SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS

A G E N D A UPDATED

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

November 16, 2023

10:00 A.M.

1. Call to Order Chairman Ed Miller

2. Notice of Meeting Statement

Commissioner Gary Kocher, MD

- 3. Welcome
- 4. Adoption of Agenda Pages 1 & 2
- 5. Invocation

Commissioner Gary Kocher, MD

- 6. Approval of Commission Meeting Minutes from September 21, 2023 Pages 3-7
- 7. Programs and Services Presentation

SC Department of Mental Health (SCDMH) – A True System of Care Pages 8-11

Dr. Robert Bank, SCDMH Acting State Director

Ms. Denise Morgan, Assistant Deputy Director

Of Community Mental Health Services

8. Commissioners' Update

Commissioners

- 9. Public Input
- 10. Programs and Services

Vaccine Education Initiative (VEI) Pages 12-15

Mr. Shawn Keith SC Autism Society, Executive Director

11. Commission Committee Business

Policy Committee

Committee Chair Gary Kocher, MD

- 800-07-CP: South Carolina Commission on Disabilities and Special Needs Needs Committee Procedures Pages 16-21
 - Attachment D Policy Committee Procedures Pages 22-25
- 2. 100-01-DD: DDSN Directives/Standards Electronic Communications System **Pages 26-32**

12. Old Business

1. High Management Solicitation Update

Chairman Ed Miller

2. Head and Spinal Cord Injury (HASCI) Drop-In Centers Update

Ms. Lori Manos

Pages 33-34

13. New Business

FY24 YTD Spending Plan Budget vs. Actual Expenditures Page 35 Mr. Quincy Swygert

14. Director's Update

Ms. Constance Holloway

- 15. Next Regular Meeting January 18, 2024
- 16. Adjournment

SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS MINUTES

September 21, 2023

The South Carolina Commission on Disabilities and Special Needs met on Thursday, September 21, 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
Eddie Miller - Chairman
Michelle Woodhead - Vice Chairman
Gary Kocher, MD - Secretary
Barry Malphrus

Microsoft Teams
David Thomas

DDSN Administrative Staff

Constance Holloway, State Director/General Counsel; Quincy Swygert, Chief Financial Officer; Lori Manos, Associate State Director of Policy; Courtney Crosby, Internal Audit Director; Harley Davis, Ph.D., Chief Administrative Officer; Carolyn Benzon, Deputy General Counsel; Melissa Ritter, Director of Head and Spinal Cord Injury (HASCI); Chanel Cooper and Jana Brown, Information Technology Division; and Christie Linguard, Executive Assistant.

Notice of Meeting Statement

Chairman Miller called the meeting to order, and Secretary Kocher 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 Miller welcomed everyone to the meeting.

Adoption of the Agenda

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

Invocation

Vice Chairman Woodhead gave the invocation.

Approval of Commission Meeting Minutes

Commissioner Malphrus made a motion to approve both sets of Commission meeting minutes from August 17, 2023, and July 20, 2023, meetings. This motion was seconded by Commissioner Kocher and unanimously approved by the full Commission. (Attachment B)

Commissions' Updates

Commissioner Malphrus encouraged all county boards to get a copy of the Disability Resource Guide from Beaufort County.

Commissioner Woodhead stated that this month is near and dear to her heart as it is Spinal Cord Injury Awareness Month. One of her daughters has a spinal cord injury. She uses social media to spread the word about spinal cord injuries; and she believes that the biggest way to advocate and share awareness is to share her story.

Commissioner Miller announced that he had the pleasure of attending the Groundbreaking Ceremony for the Interactive Gardens at the DDSN Whitten Regional Center. He thanked the executive staff and everyone who played a part in this project. He named everyone that was on the agenda and a part of the Ceremony.

Public Input

Ms. Lisa Lemon spoke during public input.

After Ms. Lemon's comments, Commissioner Thomas asked if there was a policy that exists regarding emergency pick up for consumers to area hospitals. It encouraged the Policy Committee to look into this, to which Chairman Miller stated that Ms. Janet Priest will connect with Commissioner Kocher to talk more about this issue and a possible policy.

Programs and Services

Ms. Melissa Ritter briefed the Commission on the agency's month-long efforts to raise awareness of spinal cord injuries. The spotlight this year was on athletes with spinal cord injuries across the state. These spotlights included sharing information around adaptive sports.

Ms. Ritter introduced Ms. Angela Rodriguez, who is the Executive Director of the South Carolina Spinal Cord Injury Association. She told a little about their Association and what they have done over the last few months to raise awareness of spinal cord injuries. (Attachment C)

Chairman Miller paused to thank the entire Communications staff for the exceptional work they are doing to disseminate information about the Agency to the world.

Commission Committee Business

Finance Committee

Commissioner Woodhead noted that the Finance and Audit Committee meeting took place on September 13th. She asked Mr. Swygert to present the below items to the Commission.

Fiscal Year 2024 YTD Spending Plan vs. Actual Expenditures

Mr. Swygert presented the year-to-date FY24 Spending Plan through the month of August 2023. To date, the Agency is under the Commission approved spending level by approximately 1.27%. (Attachment D)

Fiscal Year 2024 Contract Report

Mr. Swygert presented the Fiscal Year 2024 Contract Report to include the administrative contracts. He informed the Commissioners that at next month's meeting, after the first quarter is completed, he will add the expenditure columns back into the spreadsheet. (Attachment E)

Fiscal Year 2025 Budget Report

The Agency's budget plan for FY 2025 is due to the Executive Budget Office (EBO) tomorrow. There are five (5) Decision Packages that will be a part of the Agency's budget plan: Supported Living Assistance; State Funded Residential Services; Maintenance of Effort – Financial Management Services (FMI); Earmarked Authority Reduction; and Greenwood Genetics. Staff will present this budget to the Governor's Office next month; and to the Senate in January; and lastly, to the House in March of next year. On a motion by Commissioner Woodhead, seconded by Commissioner Kocher, the FY25 Budget Report was unanimously approved by the Commission. (Attachment F)

New Business

High Management Solicitation

Ms. Priest presented a solicitation for the Commission's approval for residential habilitation services. There is an immediate need for Residential Habilitation Services to be delivered to people of all ages who have complex support needs. The request is for the Agency to use one-time money for a house to stand up for those who need residential habilitation. A detailed discussion was had regarding this Solicitation and funding around it. Commissioner Thomas posed questions regarding the Department of Corrections' and the Department of Juvenile Justice's involvement with consumers that were judicially admitted and now need placement. He also wanted to know what precautions were going to be taken to protect the consumers as well as other residents living close by. Commissioner Malphrus would like the Commission to be briefed on the proposals submitted for the Solicitation prior to granting funding. Commissioner Thomas suggested that staff put together all of the elements spoken today concerning the consumers and where they will live. Commissioner Thomas made a motion to table discussion and approval of this Solicitation until the next Commission meeting; this motion was seconded by Commissioner Malphrus and approved by the Commission. Chairman Miller asked that, in the future, commissioners review the agenda and handouts prior to the meeting. If there are questions, he asks all commissioners to contact the State Director for an explanation. (Attachment G)

Director's Update

Director Constance Holloway gave her Director's Update on the Agency. (Attachment H)

Executive Session

Chairman Miller announced that the Commission will go into Executive Session for the purpose of discussing the draft report from the Legislative Audit Council. At 11:14 AM, on a motion by Commissioner Kocher, 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 11:49 AM, Chairman Miller announced that no motions or decisions were made, and no votes taken during executive session.

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

None.

Next Regular Meeting

October 19, 2023, at 10:00 AM

Adjournment

On a motion by Commissioner Thomas, seconded by Commissioner Kocher and approved by the full Commission, the meeting was adjourned at 11:50 A.M.

Submitted by:	Approved by:
Christie D. Linguard	Commissioner Gary Kocher, M.D.
Executive Assistant	Secretary



South Carolina

Department of Mental Health

DMH



DMH INPATIENT HOSPITALS AND NURSING HOMES



Patrick B. Harris
Psychiatric Hospital – a
121-bed intensive, psychiatric hospital located in Anderson.



Palmetto Patriots Home – a 104 bed skilled nursing care facility in Gaffney



G. Werber Bryan Adult Psychiatric Hospital (Acute) – a 198-bed intensive care hospital located in Columbia.

(Forensics) – a 185-bed treatment facility for patients found Not Guilty by Reason of Insanity (NGRI) or not competent to stand trial.



William S. Hall Psychiatric

Institute – a 58-bed complex for children and adolescents. Located in Columbia.



Richard M. Campbell Veterans' Nursing Home -a 220-bed skilled nursing care facility in Anderson.



Morris Village Alcohol and Drug Addiction Treatment Center – a 120-bed alcohol and drug treatment center in Columbia.

Infirmary – DIS operates an 11-bed general infirmary located at Morris Village.



Tucker Nursing Care
Center – a 296-bed nursing
care facility located in
Columbia.



Veteran Village – a 104 bed skilled nursing care facility in Florence.

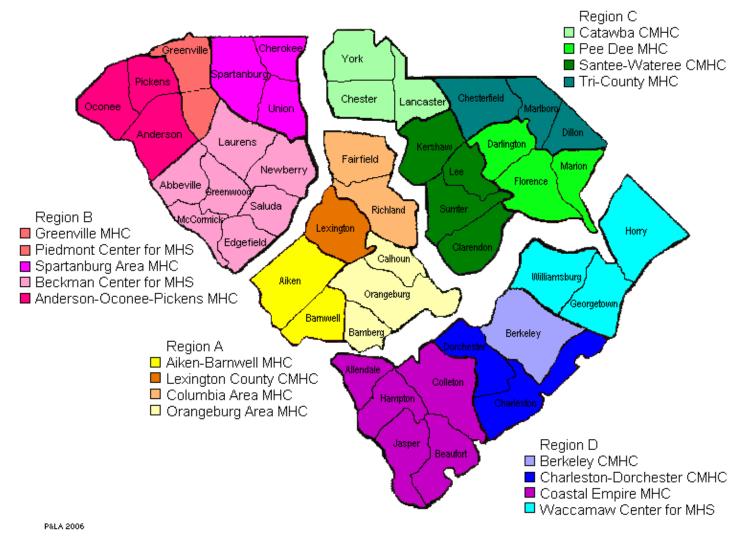


Veterans' Victory House – a 220-bed skilled nursing care facility located in Walterboro.



Sexually Violent Predators Treatment Program – a 122-bed facility to provide treatment for persons adjudicated as sexually violent predators. Located at the SC Department of Corrections.

SCDMH
Mental Health
Centers And
Regions
(Greenville
and Piedmont
merged into
Greater
Greenville
MHC –
effective
6/30/19)



TARGET POPULATION

APPROPRIATE STRATEGY

SCDMH - A TRUE SYSTEM OF CARE (A BRIEF OVERVIEW)

Right Treatment At The Right

Right Provider - Preventing

Avoidable Emergency

Hospitalizations, and

Incarcerations

Department (ED) Visits,

Time In The Right Place By The

TARGET:

SCHOOLS, PTAS, CHURCHES, FIRST STEPS, BUSINESSES, FIRST RESPONDERS, CIVIC CLUBS, GENERAL PUBLIC AT FESTIVALS, FAIRS, MARKETS, ETC.

PATIENTS WITH MILD/MODERATE SYMPTOMS; PATIENTS WITH STABLE CHRONIC SYMPTOMS, BUT IN NEED OF ONGOING CARE, ETC.

PATIENTS WITH ACUTE SYMPTOMS
OR SIGNIFICANT, UNSTABLE
CHRONIC SYMPTOMS

PATIENTS WITH
EXACERBATION OF
SYMPTOMS & IN CRISIS

PATIENTS IN AN ED OR JAIL

DANGER TO SELF/ OTHERS

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PREVENTION – INFANT & EARLY CHILDHOOD CARE, SCHOOL MENTAL HEALTH, ANTI-STIGMA CAMPAIGNS, CIT*, MENTAL HEALTH FIRST AID, SUICIDE PREVENTION, STAKEHOLDER MEETINGS, FARMACY TEAMS, ETC.

*Crisis Intervention Team Training

IMMEDIATE ACCESS TO EVIDENCED BASED TX & PROGRAMS* VIA WALK-IN CLINICS, EXTENDED HOURS, TELEPYSCH. INTEGRATED CARE, CARE COORDINATION, PEER SUPPORT, MED. MGT.,

*CBT, DBT, EMDR, PCIT, TFCBT, MI, IPS, etc.

ABOVE; PLUS ICT, MDFT, FEP, FRST*, HOMELESS OUTREACH, CO-OCCURRING TX, ETC. *ICT – Intensive Community Treatment MDFT- Multidimensional Family Therapy FEP – First Episode Psychosis FRST – First Responder Support Teams

ABOVE: PLUS CSUs, MC, LE & DJJ* EMBEDDED MHPS, EMS TELEPSYCH, ETC.

*CSU – Crisis Stabilization Unit

MC - Mobile Crisis 988 - call center

LE – Law Enforcement Embedded
DJJ – Department Of Juvenile Justice

DSS – Department of Social Services

MENTAL HEALTH
COURTS, MHPS IN
EDS & JAILS

Cost-sharing Positions, Liaisons, etc.

INPATIENT CARE Best Pharmacological Practices, DBT, Learning Labs, Transition Specialists, Peer Support, etc.

Deborah S. Blalock, 2023



Autism Society and the Aging and Disability Vaccination Collaborative

The Autism Society of America can help you increase vaccination rates and improve outcomes in your network.

The Autism Society believes that improving the vaccination experience is a critical step towards achieving more equitable healthcare for people with Autism and all neurodiverse individuals.

With support from the CDC and the Association of University Centers on Disabilities, the Autism Society launched the Vaccine Education Initiative (VEI) to address systemic barriers to care and promote vaccine education, confidence, and access.

In 2023, the Autism Society became a proud partner of the Aging and Disability Vaccination Collaborative (ADVC), to increase access and uptake of vaccines with a focus on aging, BIPOC, Hispanic, LGBTQIA+, and rural populations with Autism and other disabilities.

The Autism Society is dedicated to Health Equity. Through the VEI, we are working to address systemic barriers to care and promote vaccine education, confidence, and access.

The connection is you.™

The Autism Society is seeking healthcare and community partners who are interested in increasing vaccination rates and improving the vaccine experience.

11111111111

Partners will receive training and support from the Autism Society and its trusted national network of affiliates.



Healthcare Training

The Autism Society provides healthcare professionals with accessible vaccination training to increase understanding of diverse communication, sensory, cognitive, and social needs. That knowledge benefits all members of the community.



Accessible Vaccination

Become an accessible vaccination partner using Autism Society strategies and resources, including vaccine kits. Work with us to track COVID-19, flu, and other routine vaccinations. Technical assistance is available in person or online.



Don't wait!

This is a grant-funded opportunity ending in April of 2024. Contact us today and help build a more accessible, inclusive, and healthier tomorrow.

For more information

on the VEI or the ADVC, please contact Brennan Stinney (803)-750-6988 or Toni Smith (803) 244-8494

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Background

Vaccine Education Initiative (VEI) & the Aging and Disability Vaccination Collaborative (ADVC) Grant

 Historically, people with Autism and other developmental disabilities have lower immunization rates than their peers without Autism, leaving them vulnerable to vaccinepreventable diseases. Vaccine hesitancy is a long-standing issue within the Autism community and for many, vaccination visits can be stressful for a variety of reasons.

- The Autism Society of America believes that improving the vaccination experience is a critical step towards achieving more equitable healthcare for people with Autism and other disabilities who experience barriers to care.
- In 2021, with support from the Centers for Disease Control and Prevention (CDC) and the Association of University Centers on Disabilities (AUCD), the Autism Society launched the Vaccine Education Initiative (VEI) to address systemic barriers to care and promote vaccine education, confidence, and access.
- In 2023, with support from USAging's Aging and Disability Vaccination Collaborative (ADVC), we are expanding our VEI, and again engaging our affiliates to promote accessible vaccination through education and uptake of primarily COVID- and flu vaccines, but also shingles, pneumonia, and other routine vaccinations.
- ADVC grant objectives focus on Autism and all disability, aging, BIPOC, Hispanic, LGBTQIA+, and rural communities. However, all are welcomed and encouraged to become vaccinated at ADVC events.



See examples from our affiliates that participated in the VEI pilot program:

Potential Vaccine Clinic Partners & Venues			
Back to School Events	Home Vaccinations	Nurses associations & other professional health	
Bingo Nights	Hospitals and Healthcare Systems	organizations	
Chained Drugstores (Walmart, Target, Publix, etc)	Insurance Companies	Pharmacies	
Children's Museums	Local businesses	School Based Clinics	
Church or Temple Events	Local chambers of commerce	School districts & community colleges	
Community Based Organizations	Local Health Departments	Sporting Events	
Community Health & Resource Fairs	Local pediatricians, family physicians, geriatricians, nurses, therapists	Vaccination/Immunization Organizations	
Disability and Vaccine Groups	Local universities social work,	Walks, Fairs, Races	
Drive-through Vaccination Events	nursing, public health or similar programs	Wellness Fairs Worksite Wellness	
Farmer's Markets	Medicaid and Medicare	Programs	
Holiday-specific Community	Medical schools		
Celebrations	Mobile Vaccination Units		

See the <u>Community Education and Engagement: Core ADVC Grant Activity #4</u> chapter for more ideas.



Opportunity for Partnership: Vaccine Events

Dear Prospective Partner,

This year, the Autism Society of America (ASA) became a proud partner of the Aging and Disability Vaccination Collaborative (ADVC), a nationwide initiative to increase access and uptake of COVID, flu, and other routine vaccines with a focus on aging and disability communities, including our Autism populations.

The Autism Society of South Carolina joins ASA in this effort, by addressing the needs in our own communities by offering Accessible Vaccine Clinics and related training and education.

We are seeking healthcare and community partners who are interested in increasing vaccination rates and improving the vaccine experience. Partners will receive training and support from the Autism Society.

The Autism Society's Accessible Vaccine Clinics create inclusive vaccination environments by:

- Reducing barriers to vaccine uptake in the Autistic population
- Providing tips on communicating with Autism/DD community/aging population
- Sharing effective strategies to reduce pain and anxiety for these families during the vaccination visit.
- Disseminating supports such as visual schedules, communication boards, and social stories during vaccination appointments
- Providing practical tips to improve vaccine confidence by employing strategies to reduce stress when vaccinating neurodiverse patients.
- Distributing free Accessible Vaccine Kits

These accessible vaccine clinics are funded by a grant from US Aging and are provided free of charge. Part of the grant project is also to forge meaningful ongoing partnerships which support the implementation of the project goals during the grant period and beyond.

To learn more visit: https://autismsociety.org/vei.

Constance Holloway
State Director
Carolyn Benzon
Interim General Counsel
Janet Brock Priest
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Lori Manos

Associate State Director Policy Harley T. Davis, Ph.D. Chief Administrative Officer

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Chief Information Officer

South Carolina
Department of Disabilities
and Special Needs

3440 Harden Street Extension Columbia, South Carolina 29203

(803) 898-9600 Toll Free: 888/DSN-INFO Home Page: ddsn.sc.gov COMMISSION
Eddie L. Miller
Chairman
Michelle Woodhead
Vice Chairman
Gary Kocher, M.D.
Secretary
Barry D. Malphrus
David L. Thomas

Reference Number: 800-07-CP

Title of Document: South Carolina Commission on Disabilities and Special

Needs Committee Procedures

Date of Issue: January 21, 2021

Date of Last Revision: January 21, 2021XXXX, 2023 (NEWREVISED)

Effective Date: January 21, 2021 XXXX, 2023

Purpose:

The purpose of this Commission Policy is to provide a standing committee framework to include meeting frequency, committee scope and procedures. This policy pertains to the Finance and Audit Committee, Legislative Committee, Personnel Committee and Policy Committee.

Committee Meeting Frequency:

The South Carolina Commission on Disabilities and Special Needs (DSN Commission) committees, in coordination with the respective committee chairpersons, will determine the meeting frequency as determined by the workflow volume of the standing committee.

Committee Scope:

Finance and Audit Committee:

The Committee provides assistance to the Commission in fulfilling its oversight responsibilities relating to budgeting, accounting and financial reporting processes, and the performance of the internal audit function. The Committee will oversee South Carolina Department of Disabilities and Special Needs (DDSN) management processes and activities relating to:

- a. Maintaining the reliability and integrity of DDSN accounting policies, financial reporting practices, and internal controls;
- b. Review significant accounting and reporting developments and issues;
- c. The performance and work plan of the internal audit function in accordance with DDSN Directive 275-05-DD: General Duties of the DDSN Internal Audit Division;

January 21, 2021 XXXX, 2023

Page 2

- d. Compliance with applicable laws, regulations, and DDSN directives;
- e. Review and approval of the annual operating and capital budgets, as well as any amendments;
- f. Analyzing financings and capital transactions being considered by DDSN and the adequacy of its capital structure; and
- g. Review of DDSN fiscal related directives; and
- h.g. Review of DDSN fiscal regulatory and oversight reports.

The Committee also provides an open avenue of communication between DDSN management, Internal Audit, and the Commission.

Consistent with the annual audit plan, the Committee has the authority to conduct or authorize investigations into any matters within its scope of responsibility. Inquiry and briefings on all significant financial matters along with related presentations and motions for full Commission approval originate from the Committee.

Legislative Committee:

The DSN Commission Legislative Committee initiates, reviews and revises new and existing state statutes and regulations to bring to the full DSN Commission. Formal, prescribed state level promulgation procedures are followed. The Legislative Committee also reviews and approves for full Commission approval pertinent directives referred from the Policy Committee. Lastly, the Committee receives inquiries and briefings on all significant legislative issues and carries forward to the full Commission motions, approvals and presentations.

Personnel Committee:

The Personnel Committee appoints the State Director. It also serves to draft and complete the State Director's annual evaluation.

Policy Committee:

Commission Policy 800-03-CP, "Executive Limitation Policy," sets forth the retention of DSN Commission authority to revise and approve all existing and new Commission policies, Department Directives, and Service Standards. However, the DSN Commission delegates authority and responsibility to the Policy Committee to establish procedures to coordinate the review, revision, and recommendation to the full DSN Commission.

The Policy Committee <u>Chairman</u>, in conjunction with the <u>Associate State Director of Policy</u>, will determine the proper review process for all existing, and newly proposed, Commission Policies, Department Directives and Service Standards using three two options, which are:

1) The Policy Committee retains the Policy/Directive/Standard for exclusive review and makes a recommendation(s) to the DSN Commission. Any Policy/Directive/Standard with content specific to a particular area (i.e., engineering/finance) will be presented to the Policy Committee by those staff with the expertise to provide guidance. The Chairman of the other applicable Committee will be invited to participate, but will not be allowed to vote on any changes; or

800-07-CP January 21, 2021<u>XXXX, 2023</u> Page 3

- 2) The Policy Committee refers the Policy/Directive/Standard to another DSN Committee due to pertinent subject matter and then this other DSN Committee makes a recommendation(s) to the DSN Commission; and
- 32) The Policy Committee delegates lower risk directives/standards for review by the State Director and the State Director to staff who in turn makes a recommendation(s) to the DSN Commission. This includes edits necessary to align with Medicaid and Home and Community Based Waiver requirements. During Commission presentation, if any two Commission members request formal Policy Committee review, the directive/standard will be sent back to Policy Committee for consideration at the next scheduled meeting.

COMMITTEE PROCEDURES:

Committee procedures are developed by the individual committees, voted upon at the committee level and presented for approval of the full DSN Commission. Annual review and updating of these procedures is suggested each July or when a new Committee Chair is assigned. These procedures are attached to this directive.

Barry D. Malphrus	Gary C. Lemel
Vice Chairman	Chairman
Eddie L. Miller	Michelle Woodhead
Chairman	Vice Chairman

To access the following attachments, please see the agency website page "Current Directives" at: https://ddsn.sc.gov/providers/ddsn-directives-standards-and-manuals/current-directives

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Attachment B: Legislative Committee Procedures
Attachment C: Personnel Committee Procedures
Attachment D: Policy Committee Procedures

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(REVISED)

Reference Number: 800-07-CP

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Date of Issue:

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November 16, 2023

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- a. Maintaining the reliability and integrity of DDSN accounting policies, financial reporting practices, and internal controls;
- b. Review significant accounting and reporting developments and issues;

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- c. The performance and work plan of the internal audit function in accordance with DDSN Directive 275-05-DD: General Duties of the DDSN Internal Audit Division;
- d. Compliance with applicable laws, regulations, and DDSN directives;
- e. Review and approval of the annual operating and capital budgets, as well as any amendments;
- f. Analyzing financings and capital transactions being considered by DDSN and the adequacy of its capital structure; and
- g. Review of DDSN fiscal regulatory and oversight reports.

The Committee also provides an open avenue of communication between DDSN management, Internal Audit, and the Commission.

Consistent with the annual audit plan, the Committee has the authority to authorize investigations into any matters within its scope of responsibility. Inquiry and briefings on all significant financial matters along with related presentations and motions for full Commission approval originate from the Committee.

Legislative Committee:

The DSN Commission Legislative Committee initiates, reviews and revises new and existing state statutes and regulations to bring to the full DSN Commission. Formal, prescribed state level promulgation procedures are followed. The Legislative Committee also reviews and approves for full Commission approval pertinent directives referred from the Policy Committee. Lastly, the Committee receives inquiries and briefings on all significant legislative issues and carries forward to the full Commission motions, approvals and presentations.

Personnel Committee:

The Personnel Committee appoints the State Director. It also serves to draft and complete the State Director's annual evaluation.

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Commission Policy 800-03-CP, "Executive Limitation Policy," sets forth the retention of DSN Commission authority to revise and approve all existing and new Commission policies, Department Directives, and Service Standards. However, the DSN Commission delegates authority and responsibility to the Policy Committee to establish procedures to coordinate the review, revision, and recommendation to the full DSN Commission.

The Policy Committee Chairman, in conjunction with the Associate State Director of Policy, will determine the proper review process for all existing, and newly proposed, Commission Policies, Department Directives and Service Standards using two options, which are:

1) The Policy Committee retains the Policy/Directive/Standard for exclusive review and makes recommendations to the DSN Commission. Any Policy/Directive/Standard with content specific to a particular area (i.e., engineering/finance) will be presented to the Policy Committee by those staff with the expertise to provide guidance. The Chairman of the other applicable Committee will be invited to participate, but will not be allowed to vote on any changes; or

800-07-CP November 16, 2023 Page 3

2) The Policy Committee delegates directives/standards to staff who in turn make recommendations to the DSN Commission. This includes edits necessary to align with Medicaid and Home and Community Based Waiver requirements. During Commission presentation, if any two Commission members request formal Policy Committee review, the directive/standard will be sent back to Policy Committee for consideration at the next scheduled meeting.

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Eddie L. Miller	Michelle Woodhead
Chairman	Vice Chairman

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Attachment D: Policy Committee Procedures

DSN Commission Policy Committee Procedure for Review of Policies, Directives and Standards Commission Approved February 17, 2022XXXX, 2023

This document sets forth the procedure to be used by the Policy Committee of the South Carolina Commission on Disabilities and Special Needs (DSN Commission) for the review and approval of approximately 180 DSN Commission Policies, Departmental Directives and Standards governing services funded by the agency.

I. SCOPE:

Approved Commission Policies, Departmental Directives and Standards shall, at a minimum, be reviewed every four (4) years to ensure the content remains current and applicable. Human Resource Directives are exempt from this requirement except those directives identified by the Policy Committee Chairman as necessary for Commission review. All policies, directives and standards are available on the DDSN website. The website, at all times, provides an avenue for public comment on the policies, directives and standards. Public comments regarding policies, directives and standards under external review will only be accepted in written form and during the defined public comment period. It is DDSN's intent to solicit feedback/input from all entities affected by the directives/standards; however, in rare cases the 1015-business day period may not occur due to extenuating circumstances.

II. PROCEDURE FOR REVIEW OF COMMISSION POLICIES, DEPARTMENTAL DIRECTIVES AND SERVICE STANDARDS:

- A. In accordance with Department Directive 100-01-DD: Electronic Communications System, when a policy, directive or standard is under external review, it will be posted on the website in a section entitled "External Review/Public Comment on Directives and Standards." A list of Department Directives and Standards due for external review during the fiscal year will be considered by the Policy Committee semi-annually (on or around July 1 and January 1) at the beginning of the fiscal year and adjusted as determined by the Committee. These directives and standards will then be placed on the website (External Review/Public Comment on Directives and Standards) to include a description as to the applicable groups (e.g., provider types).
- B. All Commission Policies will remain within the Policy Committee for review and updating. When the Policy Committee review is completed, a version including all recommended changes representing consensus by the Committee will be presented to the DSN Commission for approval. Following approval, the Policy will be posted on the DDSN Website in the "Current DDSN Directives Commission Policies and Documents" section.

- C In coordination with the Policy Committee Chairperson, the DSN Commission, DSN Committees or staff may request review and re-prioritization of a policy, directive or standard. Upon a vote of the full DDSN Commission, a policy, directive or standard Committee. For each Directive or Standard, the Committee will decide if they will: undertake a review. The Policy Committee may delegate directives/standards to staff, who in turn, will make recommendations to the full Commission for approval.
 - Undertake a review:
 - Direct to other committees for review; or
 - Delegate to staff. Directives and Standards delegated to staff will be presented to the full Commission for final approval.

III. REVIEW AND APPROVAL OF COMMISSION POLICIES, DEPARTMENTAL DIRECTIVES AND SERVICE STANDARDS:

A. Committee Undertakes a Review of a Directive or Standards:

The directive/standard is reviewed by staff who will make recommendations regarding the document. A draft version, including staff recommendations, will be posted to the website and the public will have 10 15 business days to review and submit comments (see Directive 100-01-DD: Electronic Communications System).

It is DDSN's intent to solicit feedback/input from all entities affected by the directives/standards; however, in rare cases the 10 15 business day period may not occur due to extenuating circumstances.

After the 10 15 business day public review period, staff will consider each comment; make additional changes as needed to the Directive or Standards; and present the Directive or Standards to the Policy Committee. The Committee members may request additional changes and will determine which changes will be accepted based on the comments as well as staff recommendations.

When a consensus is reached by the Policy Committee, a version representing this consensus will be created for presentation to the DSN Commission for approval. Following approval, the document will be posted on the DDSN website under "Current DDSN Directives" or "Current DDSN Standards."

B. Committee Directs to Another Committee for Review of Directive or Standards:

When the Policy Committee directs a Directive or Standards to another DSN Commission Committee for review, the procedures outlined in the section entitled, "Committee Undertakes a Review" (III. A) of this document will be followed by the directed Committee including reaching consensus and presenting to the DSN Commission for approval.

Following approval, the document will be posted on the DDSN website under "Current DDSN Directives" or "Current DDSN Standards."

C.B. Committee Delegates Review of a Directive or Standards to Staff:

When the Committee delegates to staff for revision, public comment and approval, staff will make recommendations regarding the document. A draft version including with staff recommendations will be posted to the website and the public will have 10 15 business days to review and submit comments (see Directive 100-01-DD: Electronic Communications System).

After the 10-15 business day public review period, staff will consider each comment and make additional changes to the Directive or Standards. When comments have been considered and changes made, the document will be presented to the full DSN Commission for final approval. This includes edits necessary to align with Medicaid and Home and Community Based Waiver requirements. During Commission presentation, if any two Commission members request formal Policy Committee review, the directive/standard will be sent back to Policy Committee for consideration at the next scheduled meeting.

DC. Obsolete Policies/Directives/Standards:

When the Committee determines directives shall be declared Obsolete, a master list will be maintained and the <u>DSN Commission</u> Chairman and Vice-Chairman will sign after voting by the full <u>DSN Commission</u>.

ED. Meeting Summary Notes:

The Committee will review and adopt the summary of the previous meeting notes at its next scheduled meeting. It should be noted, these are not considered minutes, as minutes are not required by a sub-committee. Accordingly, they are only a summary of the meeting.

IV. NEW DEPARTMENTAL DIRECTIVES OR SERVICE STANDARDS:

When a new Departmental Directive or Service Standard is created, the staff will advise the Policy Committee of the need for the document, seek approval to post as a draft for public comment, and ask for a decision regarding whether the Committee will:

Undertake a review:

Direct to another committee for review; or

Delegate to staff. Directives and Standards delegated to staff will be presented to the full Commission for final approval.

Based on the decision by the Policy Committee, the document will follow the procedure outlined above for Directives or Standards being reviewed.

When a new Departmental Directive or Service Standard is created, staff will advise the Policy Committee of the need for the document. Once the Policy Committee has

approved this request, the new Directive/Standard will be posted as a draft for 15-business days for public comment. When the public comment period is complete, the Policy Committee will undertake a complete review, and upon consensus, present to the full DSN Commission for final approval.

V. CHANGES TO OTHER DOCUMENTS HAVING THE EFFECT OF POLICY:

When substantive changes to other documents having the effect of policy (e.g., HCBS Waiver amendments, HCBS Waiver Manual) are needed, a summary of the needed changes will be presented to the Policy Committee for advisement. As a result of the advisement, the Committee will specify the additional actions, if any, to be taken.

DSN Commission Policy Committee Procedure for Review of Policies, Directives and Standards Commission Approved November 16, 2023

This document sets forth the procedure to be used by the Policy Committee of the South Carolina Commission on Disabilities and Special Needs (DSN Commission) for the review and approval of DSN Commission Policies, Departmental Directives and Standards governing services funded by the agency.

I. SCOPE:

Approved Commission Policies, Departmental Directives and Standards shall, at a minimum, be reviewed every four (4) years to ensure the content remains current and applicable. Human Resource Directives are exempt from this requirement except those directives identified by the Policy Committee Chairman as necessary for Commission review. All policies, directives and standards are available on the DDSN website. The website, at all times, provides an avenue for public comment on the policies, directives and standards. Public comments regarding policies, directives and standards under external review will only be accepted in written form and during the defined public comment period. It is DDSN's intent to solicit feedback/input from all entities affected by the directives/standards; however, in rare cases the 15-business day period may not occur due to extenuating circumstances.

II. PROCEDURE FOR REVIEW OF COMMISSION POLICIES, DEPARTMENTAL DIRECTIVES AND SERVICE STANDARDS:

- A. In accordance with Department Directive 100-01-DD: Electronic Communications System, when a policy, directive or standard is under external review, it will be posted on the website in a section entitled "External Review/Public Comment on Directives and Standards." A list of Department Directives and Standards due for external review during the fiscal year will be considered by the Policy Committee at the beginning of the fiscal year. These directives and standards will then be placed on the website (External Review/Public Comment on Directives and Standards) to include a description as to the applicable groups (e.g., provider types).
- B. All Commission Policies will remain within the Policy Committee for review and updating. When the Policy Committee review is completed, a version representing consensus by the Committee will be presented to the DSN Commission for approval. Following approval, the Policy will be posted on the DDSN Website in the "Commission Policies and Documents" section.
- C In coordination with the Policy Committee Chairperson, the DSN Commission, DSN Committees or staff may request review and re-prioritization of a policy, directive or standard. Upon a vote of the full DDSN Commission, a policy, directive or standard will be reviewed by the Policy Committee. For each Directive or Standard, the Committee will decide if they will undertake a review. The Policy Committee may delegate directives/standards to staff, who in turn, will make recommendations to the full Commission for approval.

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A. Committee Undertakes a Review of a Directive or Standards:

The directive/standard is reviewed by staff who will make recommendations regarding the document. A draft version, including staff recommendations, will be posted to the website and the public will have 15-business days to review and submit comments (see Directive 100-01-DD: Electronic Communications System).

It is DDSN's intent to solicit feedback/input from all entities affected by the directives/standards; however, in rare cases the 15-business day period may not occur due to extenuating circumstances.

After the 15-business day public review period, staff will consider each comment; make additional changes as needed to the Directive or Standards; and present the Directive or Standards to the Policy Committee. The Committee members may request additional changes and will determine which changes will be accepted based on the comments as well as staff recommendations.

When a consensus is reached by the Policy Committee, a version representing this consensus will be created for presentation to the DSN Commission for approval. Following approval, the document will be posted on the DDSN website under "Current DDSN Directives" or "Current DDSN Standards."

B. Committee Delegates Review of a Directive or Standards to Staff:

When the Committee delegates to staff for revision staff will make recommendations regarding the document. A draft version with staff recommendations will be posted to the website and the public will have 15 business days to review and submit comments (see Directive 100-01-DD: Electronic Communications System).

After the -15-business day public review period, staff will consider each comment and make additional changes to the Directive or Standards. When comments have been considered and changes made, the document will be presented to the full DSN Commission for final approval. This includes edits necessary to align with Medicaid and Home and Community Based Waiver requirements. During Commission presentation, if any two Commission members request formal Policy Committee review, the directive/standard will be sent back to Policy Committee for consideration at the next scheduled meeting.

C. Obsolete Policies/Directives/Standards:

When the Committee determines directives shall be declared Obsolete, a master list will be maintained and the DSN Commission Chairman and Vice-Chairman will sign after voting by the full DSN Commission.

D. Meeting Summary Notes:

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When a new Departmental Directive or Service Standard is created, staff will advise the Policy Committee of the need for the document. Once the Policy Committee has approved this request, the new Directive/Standard will be posted as a draft for 15-business days for public comment. When the public comment period is complete, the Policy Committee will undertake a complete review, and upon consensus, present to the full DSN Commission for final approval.

V. CHANGES TO OTHER DOCUMENTS HAVING THE EFFECT OF POLICY:

When other documents having the effect of policy (e.g., HCBS Waiver amendments, HCBS Waiver Manual) are needed, a summary of the needed changes will be presented to the Policy Committee for advisement. As a result of the advisement, the Committee will specify the additional actions, if any, to be taken.

Reference Number: 100-01-DD

Title of Document: DDSN Directives/Standards

Electronic Communications System

Date of Issue: April 29, 1987

Date of Last Revision: June 18, 2020 XXXX, 2023 (REVISED)

Effective Date: April 29, 1987XXXX, 2023

Applicability: DDSN Central Office, DDSN District Offices, DDSN

Regional Centers, DSN Boards, Contracted Service

Providers, All DDSN Sponsored Services, Consumers and

Their Families and the General Public

PURPOSE:

The purpose of this directive is to identify the requirement for a computerized communications system to support the management, filing and classification of all official Department of Disability and Special Needs (DDSN) policies, directives and standards. These documents must be approved by the DSN Commission Policy Committee and the DSN Commission.

The system requires a minimum review process of every four (4) years of such documents, thereby eliminating the circulation of out-of-date documents and the promulgation of accurate and timely documents that are intended to govern actual practice. However, to avoid duplication of efforts, it is recommended that revisions be made during the review process whenever feasible.

APPLICABILITY:

This Electronic Communication System is applicable to all DDSN Directives/Standards and DDSN Commission Policies.

TYPES OF DOCUMENTS:

These documents are included within the DDSN Central Office document management system.

1) Commission Policy (CP)

A policy or philosophical statement issued by the DSN Commission and implemented by DDSN. These constitute mandates from DDSN's governing board.

2) Departmental Directive (DD)/Standards

A mandate requiring compliance by applicable DDSN Central Office, DDSN District Office, DDSN Regional Center, DSN Board or Contracted Provider staff. A directive may address policy and/or more specific implementation procedures. Standards address service definition and general requirements.

ACCESS: Departmental directives/standards are available in "read only" format on the DDSN Website located at: https://ddsn.sc.gov/providers/ddsn-directives-standards-and-manuals/current-directives. Access is available to the public.

DIRECTIVE/STANDARD FEEDBACK

At the beginning of the fiscal year, a list of all directives/standards due for review during that year will be posted on the DDSN website.

Once ready for external review, the Electronic Communication System Coordinator will post draft directives/standards to the DDSN website allowing sufficient time for feedback to be submitted which may be incorporated. A minimum of 1015 business days will be the default.

NOTE: It is DDSN's intent to solicit feedback/input from all entities affected by the directives/standards; however, in rare cases the <u>1015</u> business day period may not occur due to extenuating circumstances.

QUALITY ASSURANCE:

The Associate State Director-Policy Division is responsible for the administration of the Electronic Communications System.

Robin Blackwood	Gary Lemel
Vice-Chairman	Chairman
Eddie L. Miller, Chairman	Michelle Woodhead, Vice Chairman

Constance Holloway
State Director
Carolyn Benzon
Interim General Counsel
Janet Brock Priest
Associate State Director
Operations
Lori Manos
Associate State Director
Policy
Harley T. Davis, Ph.D.
Chief Administrative Officer
Quincy Swygert
Chief Financial Officer

Chief Information Officer

Greg Meetze

South Carolina
Department of Disabilities
and Special Needs

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Columbia, South Carolina 29203
(803) 898-9600
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COMMISSION
Eddie L. Miller
Chairman
Michelle Woodhead
Vice Chairman
Gary Kocher, M.D.
Secretary
Barry D. Malphrus
David L. Thomas

Reference Number: 100-01-DD

Title of Document: DDSN Directives/Standards

Electronic Communications System

Date of Issue: April 29, 1987

Date of Last Revision: November 16, 2023 (REVISED)

Effective Date: November 16, 2023

Applicability: DDSN Central Office, DDSN Regional Centers, DSN

Boards, Contracted Service Providers, All DDSN

Sponsored Services, Consumers and Their Families and the

General Public

PURPOSE:

The purpose of this directive is to identify the requirement for a computerized communications system to support the management, filing and classification of all official Department of Disability and Special Needs (DDSN) policies, directives and standards. These documents must be approved by the DSN Commission Policy Committee and the DSN Commission.

The system requires a minimum review process of every four (4) years of such documents, thereby eliminating the circulation of out-of-date documents and the promulgation of accurate and timely documents that are intended to govern actual practice. However, to avoid duplication of efforts, it is recommended that revisions be made during the review process whenever feasible.

APPLICABILITY:

This Electronic Communication System is applicable to all DDSN Directives/Standards and DDSN Commission Policies.

100-01-DD November 16, 2023 Page 2

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1) Commission Policy (CP)

A policy or philosophical statement issued by the DSN Commission and implemented by DDSN. These constitute mandates from DDSN's governing board.

2) Departmental Directive (DD)/Standards

A mandate requiring compliance by applicable DDSN Central Office, DDSN District Office, DDSN Regional Center, DSN Board or Contracted Provider staff. A directive may address policy and/or more specific implementation procedures. Standards address service definition and general requirements.

ACCESS: Departmental directives/standards are available in "read only" format on the DDSN Website located at: https://ddsn.sc.gov/providers/ddsn-directives-standards-and-manuals/current-directives. Access is available to the public.

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Once ready for external review, the Electronic Communication System Coordinator will post draft directives/standards to the DDSN website allowing sufficient time for feedback to be submitted which may be incorporated. A minimum of 15-business days will be the default.

NOTE: It is DDSN's intent to solicit feedback/input from all entities affected by the directives/standards; however, in rare cases the 15-business day period may not occur due to extenuating circumstances.

QUALITY ASSURANCE:

The Associate State Director-Policy D Communications System.	Division is responsible for the administration of the Electronic
Eddie L. Miller Chairman	Michelle Woodhead Vice Chairman

<u>Updated Briefing: Drop-in Center Reporting and Funding Reduction</u> <u>Recommendations</u>

November 2023

Statement of Issue:

Four Head and Spinal Cord Injury (HASCI) Drop-In Centers were developed across the state (Charleston, Columbia, Horry, Greenville) to provide people with brain or spinal cord injury (particularly brain injury) a place to go several hours each week, on a regular or occasional basis, with some limited onsite assistance, supervision and instruction. Focused activities related to self-improvement and independent living skills were provided through a State Plan Medicaid service referred to as Rehabilitation Supports. The drop-in services also provided opportunities for social networking and participation in individual and group recreational activities, both onsite and in the community.

The centers were developed in 2003 as part of a HRSA grant received by DDSN and were meant to expand and improve services for people with brain and spinal cord injury. The number of individuals served through the HASCI Division is far smaller than those served through the ID/RD Division, therefore assistance in the way of state funding was provided to stand these centers up and contribute to their continuance. Funding from the delivery of Rehabilitation Support Services further contributed to the centers' ability to operate.

A 2019 review of the Head and Spinal Cord Injury (HASCI) Drop-in Centers revealed inconsistent operations which were not a cost-effective use of DDSN state funding. This, coupled with the fact that DDSN's contract with SC DHHS for the provision of HASCI Rehabilitation Supports was terminated as a result of changes to service requirements, led to a need for the service providers to transition to the provision of HASCI Waiver Day Services and to develop self-sufficiency.

Background:

As former Rehabilitation Support (RS) providers transitioned from the provision of RS services to waiver funded day program services, the expectation of provider self-sufficiency and weaning from current grant funding was set. To assist in the development of a plan to titrate downward the established grant funding, DDSN began providing monthly reports in September of FY 2021 containing the number of billed units and individuals served to former RS providers. The function of the reports was to allow each provider to evaluate its progress and make the necessary changes to become self-sufficient. These reports ceased with the transition to provider direct enrollment, since DDSN was no longer the provider of record and did not have direct access to provider billing information.

Relevant Information:

In January of 2023, the Commission voted to continue funding the centers at the previously approved amount of \$28,000 per quarter, per center (\$112,000/quarter). Approval of the funding was granted for one year, with an update to the Commission provided six months from the initial approval date. An update was provided in July of 2023.

Points for Consideration:

- The Public Health Epidemic began just as the centers started to transition from the provision of Rehabilitation Supports to the provision of waiver funded day services. This limited the centers' ability to expand the group provided day services funded through the waiver.
- Since the Commission's last funding approval in January of 2023, data from received from
 the four providers shows that the previous gains in the number of individuals served and
 units billed have been maintained by three of the four centers. One center's numbers have
 declined significantly, the others have maintained but not shown progress in the number of
 individuals served or units billed.
- The HASCI Waiver is a much smaller waiver compared to the ID/RD Waiver (current total number of HASCI Waiver participants is about 1,025, while the current total number of ID/RD Waiver participants is 8,567). Day programs will always be much smaller when there is a smaller population to draw from, but having the ability to come together with others in similar circumstances and develop skills is important to brain injury survivors and is in important source of respite for their caregivers.
- A new HASCI Waiver service, Independent Living Skills, was added to the waiver over the past year. This is a 1:1 service that is expected to assist providers to attract additional participants and generate additional funding for the centers. The service standards were approved in the June 2023 Commission Meeting, and a provider qualification process was developed and is awaiting approval from the State Fiscal Accountability Authority. Upon approval, potential service providers, including the centers, will be onboarded and can begin service provision. The hope is that the Independent Living Skills service will generate additional funding, but a 1:1 service will not replace the desire of some individuals with brain injury to work on skill building in small groups.

YTD EXPENDITURES BY CATEGORY		EXPENDITURES THRU 10/31/2024	
501000 - PERSONAL SERVICES - PAYROLL	\$	24,802,541	
502000 - CONTRACTUAL SERVICES	\$	65,462,294	
503000 - SUPPLIES AND MATERIALS	\$	2,137,573	
504000 - FIXED CHARGES AND CONTRIBUTIONS (RENT/LEASE)	\$	1,750,660	
505000 - TRAVEL	\$	108,538	
506000 - FIXED ASSETS (CAPITALIZED)	\$	221,280	
507000 - LAND & BUILDINGS	\$	249,623	
511000 - PUBLIC ASSISTANCE	\$	1,787,119	
513000 - EMPLOYER CONTRIBUTIONS - FRINGE BENEFITS	\$	12,051,808	
515000 - UTILITIES	\$	630,705	
517000 - ALLOCATIONS	\$	-	
518000 - AID TO SUBDIVISIONS (STATE AID)	\$	-	
520000 - FIXED ASSETS(NON-CAPITALIZED)	\$	20,495	
TOTAL YTD EXPENDITURES	\$	109,222,637	
% OF YTD EXPENDITURES		33.32%	
% OF SPENDING PLAN REMAINING		66.68%	
% OF FISCAL YEAR REMAINING		66.67%	
% DIFFERENCE - OVER (UNDER) BUDGETED EXPENDITURES		-0.01%	

ITEMS NOT IN SPENDING PLAN (WILL NOT RECEIVE FUNDING UNTIL 10/31/2023)		
561000 - SPECIAL OPERATIONS (LEGISLATIVE PASS THRU)	\$	6,885,000