



South Carolina
Department of Disabilities
and Special Needs

Independent Living Skills (ILS) Program Standards

June 15, 2023 (NEW)

Effective July 1, 2023

DEFINITIONS:

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

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

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

ILS training must be provided in either:

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

Desired Outcomes:

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

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

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

General Information:

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

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

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

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

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

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

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

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

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

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