

**South Carolina Department of Disabilities  
And  
Special Needs**

**STANDARDS FOR LICENSING DAY FACILITIES**

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**South Carolina Department of Disabilities and Special Needs**  
**STANDARDS FOR LICENSING DAY FACILITIES**

South Carolina Code Ann. § 44-20-710 (Supp. 2018), authorizes DDSN to license day facilities for children and/or adults. The Code states:

*“No day program in part or in full for the care, training, or treatment of a person with intellectual disability, a related disability, head injury, or spinal cord injury may deliver services unless a license first is obtained from the department. For the purpose of this article “in part” means a program operating for ten hours a week or more. Educational and training services offered under the sponsorship and direction of school districts and other state agencies are not required to be licensed under this article.”*

DDSN is authorized to establish minimum standards of operation and license programs as Adult Activity Centers; Work Activity Centers and Unclassified Programs which are defined as follows:

- **Adult Activity Center:** A goal oriented program of developmental, prevocational services designed to develop, maintain, increase or maximize an individual’s functioning in activities of daily living, physical growth, emotional stability, socialization, communication, and vocational skills. The minimum participant/staff ratio for an Adult Activity Center is 7:1;
- **Work Activity Center:** A workshop having an identifiable program designed to provide therapeutic activities for intellectually/developmentally disabled workers whose physical or mental impairment is so severe as to interfere with normal productive capacity. Work or production is not the main purpose of the program; however, the development of work skills is its main purpose. The program must have a certificate from the United States Department of Labor designating it as a Work Activity Program when applicable. The minimum participant/staff ratio for a Work Activity Center is 7:1.
- **Unclassified Program:** A program that provides a beneficial service and observes appropriate standards to safeguard the health and safety of individuals, staff and the public. The minimum participant/staff ratio is 10:1.

A license will only be issued to programs which are in compliance with the standards noted in this document. A license may be issued for new programs or those found to be out of compliance upon receipt of an acceptable plan of correction for eliminating deficiencies identified in the official licensing survey. The plan must show that the deficiency will be corrected within a 30 day period. An extension may be granted for another 30 days when requested in writing and good cause shown. A license will be effective for up to a 12 month period, beginning with the date of issuance. DDSN will make a determination of which license to issue based on the services to be rendered through the facility. DDSN Directive 104-01-DD: DDSN Certification and Licensure of Residential and Day Facilities, explains the process for becoming licensed.

## **Definitions**

Program: Adult Activity Center, Work Activity Center, or Unclassified Program.

Service: Support Center, Day Activity, Career Preparation, Employment Services, or Community Service.

Participant: The individual with a disability who receives services through the program.

<b>Standard</b>		<b>Guidance</b>
1	Each program must be operated in accordance with applicable state and federal laws.	
2	<p>There will be at least the following minimum participant/staff ratio for each program:</p> <ul style="list-style-type: none"> <li>• Adult Activity Center - 7:1;</li> <li>• Work Activity Center - 7:1;</li> <li>• Unclassified Program - 10:1.</li> </ul>	Note: This ratio is applicable to the entire program and staff who are not responsible for direct participant support may be included in this ratio.
3	A designated responsible staff member must be present and in charge at all times a participant is present. The staff member left in charge must know how to contact the director at all times.	
4	At no time shall any participant be without supervision unless a specified activity which allows for an adult participant's independent functioning is planned and documented.	Please refer to DDSN Directive 510-01-DD: Supervision of People Receiving Services.
5	A minimum participant/staff ratio of 10:1 must be maintained in each classroom, workshop, program area, etc. at all times.	When determining staffing patterns within a program and within a classroom, workshop, program area, etc., the supervision needs of each participant must be considered including their need for "independent functioning" as defined in Standard #4.
6	Each program shall have provisions for alternate coverage for staff members who are ill. Such policies shall require staff members with acute communicable disease, including respiratory infection, gastro-intestinal infection, and skin rash, to absent themselves during the acute phase of illness.	
7	When licensed as an Adult Activity Center, participants will be at least 18 years of age.	

<b>Standard</b>		<b>Guidance</b>
8	When licensed as an Unclassified Program, participants will be at least 12 years of age.	
9	When licensed as an Unclassified Program, participants under age 18 are served in a program area apart/separated from adult participants.	
10	Each facility shall provide a minimum of 50 square feet of program space per participant.	Per participant present in the facility.
11	Each facility shall afford each participant adequate space for privacy including, but not limited to: <ul style="list-style-type: none"> <li>a) Toileting facilities behind a lockable door;</li> <li>b) Personal care and /or treatment areas;</li> <li>c) Lockable storage for participant's personal belongings.</li> </ul>	Refer to:  42 CFR§441.301(c)(4)(iii)
12	For facilities initially licensed on or after July 1, 2019, the setting must be free from qualities that may be presumed institutional.	Facilities that may have qualities that may be presumed to be institutional include: <ul style="list-style-type: none"> <li>• Facilities in a publically or privately-owned inpatient treatment facility; and</li> <li>• Facilities on the grounds of or adjacent to a public institution.</li> </ul> Refer to:  42 CFR§441.301(c)(4)(i-v)
13	For facilities initially licensed on or after July 1, 2019, the setting must be free from characteristics that have the effect of discouraging integration of participants from the broader community.	Facilities that may have characteristics that have the effect of discouraging integration from the broader community include, but may not be limited to: <ul style="list-style-type: none"> <li>• Settings completely enclosed by walls or fences with locked gates;</li> </ul>

	Standard	Guidance
14	Programs must be: <ol style="list-style-type: none"> <li>a) Free from obvious hazards.</li> <li>b) Clean.</li> <li>c) Free of litter/rubbish.</li> <li>d) Free of offensive odors.</li> <li>e) Equipment in good working order.</li> <li>f) Accessible to participants and staff.</li> </ol>	<ul style="list-style-type: none"> <li>• An additional setting added to an existing cluster (i.e., 2 or more) of DDSN-licensed residential or day settings.</li> </ul> Refer to:  42 CFR§441.301(c)(4)(i-v)
15	Hot water temperature in the program area accessible to participants must never be more than 110 degrees Fahrenheit.	
16	The facility will meet the regulations of the appropriate standards for fire safety as set forth by the South Carolina Fire Marshal codes. Report of an approved fire safety inspection completed by the Office of State Fire Marshal and shall be maintained in the facility's records.  There must be evidence of corrective action taken no later than 24 hours after the citation for any of the following: <ol style="list-style-type: none"> <li>1. Failure to maintain working smoke alarms.</li> <li>2. Failure to maintain clear path of egress.</li> <li>3. Combustibles inappropriately stored.</li> </ol>	See fire code requirements at: <a href="http://scfiremarshal.llronline.com/INSPECT/index.asp?file=main.htm">http://scfiremarshal.llronline.com/INSPECT/index.asp?file=main.htm</a>  Fire Safety Inspections, when required, must be made by a Fire Marshal employed by the State Fire Marshal's office.  Initial fees and annual fire inspections are pre-paid by DDSN, but inspections must be requested. Inspection requests are completed using the following link: <a href="https://firemarshal.llronline.com/Fire/appLogin.asp">https://firemarshal.llronline.com/Fire/appLogin.asp</a>  Providers must request the inspection with sufficient notice to schedule the annual inspection prior to the prior expiration date. If requests are submitted by the 15th of the month, the inspection will take place by the end of the following month.

	<b>Standard</b>		<b>Guidance</b>
	<p>4. Failure to ensure that windows and doors are fully operable by ambulatory residents without the use of special tools.</p> <p>5. Security devices (double-keyed locks) affecting means of egress are in use.</p> <p>6. Failure to maintain emergency lighting, when installed.</p> <p>Failure to maintain documentation of fire drills in an accessible location for review.</p>		<p>A copy of the most recent inspection report must be present on-site and available for review by DDSN and/or its licensing contractor.</p> <p>Sites that have fire sprinkler systems must be inspected in accordance with NVPA25 standards and DHEC requirements.</p> <p>To maintain certification: monthly, quarterly, semi-annual, annual and five (5) year inspections must be completed. All the inspections can be handled by day staff or maintenance staff, EXCEPT for the five (5) year inspection which must be performed by a certified sprinkler contractor. Documentation of all inspections must be maintained by the provider.</p>
17	The provider shall formulate and post in each room and work area, in a place clearly visible, a diagrammatic plan for evacuation of the building in case of disaster.		
18	All employees shall be instructed and kept informed regarding their duties under the plan.		
19	The center shall hold fire/disaster* drills at least once each quarter. Each drill conducted shall be recorded as to time, date of drill, number of those participating, and the total time required for evacuation. The record shall be signed by the individual conducting the drill.		<p>*Fire drills will be held quarterly. Additionally, disaster drills will be held annually.</p> <p>A copy of documentation from the prior 12 months must be present on-site and available for review by DDSN and/or its licensing contractor.</p>
20	Passageways shall be free of obstructions at all times.		Immediate corrective action required when the obstruction prevents egress.
21	All staff shall be instructed in the proper use of fire extinguishers as documented in reports.		
22	The use of electrical extension cords is prohibited.		Immediate corrective action required when cited.

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23	Programs serving individuals who are deaf will develop a fire alarm system to assure the clients are alerted to the danger of fire.	
24	A safety check on electrical systems shall be made by a licensed/certified electrician/contractor and a written report kept on file at the facility at all times. A new inspection shall be made after any expansion, repair, renovation, or the addition of any major electrical appliances or equipment.	Sites that have emergency generators must perform complete and thorough inspections of them. Routine service by a qualified contractor is encouraged to ensure that generators are maintained in good operating condition. Service contracts generally include semi-annual and/or annual inspections. Providers must perform monthly checks of the generators. Documentation of all checks must be maintained by the provider. See DDSN Directive 300-03-DD: Annual Certification of Electrical, Mechanical, Fire Alarm and Sprinkler Systems for Renewal of Licensure, for sample forms which may be used to conduct monthly inspections. A copy of the most recent inspection must be present on-site and available for review by DDSN and/or its licensing contractor.
25	All staff shall be knowledgeable of utility cut-offs throughout the facility.	
26	The heating system shall be approved annually by a licensed/certified HVAC contractor and the report maintained on file at the facility. Floor furnaces shall have adequate protective coverings or guards to insure that individuals coming into contact with them shall not be burned. If space heaters are used, they shall be vented properly and screens or other protective devices shall be provided to prevent individuals from coming into contact with heaters.	
27	All cleaning equipment supplies, insecticides, etc., shall be in a locked cabinet or located in an area not accessible to unauthorized individuals.	
28	Furniture, equipment, and training materials shall be appropriate to the ages of the individuals in the program; shall be sturdily constructed without	

<b>Standard</b>		<b>Guidance</b>
	sharp edges; shall not be covered with toxic paint; and shall present minimal hazards to individuals.	
29	Stationary outdoor equipment shall be firmly anchored.	
30	When providing Support Center Services, the area in which services are provided must have comfortable accommodations and materials for activities that are appropriate for the individuals who receive the service.	
31	The use of tools and equipment shall be supervised by staff.	Supervision will be provided in accordance with the individual's assessed need. As appropriate, independent use of equipment will be allowed.
32	In the presence of unusual hazards arising from certain work operations, appropriate safety precautions shall be taken to insure the protection of those present.	
33	Equipment and Materials for Learning, Recreational Experiences--Indoor and outdoor equipment and materials shall be provided in sufficient quantity and variety to meet the developmental need of the participants. The equipment will be age appropriate for the participants who use it.	
34	If the facility operates a transportation system, vehicles used for the transportation of participants shall ensure safety for the passengers.	This standard relates to passenger safety generally and should capture any factors that do not fall specifically under any of the related standards (32 – 36). For example, a vehicle accident where the staff driving was at fault, and for which the cause of the accident cannot be attributed to non-compliance with any of standards 32 – 36, would result in this standard being not met.
35	Vehicles shall be inspected daily, using a checklist. The driver shall sign a report which indicates that he/she has checked the lights, brakes, horn, wipers and tires.	

<b>Standard</b>		<b>Guidance</b>
36	Maintenance of vehicles shall be recorded, updated, and signed every month.	
37	Each passenger shall have adequate seating space and shall use a seat belt or restraint system approved by the Highway Traffic Safety Administration Standards which is appropriate for his/her age while being transported.	
38	Each vehicle will have: <ul style="list-style-type: none"> <li>• First aid kit which is replenished after each use and checked monthly for completeness;</li> <li>• Fire extinguisher which is in good working order and securely fastened in a manner which is easily accessible to the driver.</li> </ul>	
39	Vehicle operators and all staff who transport individuals shall be licensed drivers and shall complete and have a current defensive driving course certificate prior to transporting individuals which is on file with the provider.	This standard is applicable to all staff who appear as drivers on vehicle logs. Staff who do not operate vehicles are not subject to these requirements.
40	Medication to be administered shall be stored in a locked cabinet not accessible to unauthorized individuals.	
41	Prescribed medication shall be kept in the original containers bearing the pharmacy label which shows drug name, the prescription number, date filled, physician's name, directions for use, and the patient's name.	
42	Written authorization to administer any medication must be given.	If the participant is over age 18 and has not been adjudicated incompetent, he/she is considered his/her own guardian and therefore may authorize the administration of his/her medications. If a non-

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		<p>adjudicated adult is unable to authorize, authorization may be given by a parent/representative or surrogate. For those under age 18 or those adults who have been adjudicated incompetent, authorization must be given by parents or guardian.</p> <p>For ICF/IID residents, medications must be given in accordance with applicable ICF/IID regulations and standards.</p>
43	Medications must be safely and accurately given.	<p>Medications given to ICF/IID residents must be given in accordance with applicable ICF/IID Standards.</p> <p>Medication has not expired.</p> <p>There are no contraindications (i.e., no allergy for the drug).</p> <p>Administered at the proper time, prescribed dosage, and correct route.</p> <p>If a provider has documented all medication errors, and no errors resulted in the need for additional medical treatment as a result of the error, the appropriate remediation for the error was documented, AND the monthly medication error rate for that location does not exceed .035 for the prior three (3) months, then the provider should not be cited for this indicator. If the monthly error rate is more than .035 for the prior three months (3), even with the documentation of remediation, then the provider will be cited.</p> <p>Medication Records, Medication Error Reports, and the monthly error rate calculations for the location must be available at the inspection site for the three (3) months prior to the review date. If the error rate has not yet been calculated for the month immediately preceding the review, the reviewer may go back four (4) months.</p> <p>Providers may use .035 or 3.5% as the threshold, but must calculate the monthly error rate using the formula defined in DDSN Directive 100-29-DD: Medication Error/Event Reporting. Error rates for the current month must be documented and available by the last day of the following month.</p> <p>See DDSN Directive 603-13-DD: Medication Technician Certification.</p>

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44	<p>Employees supervising the taking of medication will document that medication was taken by the participant as authorized by parents or guardian.</p>	<p>For participants not independent in taking their own medication/treatments, a medication/treatment log must be maintained to denote:</p> <ul style="list-style-type: none"> <li>a) The name of medication or type of treatment given.</li> <li>b) The current physician’s order (and purpose) for the medication and/or treatment or authorization from the responsible party.</li> <li>c) The name of individual giving the medication.</li> <li>d) Time given.</li> <li>e) Dosage given.</li> </ul> <p>The medication log must be reviewed at a minimum, monthly. If the reviews indicate error, actions must be taken to alleviate future errors. Entries must be made at the time the medication/treatment was given.</p> <p>Medication includes over-the-counter medications.</p>
45	<p>Outdated medications and discontinued medications are disposed of per provider policy.</p>	
46	<p>A first aid kit shall be maintained at each program site.</p>	<p>First Aid Kit is a collection of supplies which includes: mild hand soap or hand sanitizer liquid; cotton tipped applicators; gauze bandages, one (1) and two (2) inch widths; sterile gauze, three (3) inch by three (3) inch; band-aids; adhesive tape; scissors; disinfectant; and thermometer.</p>
47	<p>Each program will have a current activity schedule posted.</p> <p>The schedule will reflect the hours the facility is open and the hours the program offers supervised services.</p> <p>The schedule must reflect the scheduled activities of the day.</p>	<p>The schedule should reflect the hours the facility is open. If supervised services (e.g., second shift enclave) are offered, the schedule may reflect those times specifically, or may reflect that supervised services may be available as needed. A specific schedule for activities is not required, but instead the activity choices available should be listed.</p>