South Carolina Department of Disabilities & Special Needs FY24 Residential Services Licensing Prep List

All SLP II, CTH I, CTH II, and Residential Respite Settings will be licensed annually. SLP II and CTH II settings will receive a same day notification (Approximately 2 hours in advance) for each location. CTH I and Respite settings will receive a 24-hour notice for each location.

The provider may designate any staff member to be onsite to allow entry to the Licensing Team and access to required documentation. If the home and/or documentation is inaccessible, the applicable indicators will be deemed non-compliant.

The following documentation is required, at a minimum, to demonstrate compliance with DDSN Residential Licensing Standards:

- Current Fire Marshal Inspection (include documentation of corrective action if violations were noted)
- Current Fire Marshal Health and Sanitation Inspection (if setting is licensed for children)
- Electrical Inspection (If renovations have taken place in prior 12 months)
- Current HVAC Inspection (If renovations have taken place in prior 12 months)
- Current DHEC water quality inspection (If the home has well water)
- Assessment for access to cleaning supplies if access is restricted.
- Approved Exception for Firearms (if present in the home)
- □ Current vaccinations are present for any pets onsite.
- Current lease agreement
- Signed statement of Financial Rights (to include current Financial Plan, a fee schedule and quarterly monitoring for the past year)
- Signed statement of Residential Rights (if participant is new to the Provider in prior 12 months)
- Documentation that the participant has a key or has been offered a key to their bedroom.
- Documentation that the participant has a key or has been offered a key to their home.
- Documentation of the participant's participation in meal planning, grocery shopping, and preparation
- Control sheets (for any participant on a controlled medication review for 1 month)
- □ Control sheet shift change review (1 Month)
- Self-Administration assessment (if participant self-administers medications)
- □ Medication Administration Record (MARs current and previous 3 calendar months)
- □ Medication error rates for previous 3 calendar months
- □ Agency Policy for disposition of medications
- □ For SLP II, when a participant's medication is not stored in their own apartment, documentation of the health/safety concern must be available.
- Agency policy regarding the use of T-Logs in Therap.