, choice control and responsibility.
- Relationships with family, friends and community connections.
- Personal growth, meaningful experiences and individual satisfaction.
- Independence and community integration.

It is also expected that Community Services reflect the principles of DDSN and therefore services should:

- Be person centered.
- Be responsive, efficient, and accountable.
- Be individually focused, strengths-based and results oriented.
- Maximize potential based on an individual's interests, preferences and choices.
- Be based on best and promising practices.

Standards		Guidance
1	Community Services will be provided in accordance with all state and federal laws.	
2	Community Services will only be provided in or originate from facilities licensed by DDSN as Day Facilities.	On site attendance at the licensed facility is not required to receive services that originate from the facility.  Please refer to <a href="#">DDSN Standards for Licensing Day Facilities</a> .
3	Community Services will be provided in accordance with applicable DDSN Directives, procedures and guidance.	
4	Community Services will only be provided by DDSN qualified Day Services providers.	
5	The Community Services provider must designate a Program Director who: <ul style="list-style-type: none"> <li>• Is at least 21 years old.</li> <li>• Has a four (4) year, baccalaureate degree from an accredited college or university in the human services or related field and two (2) years experience in administration or supervision in the human services field or have a master's degree from an accredited college or university in the human services or related field and one (1) year experience in administration or supervision in the human services field.</li> <li>• Has references from past employment.</li> </ul>	A Program Director may serve more than one program.
6	Staff/anyone contracted to provide direct support in Community Services: <ul style="list-style-type: none"> <li>• Is at least 18 years old;</li> <li>• Has a valid high school diploma or its certified equivalent;</li> <li>• Has references from past</li> </ul>	Competency in the following areas may be considered the equivalent to a high school diploma. Staff/anyone contracted to provide direct support must be able to: <ol style="list-style-type: none"> <li>a. Read and comprehend written instructions in English which may include health care information;</li> <li>b. Write and type information in English sufficient to communicate facts clearly and complete required documentation; and</li> </ol>

<b>Standards</b>		<b>Guidance</b>
	<p>employment if the person has a work history;</p> <ul style="list-style-type: none"> <li>• Is capable of aiding in the activities of daily living and implementing the Day Services Plan of each individual for whom they are providing supports; and</li> <li>• Has a valid driver's license if duties require transportation of individuals.</li> </ul>	<p>c. Communicate verbal and/or written information in English effectively to others.</p> <p>Documentation demonstrating competencies in items a – c must be maintained in the staff's/or contracted employee's file.</p>
7	Staff/anyone contracted to provide direct support must meet requirements for criminal background checks.	Background checks should be done in accordance with <a href="#">DDSN Directive 406-04-DD</a> : Criminal Records Checks and Reference Checks of Direct Caregivers.
8	Staff/anyone contracted to provide direct support must pass an initial physical exam prior to working in the program.	Pass = no documentation in the physical exam report of conditions present that would jeopardize health and safety of individuals receiving services or staff's/anyone contracted to provide direct support and their ability to perform required duties.
9	Staff/anyone contracted to provide direct support must be screened for Tuberculosis (TB) in accordance with DDSN Directive 603-06-DD.	Pass = no evidence of communicable disease; meets requirements of <a href="#">DDSN Directive 603-06-DD</a> : Tuberculosis Screening.
10	Staff/anyone contracted to provide direct support must be trained and be deemed competent in accordance with DDSN Directives.	
11	There will be a staff development/in-service education program operated by each Community Services provider which requires all staff/anyone contracted to provide direct support to participate in and complete in-service education programs and staff development opportunities in accordance with DDSN Directives.	<p>Staff/anyone contracted to provide direct support must periodically be 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/anyone contracted to provide direct support commitment to continuing personal and professional development will expand the capacity to provide quality service and supports. Staff/anyone contracted to provide direct support should routinely be exposed to information regarding training resources and opportunities. Supervisors should be working with staff to identify annual personal and professional goals.</p>

	<b>Standards</b>	<b>Guidance</b>
12	<p>Each Community Services provider will have written policies on:</p> <ul style="list-style-type: none"> <li>• Use of volunteers and substitutes.</li> <li>• Use of contracted employees, if applicable.</li> <li>• Program evaluation.</li> <li>• Administration of medication.</li> <li>• Admission and discharge of participants.</li> <li>• Personnel practices.</li> <li>• Procedures to be followed when a participant is discovered to be missing.</li> <li>• Termination of participants from the program which include: <ul style="list-style-type: none"> <li>○ A list of reasons for dismissal.</li> <li>○ Methods of averting the termination.</li> <li>○ When consultation and concurrence with DDSN prior to termination will be sought.</li> </ul> </li> <li>• And keeping and managing a waiting list for those who are seeking entry into each service provided in the program that includes the frequency with which the list will be reviewed.</li> </ul>	
13	<p>Individuals receiving Community Services are free from abuse, neglect and exploitation.</p>	<p><a href="#">DDSN Directive 534-02 DD</a>: Procedures for Preventing and Reporting Abuse, Neglect, or Exploitation of People Receiving Services from DDSN or a Contracted Provider Agency.</p>
14	<p>Individuals receiving Community Services are:</p> <ul style="list-style-type: none"> <li>• Informed of their rights.</li> <li>• Supported to learn about their rights.</li> <li>• And supported to exercise their rights.</li> </ul>	<p>Rights include Human rights, Constitutional rights and Civil rights:</p> <ul style="list-style-type: none"> <li>• Each individual’s right to privacy, dignity and confidentiality in all aspects of life is recognized, respected and promoted.</li> </ul>

	Standards	Guidance
		<ul style="list-style-type: none"> <li>• Personal freedoms are not restricted without due process.</li> <li>• Individuals are expected to manage their own funds to the extent of their capability.</li> <li>• Due process is upheld, including the Human Rights Committee review of restriction of personal freedoms.</li> <li>• Individuals with limited knowledge and experience receive training and opportunities to explore their individual rights and the responsibilities that accompany them.</li> </ul>
15	<p>Community Services will only be provided to those who are authorized by a DDSN Board or contracted Case Manager.</p> <p>Individuals may be authorized a maximum of 520 Day Services units annually.</p> <p>Services provided in the absence of an authorization <b>or</b> in excess of the amount (units) authorized are <b>not</b> reimbursable.</p>	<p>Case Management will provide the chosen Community Services provider with an authorization that at a minimum includes the following information:</p> <ul style="list-style-type: none"> <li>• Individual’s information: name, address, DOB, authorization date, Medicaid number (if applicable), name of court appointed legal guardian (if applicable), emergency contact information, and name with contact information of referring Case Manager and Case Management provider.</li> <li>• Type of service authorization, number of authorized units; effective date and expiration date of the authorization.</li> <li>• A unit is considered 2-3 hours of service delivered in a calendar day. To receive 2 units of service per day, the first unit must be 3 hours and the second unit must be a minimum of 2 hours, for a total of 5 hours of service.</li> <li>• Additional information: Critical and emergency information, health/medical information, and care and supervision information.</li> </ul>
16	<p>Psychological evaluations are required. Adults shall be tested using a restrictive test of intelligence administered by a licensed or certified psychologist on program entry, re-entry or at age 22 whichever occurs first, unless there is a valid psychological evaluation completed within three (3) years of admission on record.</p>	<p>For adults, at the time of program entry, a psychological evaluation that was completed at age 22 or is less than three (3) years old must be available for new program participants. In lieu of a psychological evaluation, a current (i.e., within one (1) year of program entry) Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID) Level of Care (LOC) Determination that indicates the LOC criteria were met may be used. For example, if a 35-year-old participant</p>

Standards		Guidance
		<p>were entering the program on March 25, 2021, one of the following could be accepted:</p> <ul style="list-style-type: none"> <li>• A psychological evaluation completed when he/she was 22 (2008) [on program entry, re-entry or at age 22 whichever occurs <u>first</u>].</li> <li>• One completed within the last three (3) years (2008-2021) [unless there is a valid psychological evaluation completed within three (3) years].</li> <li>• Or a current LOC Determination that is based on a psychological evaluation completed from 2008 and forward.</li> </ul>
17	<p>Individuals receiving Community Services are supported to make decisions and exercise choice regarding the specific training, activities and support to be provided.</p>	<p>Decisions and choices made by the individual related to Community Services must be documented in the Comprehensive Vocational Service Assessment (CVSA) or Comprehensive Day Service Assessment (CDSA) and the Day Services Plan.</p> <p>Individuals are encouraged to invite significant people of their choice to participate in their assessment and/or planning meeting(s).</p>
18	<p>Within 15 business days of receipt of an authorization, the Community Services provider will make available to the referring Case Manager:</p> <ul style="list-style-type: none"> <li>• Confirmation of acceptance into the service with a start date;</li> <li>• Information that the individual will be placed on the provider's waiting list; or</li> <li>• Information that the referral is being rejected with reasons for the rejection.</li> </ul>	<p>If the referral is rejected, an explanation must be documented and made available to the Case Manager.</p>
19	<p>After acceptance into service, but prior to providing Community Services, a Preliminary Plan must be developed that outlines the care and supervision to be provided.</p>	<p>The Preliminary Plan must include essential information to ensure that appropriate services and supports are in place to assure health, safety, supervision and rights protection.</p>



<b>Standards</b>		<b>Guidance</b>
20	<p>On the first day of attendance in Community Services, the Preliminary Plan must be implemented.</p>	<p>The Preliminary Plan is to be implemented on the first day of attendance in Community Services.</p> <p>After assessments are completed and activities, training and supports have been identified, the Day Services Plan will be completed and will replace the Preliminary Plan.</p>
21	<p>Within 30 calendar days of the first day of attendance in Community Services and every 365 days thereafter the Comprehensive Vocational Service Assessment (CVSA) or Comprehensive Day Service Assessment (CDSA) will be completed that identifies the abilities/strengths, interests/preferences and needs/supports of the individual in the following areas:</p> <ul style="list-style-type: none"> <li>• Supervision and supports.</li> <li>• Relevant medical information.</li> <li>• Health and hygiene.</li> <li>• Behavior supports.</li> <li>• Interests.</li> <li>• Preferences.</li> <li>• Skills.</li> <li>• Self-advocacy/Self-determination.</li> <li>• Self-esteem.</li> <li>• Coping skills.</li> <li>• Personal responsibility.</li> <li>• Money management.</li> <li>• Socialization.</li> <li>• Community participation/safety.</li> <li>• Mobility and transportation.</li> <li>• Communication.</li> </ul>	<p>At a minimum, the assessment must be completed every 365 days.</p> <p>The annual assessment must reflect that the Community Services being provided maximizes the abilities/strengths, interests/preferences and identifies needs/supports of the individual.</p> <p>Comments that have been documented in the individual's ISP from the previous year should be utilized when completing the annual CVSA or CDSA to document any progress made toward their goals, preferences expressed and needed supports.</p>

<b>Standards</b>		<b>Guidance</b>
22	<p>Based on the results of the assessment, within 30 calendar days of the first day of attendance in Community Services and every 365 days thereafter, the Day Services Plan for Community Services is developed with participation from the individual and/or his/her legal guardian (if applicable).</p>	<p>At a minimum, the Day Services Plan must be completed every 365 days.</p> <p>Individuals are encouraged to invite significant people of their choice to participate in their assessment and/or planning meeting(s).</p> <p>Individuals are encouraged to participate in the development of their goals.</p> <p><a href="#">Centers for Medicare/Medicaid Services (CMS) Home and Community Based Services Rule:</a></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 contributes to the assurance of health and welfare.</p>
23	<p>The plan must include:</p> <ul style="list-style-type: none"> <li>• A description of the activities/training/supports to be provided including time limited and measurable goals/objectives;</li> <li>• Type and frequency of supervision; based on the assessment;</li> <li>• Emergency contact information;</li> <li>• Current and comprehensive medical information; and</li> <li>• Any information necessary to support the individual in Community Services.</li> </ul>	<p>Long Term Goal:</p> <p>The Day Services Plan in Community Services should identify activities/supports/training to enhance the individual's independence, support informed choice and develop real life skills through participation in natural settings within the community while working to expand relationships and natural supports.</p> <p>Expected short term goal(s) include:</p> <ul style="list-style-type: none"> <li>• Demonstrated increased independent living skills in natural settings within the community;</li> <li>• Communicate, through informed choice, interest and preferences;</li> <li>• Establishment of social capital by expanding reciprocal relationships and cultivating natural supports;</li> <li>• Obtaining needed assistive technology; and</li> <li>• Greater community engagement and participation.</li> </ul> <p><a href="#">DDSN Directive 510-01 DD:</a> Supervision of People Receiving Services:</p>

Standards		Guidance
		<p>Services provided shall include the provision of any interventions and supervision needed by the individual which include dining/eating.</p> <p>The supervision to be provided must be based on assessed needs.</p> <p>Supervision must encompass any time outside of the actual unit time when the individual is present and supervision is needed.</p> <p>All critical and emergency information for this individual must be documented in the plan.</p> <p>Medications taken by the individual must be listed and any assistance of medicating must be documented (self-medicate or assisted medicate).</p> <p>All specific instructions concerning individual reactions, side effects or restrictions to medicine must be documented in the Day Services Plan and on the IPS: SC Community Services Log and must be available in Therap for review.</p> <p><a href="#">Medication Technician Certification</a> program must be completed for the selected, unlicensed, healthcare personnel who provide medications to those receiving Day Services.</p>
24	<p>The activities, training and support should be consistent with Community Services as defined in these standards.</p> <p>50% of the total units received in Community Services must be delivered in a community location/setting (i.e. outside the facility and not in the individual's home).</p>	<p>Community Services are fluid with the flexibility to provide a wide variety of core activities/opportunities to enhance:</p> <ul style="list-style-type: none"> <li>• Demonstrated increased independent living skills in natural settings within the community.</li> <li>• Communicate, through informed choice, interest and preferences.</li> <li>• Establishment of social capital by expanding relationships and cultivating natural supports.</li> <li>• Greater community engagement and participation.</li> </ul> <p>Core activities in Community Services include:</p>

Standards	Guidance
	<p data-bbox="761 197 1179 233"><b><u>Assistive Technology Supports</u></b></p> <p data-bbox="761 268 1495 596">Assistive technology supports may include evaluation and assessment of assistive technology and adaptive equipment (both high and low tech) to increase, maintain or improve functional abilities and to support the individual's increased independence with a focus on employment or microenterprise. This may include, but is not limited to, communication devices and aids that augment communication, hearing or vision loss, computer equipment and/or cell phones and apps.</p> <p data-bbox="761 632 1114 667"><b><u>Independent Living Skills</u></b></p> <p data-bbox="761 703 1425 848">Demonstrated increased independent living skills in natural settings within the community. (Examples include using a cell phone, public transportation, community safety, social skills and self-advocacy.)</p> <p data-bbox="761 884 995 919"><b><u>Informed Choice</u></b></p> <p data-bbox="761 955 1487 1142">Communicate, through informed choice, interest and preferences regarding employment, community engagement, skill building and relationships. (Examples include exploring interest in employment, identifying areas of skill development and or interest/preferences.)</p> <p data-bbox="761 1178 954 1213"><b><u>Social Capital</u></b></p> <p data-bbox="761 1249 1495 1472">Establishment of social capital by expanding relationships and cultivating natural supports. (Examples include developing reciprocal relationships with neighbors, church members, local business owners/workers, and making friends with others without disabilities.)</p> <p data-bbox="761 1507 1105 1543"><b><u>Community Engagement</u></b></p> <p data-bbox="761 1579 1479 1801">Greater community engagement and participation. [Examples include attending community events (festivals, sporting events, and concerts), utilizing community resources (library, museum, and parks), participating in clubs/organizations (support groups, bowling league, and exercise classes) and volunteering.]</p>
25	As soon as the plan is developed, it must be implemented.

	Standards	Guidance
26	<p>Documentation of goal(s)/activities must support the implementation of the plan for each unit of service reported.</p> <p>Documentation of participation in goals/activities/training/supports received is completed on the Therap ISP: SC Community Services Log.</p> <p>Documentation must include:</p> <ul style="list-style-type: none"> <li>• The date of service provision;</li> <li>• Begin time/end time of service provision (exact times); and</li> <li>• A detailed description, noted in the comments section, of the activity/training/supports provided.</li> </ul> <p>Documentation is required to justify all units reported and must be entered at a minimum within <b>seven (7) calendar days</b> of the activity date. At the end of the month, all documentation must be entered by the fifth (5th) business day of the following month to support billing.</p>	<p>For each unit of service reported, documentation in the ISP: SC Community Services Log must be present to show the activity/training/supports received on the day the service was provided.</p> <p>Documentation for more than one unit provided during a day can be completed within the same narrative by noting 1st unit: narrative; 2nd unit: narrative.</p> <p><b>**The Community Services ISP may not meet the needs of those receiving ICF/IID services.</b></p>
27	<p>Data entries must be:</p> <ul style="list-style-type: none"> <li>• True and accurate;</li> <li>• Complete;</li> <li>• Typed;</li> <li>• Logically sequenced, and</li> <li>• Dated and signed by the staff making the entry.</li> </ul>	<p>Electronic entries, initials and/or signatures on the Therap ISP are sufficient.</p> <p>In extenuating circumstances when there are technical difficulties, documentation must be secured and entered into Therap when available.</p>
28	<p>At least monthly, the plan is monitored by the Program Director or his/her designee to determine its effectiveness.</p>	<p>The Program Director or his/her designee will monitor the plan monthly by review of the ISP: SC Community Services Log as evidenced by either:</p> <ul style="list-style-type: none"> <li>• An electronic copy of the signed “Clinician Report” saved in Therap, or</li> </ul>

Standards		Guidance
		<ul style="list-style-type: none"> <li>A non-billable monthly entry made by the Program Director or his/her designee in each individual's ISP: SC Community Services Log noting progress and/or recommendations.</li> </ul> <p>When monitoring the individual's goal(s), their satisfaction with their progress/outcomes must be considered.</p> <p>Lack of participation/progress after three (3) months should result in a review of the individual's goals and their current interest in receiving Community Services.</p> <p>Electronic entries, initials and/or signatures in Therap are sufficient.</p>
29	The Program Director or his/her designee must ensure that all billable units of Community Services are entered into the Day Supports Attendance Log by the fifth (5 <sup>th</sup> ) business day of the following month.	<p>The Day Supports Attendance Log (DSAL) is located on the DDSN Application Portal.</p> <p>Failure to enter units of service delivered by the established deadline may result in nonpayment.</p> <p><b>**This may need to be updated due to Therap billing.</b></p>
30	The plan is amended when changes to the plan are requested or necessary with participation from the individual and/or his/her legal guardian (if applicable).	<p>Changes may include, but are not limited to:</p> <ul style="list-style-type: none"> <li>Goal(s)/activities are no longer appropriate;</li> <li>Goal(s)/activities no longer support progress; and/or</li> <li>The individual's Community Services goal or life situation has changed.</li> </ul> <p>Amendments are documented on the ISP: SC Community Services Log with notation of the individual's and/or his/her legal guardian's participation and agreement (if applicable).</p>
31	<p>A record shall be maintained in Therap for each individual which contains, at a minimum, the items listed below:</p> <ul style="list-style-type: none"> <li>Current Comprehensive Vocational Service Assessment or Comprehensive Day Services Assessment.</li> <li>Current Day Services Plan that</li> </ul>	<p>Records, either electronic in Therap as specified or on paper, shall be maintained for each individual.</p> <p>Record of illnesses and accidents will be maintained for those accidents that occur during service provision and for illnesses made known to the provider.</p> <p>All documents and entries shall be legible, dated, and signed by the staff making the entry. If symbols are used, explanatory legends must be provided.</p>

Standards		Guidance
	<p>supports the provision of the service provided.</p> <ul style="list-style-type: none"> <li>ISP: SC Community Services Log that supports the provision of the services provided.</li> </ul> <p>A record shall be maintained for each individual which contains, at a minimum, the items listed below:</p> <ul style="list-style-type: none"> <li>Report of a medical examination which was performed not more than 12 months prior to admission.</li> <li>Report of psychological evaluation(s) as required by these standards.</li> <li>Record of unusual behavior incidents which are recorded at the time of occurrence.</li> <li>Record of illness and accidents.</li> <li>Authorization for emergency medical service and medication administration.</li> <li>Record of critical incidents.</li> </ul>	<p>All Community Services documentation must be available in Therap. The Comprehensive Vocational Service Assessment (CVSA) or the Comprehensive Day Services Assessment and The Day Services Plan must be attached to the Individual Home Page. The ISP: SC Community Services Log must be available in Therap for review.</p>
32	<p>Any evidence of illness or injury shall be documented in the individual's record and action shall be taken to obtain necessary medical treatment of the individual and to safeguard others from contagion.</p>	
33	<p>Reporting requirements are completed per DDSN policies and directives.</p>	<p>Including, but not limited to:</p> <ul style="list-style-type: none"> <li><a href="#">DDSN Directive 100-09 DD</a>: Critical Incident Reporting</li> <li><a href="#">DDSN Directive 505-02 DD</a>: Death or Impending Death of Persons Receiving DDSN Services</li> <li><a href="#">DDSN Directive 534-02 DD</a>: Procedures for Preventing and Reporting Abuse, Neglect, or Exploitation of People Receiving Services from DDSN or a Contracted Provider Agency</li> </ul>