

# **SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS**

## **MINUTES**

July 15, 2021

The South Carolina Commission on Disabilities and Special Needs met on Thursday, July 15, 2021, 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**

Stephanie Rawlinson – Chairman

Barry Malphrus – Vice Chairman

Robin Blackwood – Secretary

Gary Kocher, M.D. (*Joined at 10:46 a.m.*)

Gary Lemel

Eddie Miller

#### **Present Conference Call**

David Thomas

### **DDSN Administrative Staff**

Constance Holloway, Interim State Director and General Counsel; Pat Maley, Chief Financial Officer and Deputy Director; Rufus Britt, Associate State Director, Operations; Susan Beck, Associate State Director, Policy; Robb McBurney, Interim Public Information Officer and Legislative Liaison; Michael Mickey, Information Technology Director; Jacob Flowers, Attorney III; Andrew Tharin, Director of Engineering; and Christie Linguard, Administrative Coordinator.

### **Notice of Meeting Statement**

Chairman Rawlinson called the meeting to order and Secretary Blackwood 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.

### **Adoption of the Agenda**

On a motion by Commissioner Blackwood, seconded by Commissioner Malphrus, the commission unanimously adopted the July 15, 2021 meeting agenda as presented. (Attachment A)

### **Invocation**

Commissioner Miller gave the invocation.

**Approval of the Minutes from June 17, 2021 Commission Meeting; June 30, 2021 Emergency Commission Meeting and the July 14, 2021 Special-Called Meetings**

On a motion by Commissioner Blackwood, seconded by Commissioner Malphrus and unanimously approved by the commission, all three (3) sets of meeting minutes were approved as presented. (Attachment B)

**Commissioners' Update**

Commissioner Malphrus provided all commission members with a cartoon. Commissioner Blackwood announced that Governor Henry McMaster has proclaimed July 22, 2021 as Fragile X Awareness Day. She spoke briefly and candidly about this syndrome that her son inherited.

**Public Input**

There was no one public input requests.

**Commission Committee Business**

A. Finance and Audit Committee

The Finance and Audit Committee met on July 6, 2021. The following topics were presented for review and approval by the Commission:

Financial Approval & Threshold Reporting for July 2021 – there were three (3) solicitations that were presented in the sub-committee meeting that were approved as routine solicitations.

The Comprehensive Permanent Improvement Plan (CPIP) to replace twenty-six variable air volume (VAV) terminals, which the commission approved at the May 20<sup>th</sup> meeting this year, was presented at the sub-committee. These terminals will be placed at the Whitten Center, Dorm 205. Bids were advertised on June 8, 2021 through the South Carolina Business Opportunities (SCBO); and only one bid was received by Gregory Electric Company of Columbia, SC for a base bid of \$224,460.00. The sub-committee approved this bid and is bringing to the full commission for a vote. Chairman Rawlinson treated the approval from the subcommittee as a motion and second, the commission members unanimously approved the bid from Gregory Electric Company. (Attachment C)

B. Policy Committee

The Policy Committee met on July 13, 2021. The following topic was presented for review and approval by the Commission:

368-10-DD: Records Retention of Individual Service Records – This directive was referred to staff for revisions. Commissioner Lemel made a motion to amend the directive to replace his name for signature as Chairman with Stephanie Rawlinson’s name; this motion to amend was seconded by Commissioner Malphrus and unanimously approved. Chairman Rawlinson treated the approval of the actual directive from the subcommittee as a motion and second, the commission members unanimously voted to approve this directive with the amendment. (Attachment D)

Commissioner Malphrus made note that the committee is still amending the Outside Employment directive and will bring it back to the commission once it has been fully vetted. The policy committee will be working hard to review and amend a goal of at least 45 directives this year.

### **Old Business**

#### **A. New Commissioner Committee Assignments**

Chairman Rawlinson began by stating that she has spent a month working with staff, the interim director, legal counsel and members of the executive staff to develop committee-types and taskforces to use here at the agency. The goal is to set forth subcommittees and taskforces filled with both staff and persons in the community to work together for recommendations, ideas, etc. in an effort to better serve our consumers. These subcommittees and taskforces will not be able to take votes and the meetings will not be made public. Chairman Rawlinson went through each subcommittee and taskforce along with the purpose and members. Commissioner Malphrus noted that staff holding interim positions at the agency will be replaced on the subcommittees and/or taskforces with whomever is hired for that specific job. Interim State Director Holloway stated that the membership may change over the course of a year but the commission members serving will remain the same. Commission Malphrus made a motion to approve the subcommittees and taskforces presented, seconded by Commissioner Lemel and unanimously approved by the commission. (Attachment E)

#### **B. ID/RD Waiver Renewal Update**

Ms. Beck provided a briefing on the status and timeline of the Intellectual Disability/Related Disabilities Waiver renewal, which is due to be renewed on January 1, 2022. Acuity assessments will not be included at this time. The Department of Health and Human Services (DHHS) has given us their timeline to include a presentation with updates and last advisement at their August Medical Care Advisory Committee (MCAC); afterwards, there

will be a public comment posted no later than August 15, 2021 for two webinars between August 15 – September 15, 2021; September 30<sup>th</sup> is the last submission date for the Centers for Medicare and Medicaid Services (CMS); and October 2, 2021 is 90 days prior to the ID/RD Waiver expiration.

C. Band B & I Issue – Band Change & Outlier Recommendations

Mr. Pat Maley presented seven (7) submissions for outlier requests; staff recommends that all seven (7) not be approved. Commissioner Malphrus made a motion to deny all seven (7) requests, seconded by Commissioner Blackwood and unanimously approved by the commission. (Attachment F)

**New Business**

A. Regional Centers' Workforce Initiatives

Interim State Director Holloway announced that, with the support from the commission, plans are underway to strengthen services at our five (5) regional centers. In June of this year, all facility administrators were asked to share a memorandum from Ms. Holloway re-emphasizing a zero tolerance for abuse, mistreatment of individuals in our care. In an effort to re-emphasize this zero tolerance even more, our agency has partnered with the Department on Aging (DoA) through a Memorandum of Understanding (MOU) to produce content and training videos that will help to better train direct support care staff in the onboarding process. Ms. Holloway thanked DoA's director, Connie Munn and all of her staff who worked collaboratively for months to produce this MOU for training. Mr. Britt acknowledged and thanked the Long-Term Care Ombudsman, Ms. Dale Watson and General Counsel Nicole Hair at DoA for all of their assistance in establishing this MOU. Mr. Britt also spoke about workforce initiatives that have already been employed or will be employed in the future by the agency. Commissioner Miller made a motion to approve the initiative set forth by the agency, seconded by Commissioner Blackwood and unanimously approved by the commission. Commissioner Lemel would like for Dale Watson and/or Nicole Hair to be added to the Training Taskforce. (Attachment G)

B. Financial Update

Mr. Maley presented the financial update. He noted that the General Assembly and the Governor finalized the agency's budget. This means that DDSN will receive \$11 million in state funds which will turn into \$23 million in matched funding. Mr. Maley also noted that the FY19 cost report is at SCDHHS; it is expected to produce excess cost in the system.

FY13 and FY14 are awaiting Mr. Maley's review and the FY15 may be completed by the middle of August.  
(Attachment H)

Executive Session

At 11:05 a.m., Chairman Rawlinson requested a motion to begin executive session to discuss personnel matters to include the hiring of a legislative liaison and a director of the internal audits division. On a motion by Commissioner Blackwood, seconded by Commissioner Miller and unanimously approved by the commission, executive session began.

Upon rising out of executive session at 3:58 p.m., Chairman Rawlinson announced that no motions or decisions were made and no votes were taken during executive session. Commissioners Kocher and Lemel had to leave executive session early.

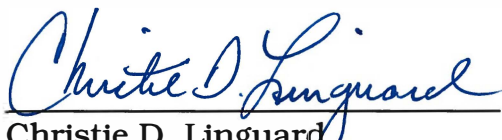
Next Regular Meeting

August 19, 2021

Adjournment

On a motion by Commissioner Blackwood, seconded by Commissioner Miller and unanimously approved by the commission, the meeting was adjourned at 4:00 p.m.

Submitted by:



Christie D. Linguard  
Administrative Coordinator

Approved by:

DocuSigned by:

**Robin Blackwood**

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Commissioner Robin Blackwood  
Secretary

**SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS****A G E N D A**

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

**July 15, 2021****10:00 A.M.**

1. Call to Order *Chairman Stephanie Rawlinson*
2. Notice of Meeting Statement *Commissioner Robin Blackwood*
3. Welcome
4. Adoption of Agenda
5. Invocation *Commissioner Ed Miller*
6. Approval of Commission Meeting Minutes
  1. June 17, 2021 Commission Meeting
  2. June 30, 2021 Emergency Commission Meeting
  3. July 14, 2021 Special-Called Meeting
7. Commissioners' Update *Commissioners*
8. Public Input
9. Commission Committee Business
  - A. Finance and Audit Committee *Committee Chair Robin Blackwood*

Financial Approval & Threshold Reporting for July 2021

    - a. Comprehensive Permanent Improvement Plan (CPIP) – Replacement of Variable Air Volume (VAV) Terminals
  - B. Policy Committee *Committee Chair Barry Malphrus*
    1. 368-01-DD: Records Retention of Individual Service Records
    2. Committee Updates
10. Old Business:
  - A. New Commissioner Committee Assignments *Chairman Stephanie Rawlinson*
  - B. ID/RD Waiver Renewal Update *Ms. Susan Beck*
  - C. Band B & I Issue – Band Change & Outlier Recommendations *Mr. Pat Maley*
11. New Business:
  - A. Regional Centers' Workforce Initiatives *Ms. Constance Holloway/Mr. Rufus Britt*
  - B. Financial Update *Mr. Pat Maley*
12. Executive Session
 

Personnel Matters

13. Enter into Public Session
14. Next Regular Meeting (August 19, 2021)
15. Adjournment

**SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS**

**MINUTES**

June 17, 2021

The South Carolina Commission on Disabilities and Special Needs met on Thursday, June 17, 2021, 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

Gary Lemel – Chairman

Barry Malphrus – Vice Chairman

Robin Blackwood – Secretary

Gary Kocher, M.D. (*Joined at 11:15 a.m.*)

Stephanie Rawlinson

Eddie Miller

Present Conference Call

David Thomas (*Joined for Executive Session*)

DDSN Administrative Staff

Constance Holloway, Interim State Director and General Counsel; Pat Maley, Chief Financial Officer and Deputy Director; Rufus Britt, Associate State Director, Operations; Susan Beck, Associate State Director, Policy; Robb McBurney, Interim Public Information Officer and Legislative Liaison; Michael Mickey, Information Technology Director; Ken Parks, Information Technology Manager; Jacob Flowers, Attorney III; and Christie Linguard, Administrative Coordinator.

Notice of Meeting Statement

Chairman Lemel called the meeting to order and Secretary Blackwood 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.

Adoption of the Agenda

On a motion by Commissioner Malphrus, seconded by Commissioner Miller, the commission unanimously adopted the June 17, 2021 meeting agenda as presented. (Attachment A)

Invocation

Commissioner Blackwood gave the invocation.



**Approval of the Minutes from May 20, 2021 Commission Meeting; May 27, 2021 and June 10, 2021 Special-Called Meetings**

Commissioner Malphrus made a motion to include the word “collectively” after “Providers” under New Business, section C; this motion was seconded by Commissioner Miller. Commissioner Miller made a motion to change “It was recommended...” under section 9A Financial Audit Planning to “The State Auditor recommended”; this motion was seconded by Commissioner Rawlinson. Both amendments were approved unanimously by the Commission. Commissioner Miller made a motion to approve the amended May 20, 2021 Commission meeting minutes, the May 27, 2021, and the June 10, 2021 Special-Called Meeting minutes, seconded by Commissioner Rawlinson and unanimously approved by the commission members. (Attachment B)

**Commissioners' Update**

Commissioner Malphrus mentioned Wisconsin Shepard's College had a wonderful graduation that he watched online. This is a wonderful school for practical education for persons with disabilities. Chairman Lemel noted that he attended a presentation at Miracle Park earlier this month. The Carolina Panthers hosted an event at the Park where the Panther's Foundation made a \$200,000 donation as well, the Pepper Foundation made a donation of \$500,000 to the Park. According to Chairman Lemel, this project was the reason why DDSN selected Rock Hill to receive the Silver Palmetto a couple of years ago because this Park is on the cutting edge.

**Public Input**

There was one public input request from Jerry Mize.

**Commission Committee Business**

A. Finance and Audit Committee

The Finance and Audit Committee met on June 1, 2021. The following topics were presented for review and approval by the Commission:

Process for Approving Non-Service Contracts \$200,000 or Greater – there are three solicitations that were presented in the sub-committee meeting; however, only one needs the full commission's approval. There was also one existing contract increasing \$200,000 or greater which includes the four individuals with high needs who are currently being served at Wellpath. Community Options (residential provider) will start serving these four individuals with the next 1-2 months in a CTH II.

Commissioner Malphrus made a motion to approve the procedures as outlined but the Finance and Audit Committee, seconded by Commissioner Rawlinson and unanimously approved by the commission.

Commissioner Blackwood made a motion to approve the The Family Support Network solicitation as presented, this motion was seconded by Commissioner Rawlinson and unanimously approved by the commission. (Attachment C)

275-04-DD: Procedures for Implementation of DDSN Audit Policy for DSN Boards – Commissioner Blackwood noted that the agency received a good amount of feedback from providers concerning these directives. Chairman Lemel treated the approval from the subcommittee as a motion and second, the commission members unanimously approved this directive. (Attachment D)

275-06-DD: Procedures for Implementation of DDSN Audit Policy for Contracted Service Providers – Chairman Lemel treated the approval from the subcommittee as a motion and second, the commission members unanimously approved this directive. (Attachment E)

B. Policy Committee

The Policy Committee met on June 8, 2021. The following topics were presented for review and approval by the Commission:

413-09-DD: Outside Employment – Commissioner Malphrus noted that general counsel is continuing to review comments received from staff and is strongly recommending that the Policy Committee review again before the commission approves. Received as information only.

700-07-DD: Employment First – This directive was posted for external review and for public comment. There were no comments. Chairman Lemel treated the approval from the subcommittee as a motion and second, the commission members unanimously approved this directive. (Attachment F)

367-15-DD: Mobile Device Security Policy – This policy is recommended to be marked obsolete because they were previously combined into another directive earlier this year. Chairman Lemel treated the approval from the subcommittee as a motion and second, the commission members unanimously approved this directive. (Attachment G)

367-17-DD: Human Resource and Security Awareness Policy – Chairman Lemel treated the approval from the subcommittee as a motion and second, the commission members unanimously approved this directive. (Attachment H)

Ms. Susan Beck gave a summary of the number of directives, standards and processes that have been completed to date.

C. Nominating Committee

Election of Officers

Committee Chair Blackwood noted that the committee met on June 16, 2021 to recommend the following slate of officers: Commissioner Stephanie Rawlinson as Chairman; Commissioner Barry Malphrus as Vice Chairman; and Commissioner Robin Blackwood as Secretary. Coming out of committee, Chairman Lemel treated this slate of officers as a motion and second. He then asked if there were any other additional nominations for additional positions, and there were none. Commissioner Rawlinson made a motion to vote by acclamation as opposed to written ballot, seconded by Commissioner Malphrus. The aforementioned slate of officers were unanimously approved by a vote of acclamation.

Commissioner Lemel turned the gavel over to the new Chairman, Stephanie Rawlinson. Chairman Rawlinson stated that she thanks the commission for having faith in her to accept this assignment.

New Commissioner Committee Assignments

Chairman Rawlinson announced the appointment of committee chairs: Commissioner Ed Miller is the Chair of the Legislative Committee; Commissioner Robin Blackwood will remain Chair of the Finance and Audit Committee; and Commissioner Malphrus will remain Chair of the Policy Committee. Chairman Rawlinson would like to speak with Commissioners Lemel, Kocher and Thomas to get their input on which committees they would like to serve on for the upcoming year.

**Old Business**

A. Update on Listening Sessions

Mr. Robb McBurney thanked all commission members for their flexible participation in the listening sessions. He also thanked Michael Mickey and the executive staff for assisting with staffing these events. Mr. McBurney noted that the agency has held three sessions already. Going forward, the agency will catalog these listening sessions on the DDSN website as well as generate a summary for all commission members.

Providers expressed a variety of workforce issues so far along with ideas on how to combat the staffing issues after the pandemic. Other issues are repairing legacy buildings, home modifications, behavioral health improvement issues and respite assistance. Mr. Maley commented that a financial spreadsheet will be completed after all sessions have ended and that the deadline is June 28<sup>th</sup> for submission to the SC Department of Health and Human Services.

B. ID/RD Waiver Renewal Update

Ms. Beck provided a briefing on the status and timeline of the Intellectual Disability/Related Disabilities Waiver renewal. This waiver renewal will come to fruition on January 1, 2022. Usually, CMS requires a 90 day submission; however, DHHS has been preparing for a 180 day submission timeline to provide a buffer of time for any incidental issues. The agency is compiling a list of things needed to be delivered back to DHHS, to include the suspended amendment list; development of the independent living skills services; e-monitoring; career preparations; waiver case management limits; employment services individual transportation; residential rate (multiple); increased requirements for day services that may include increased rates; and acuity assessment consideration. The acuity or service assessment will be brought back to the Commission for approval per the Executive Limitations policy. DDSN and DHHS jointly have a technical assistance group (New Editions) to work with the agency, bringing information from other states into consideration as well.

C. Waiver Waiting List Update

Ms. Manos updated the Commission on the waiver waiting list to date. She presented a PowerPoint that outlined exactly the number of individuals currently receiving specific services now, pending slots for individuals for each waiver (community support waiver (capped); head and spinal cord injury waiver and intellectual disability and related disabilities waivers) and available slots.

(Attachment I)

D. Band B & I Issue – Band Change & Outlier Recommendations

Mr. Pat Maley presented 19 submissions for band increases; staff recommends that nine (seven from Band G to H and two outliers) be approved for an annualized cost of \$251,633. Commissioner Malphrus made a motion to approve the nine band increases, seconded by Commissioner Blackwood and unanimously approved. Commissioner Malphrus made a motion to deny the other 10 requests due to lack of justification. This motion was seconded by Commissioner Blackwood and unanimously approved by the commission.

(Attachment J)

E. Legislative Update

Mr. Robb McBurney gave a brief legislative update which included the conference committee meeting on House Bill 3244, employment first oversight commission which involves this agency. Legislators are finishing up the budget because they received new revenue in the middle of the legislative process. Pay raise is also on the list as well.

**New Business**

A. FY22 Community Contracts

Mr. Maley presented the FY22 Community Contracts outlined in the handouts he provided to commission members. The separation of fee-for-service contracts and day and residential contracts has begun. The agency's carry-forward will be approximately \$50 million. Today, the agency would like for the commission to approve the wrap-around or existing contracts. Mr. Maley briefly went through all attachments. Commissioner Lemel made a motion to approve the contracts as presented with the caveat of titrating down the Richland-Lexington DSN Board Admin Program Expenses of \$124,000 over the next six months and then review again with a plan; this motion was seconded by Commissioner Miller and unanimously approved by the commission.  
(Attachment K)

B. Family Supports Network Solicitation

This solicitation was approved earlier during the Finance and Audit Committee presentation, under the sub-heading, "Process for Approving Non-Service Contracts \$200,000 or Greater".  
(Attachment L)

C. Financial Update

Mr. Maley noted that as we exit the capitated model, this spreadsheet will be updated to show the fee-for-service budget model. You will see expenditures and an adjustment column to include the DHHS state match. The agency anticipates cash reserves in the amount of \$50 million. Commissioner Malphrus made a motion to approve the financial report, seconded by Commissioner Lemel and unanimously approved by the commission.  
(Attachment M)

Executive Session

At 12:12 p.m., Chairman Rawlinson requested a motion to begin executive session to discuss personnel matters to include the hiring of a director for the internal audit division; the hiring of a legislative liaison; and the next steps in the search for a new executive director. On a motion by Commissioner Blackwood, seconded by Commissioner Malphrus and unanimously approved by the commission; executive session will begin at 12:27 p.m. following a 15-minute break.

Upon rising out of executive session at 1:20 p.m., Chairman Lemel stated that it was pointed out by Commissioner Malphrus that the new slate of officers takes effect at the end of the commission meeting today. He went on to say that the algorithms were not any differently if he had handled the portion of the meeting he turned over to her. Chairman Lemel announced that no motions or decisions were made and no votes were taken during executive session. Commissioner Blackwood made a motion to have DDSN instruct the staffing agency handling the State director search that they are using of the commission members schedules over the next phase of the interview process, seconded by Commissioner Miller and unanimously approved by the commission.

Next Regular Meeting

July 15, 2021

Adjournment

On a motion by Commissioner Miller, seconded by Commissioner Rawlinson and unanimously approved by the commission, the meeting was adjourned at 1:23 p.m.

Submitted by:

Approved by:

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Christie D. Linguard  
Administrative Coordinator

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Commissioner Robin Blackwood  
Secretary

SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS

EMERGENCY COMMISSION MEETING MINUTES

June 30, 2021

The South Carolina Commission on Disabilities and Special Needs met on Thursday, June 30, 2021, 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

Gary Kocher, M.D.

Present Microsoft Teams

Stephanie Rawlinson – Chairman

Barry Malphrus – Vice Chairman

Robin Blackwood – Secretary

Gary Lemel

David Thomas

DDSN Administrative Staff

Constance Holloway, Interim State Director and General Counsel; Pat Maley, Chief Financial Officer; Rufus Britt, Associate State Director of Operations; Susan Beck – Associate State Director of Policy; Jacob Flowers – Attorney; Robb McBurney, Interim Public Information Officer and Legislative Liaison; Ken Parks, IT Manager and Christie Linguard, Administrative Coordinator.

Call to Order and Notice of Meeting Statement

Chairman Rawlinson called the meeting to order at 10:08 AM and Secretary Blackwood 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.

Adoption of the Agenda

On a motion by Commissioner Miller, seconded by Commissioner Malphrus and unanimously approved by the Commission members, the agenda was approved as presented. (Attachment A)

10% Federal Medical Assistance Percentages (FMAP) Funding Discussion

Mr. Maley prepared and discussed his three page memorandum and attachment outlining the strategies and proposed budget for utilizing the 10% FMAP funding. Commissioner Thomas noted that this plan was devised based on the consensus from the seven (7) Listening Session held throughout the state over a period of two

weeks. Mr. Maley recommends that the commission approve the \$42.5 million proposed 10% FMAP budget contained on Attachment "A" of the memorandum provided. He also recommends the appointment/establishment of a 10% FMAP Steering Committee.

Commissioner Blackwood made a motion to have Chairman Rawlinson appoint individuals to the 10% FMAP Steering Committee at the full commission meeting in July to include two commission members, one stakeholder, one family member, one DDSN staffer; and one private provider, (Chairman Rawlinson serves on any committee she appoints); the motion was seconded by Commissioner Kocher. Commissioner Blackwood amended her motion to include that the Steering Committee has the powers/functions to provide oversight; commission collection and any recommendation(s) that a changed budget has to go through the full commission for approval. The amended motion was seconded by Commissioner Miller. Mr. Maley was asked to discuss the flexibility the agency will have to move this money around if needed. Mr. Maley answered by explaining the process by which this proposed budget will be implemented. He stated that after the commission approves a budget for the 10% FMAP funding, it will go to the SC Department of Health and Human Services (SCDHHS) for their approval and then to the Centers for Medicare and Medicaid Services (CMS) for final approval. The budget presented today is an estimated budget. The goal of the Steering Committee will provide oversight and execution of the budget and give transparency over this three year period. The motion and its amendment to include the powers/functions of the Steering Committee were approved unanimously by the commission.

Mr. Maley went over all eleven (11) options in Attachment "A" of the memorandum presented. Commissioner Thomas is expecting the commission and the Steering Commission to fully explain how staff will lay out this funding and to put a system in place to check on the spending; there needs to be a lot of good oversight. Commissioner Thomas made a motion to accept the general proposal as presented by Mr. Maley concerning the expenditures; seconded by Commissioner Lemel. Commissioner Miller asked that the motion be amended to include a reporting system and utilize DDSN's auditors, and Commissioner Thomas agreed to the amended motion. The amended motion was seconded by Commissioner Lemel.

Commissioner Kocher felt that the \$1.0 million estimated "gap funding" grant is too low (option #1). Mr. Maley agreed but explained that the agency needed to be more specific in targeting specific areas to include such things like workforce retention. Mr. Maley also agreed to written procedures on how this money will be allocated, all the way down to even requesting receipts.

The motion on the floor was unanimously approved by the commission.

Commissioner Thomas requested that the term "Emergency" be replaced with maybe "Expedited" Commission Meeting as it does not sound as urgent. Chairman Rawlinson stated that the Policy Committee can take up the renaming of the meeting in the Bylaws.



Chairman Rawlinson noted that the next special-called commission meeting will take place on July 14, 2021 for the purpose of interviewing candidates for the state director position vacancy at the agency.

Commissioner Miller made a motion that no FMAP funds be approved until the full commission approves the financial reporting system that is in agreement with the DDSN internal auditors; seconded by Commissioner Thomas and unanimously approved by the commission.  
(Attachment B)

Adjournment

On a motion by Commissioner Blackwood seconded by Commissioner Malphrus and unanimously approved by the Commission, the meeting was adjourned at 11:09 a.m.

Submitted by:

Approved by:

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Christie D. Linguard  
Administrative Coordinator

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Commissioner Robin Blackwood  
Secretary

SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS

SPECIAL-CALLED MEETING MINUTES

July 14, 2021

The South Carolina Commission on Disabilities and Special Needs met on Thursday, July 14, 2021, 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

Stephanie Rawlinson – Chairman

Barry Malphrus – Vice Chairman

Robin Blackwood – Secretary

Gary Kocher, M.D.

Gary Lemel

Eddie Miller

David Thomas

DDSN Administrative Staff

Constance Holloway, Interim State Director and General Counsel; Michael Mickey, Director of Information Technology Division; and Christie Linguard, Administrative Coordinator.

Call to Order and Notice of Meeting Statement

Chairman Rawlinson called the meeting to order at 10:03 a.m. and Secretary Blackwood 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.

Adoption of the Agenda

Commissioner Thomas made a motion to amend the agenda in order to substitute the executive session discussion from interviewing candidates for the state director position to discussion of a legal matter. This motion was seconded by Commission Malphrus and unanimously approved by the commission members. (Attachment A)

Executive Session

At 10:06 a.m., Commissioner Lemel made a motion to go into executive session to discuss a legal matter. This motion was seconded by Commissioner Malphrus and unanimously approved by the commission.

Rise Out of Executive Session

At 11:02 a.m., the commission rose out of executive session and Chairman Rawlinson noted that there were no decisions or motions made and no action taken during executive session.

Adjournment

On a motion by Commissioner Blackwood seconded by Commissioner Lemel and unanimously approved by the commission, the meeting was adjourned at 11:04 p.m.

Submitted by:

Approved by:

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Christie D. Linguard  
Administrative Coordinator

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Commissioner Robin Blackwood  
Secretary

## Monthly DDSN Staff Report - Financial Approval & Threshold Reporting for July 2021

The purpose of this monthly report is to ensure staff comprehensively reports on all Executive Limitation Policy (800-CP-03) financial transactions for approval and financial threshold reporting requirements. The Finance and Audit Committee will decide which items require presentation to the Commission for a formal vote, as well as which items need only be reported via this monthly report to the Commission to ensure transparent reporting. After the Finance and Audit Committee's decisions, this report will highlight items in green to notify Commission this will not need a formal vote and highlight items in yellow indicating item will require a formal Commission vote to approve.

### I. New Non-Service Contracts \$200,000 or Greater:

a) **Solicitation# 5400019196:** A fixed priced bid contract was solicited on 1/15/2021 for Direct Support Professionals. It was a five year contract with a contract ceiling value of \$250,000. On 5/27/2021, five providers were qualified and awarded a contract. At the current time, one additional vendor, has applied to be qualified and awarded a fixed price bid contract. The contract essentially qualifies vendors to perform the service at a fixed price, and then DDSN purchases services at its discretion from any qualified vendor with a \$250,000 contract limit of aggregated purchases during a five year period. In short, despite the vendor being awarded a "\$250,000" fix bid contract, the vendor is only being qualified to be a service provider with no guarantees of purchases by DDSN.

b) **Solicitation# 5400019193:** A fixed priced bid contract was solicited on 2/12/2020 for Supplemental License Nursing Personnel. It was a five year contract with a contract ceiling value of \$ 291,616. On 07/13/2020, ten (10) providers were qualified and awarded a contract. At the current time, one additional vendor, has applied to be qualified and awarded a fixed price bid contract. The contract essentially qualifies vendors to perform the service at a fixed price, and then DDSN purchases services at its discretion from any qualified vendor with a \$291,616 contract limit of aggregated purchases during a five year period. In short, despite the vendor being awarded a "\$291,616" fix bid contract, the vendor is only being qualified to be a service provider with no guarantees of purchases by DDSN.

c) **Procurement of Electrical Engineering Services:** This is a two-year Indefinite Delivery Contract to procure electrical engineering services with a contract limit of \$200,000. It is replacing an expiring two year contract, which spent \$130,000. This competitive contract is procured by the State Engineering Office on behalf of DDSN due to their subject matter expertise. A single business will be awarded the contract. Despite the vendor being awarded a "\$200,000" contract, the vendor is only qualified to provide services with no guarantees of purchases by DDSN. Electrical Engineering Services will be needed to complete the electrical grid projects at Coastal and Midland Centers, with each project expected to cost approximately \$60,000 in professional electrical engineering fees.

### II. Existing Service Contracts Increasing \$200,000 or Greater (simple list if based on indiv. choice; detail summary if not):

None.

### III. \$200,000 or Greater Increase in Personnel Positions for a Program or Division:

None.

IV. **New CPIP, Re-Scoping of an Existing CPIP, or \$200,000 or Greater Contract within a CPIP:**

- a) This CPIP project was approved by the Commission on May 21<sup>th</sup>, 2020. The project's scope was to replace twenty-six (26) variable air volume (VAV) terminals with associated energy management controls at Whitten Center, Dorm 205. The project was advertised through South Carolina Business Opportunities (SCBO), and bids were received on June 8<sup>th</sup>, 2021. One bid was received by **Gregory Electric Company, Columbia, SC**, with a Base Bid of **\$224,460.00**. The Base Bid is within in the expected budget range based on construction estimates. It is recommend that a contract be awarded to Gregory Electric Company for the full amount of the Base Bid. This project was delayed in executing due to COVID-19.

V. **New Consulting Contract:**

None.

VI. **New Federal Grant:**

None.

(NOTE: In July of each year, a report of all prior FY non-service expenditures by vendor over \$200,000 will be presented as a "post-payment" review. This will add visibility for expenditures from contracts originated in prior FYs and vendors with separate purchases aggregating over \$200,000 in current FY.)

## **CONSIDERATION OF BID**

### **WHITTEN CENTER – DORM 205 HVAC - REPLACEMENT OF VAV TERMINALS AND EM CONTROLS**

The project scope includes the replacement of twenty-six (26) variable air volume (VAV) terminals with associated energy management controls at Whitten Center, Dorm 205. The existing VAV terminals have reached the end of their useful life and are scheduled for replacement. This project will provide reliable environmental controls for the residents in Dorm 205. The building will also be connected to Whitten Center's central energy management system. DDSN consulted with Swygert & Associates out of West Columbia, SC for design and construction services.

This project was approved by the Commission as part of the 5-Year Capital Permanent Improvement Plan (CPIP) on May 21<sup>th</sup>, 2020

The project was advertised through South Carolina Business Opportunities (SCBO), and bids were received on June 8<sup>th</sup>, 2021. One bid was received by **Gregory Electric Company out of Columbia, SC** with a Base Bid of **\$224,460.00**. The Base Bid is within in the expected budget range based on construction estimates. It is recommend that a contract be awarded to Gregory Electric Company for the full amount of the Base Bid.

**ATTACHMENT: Bid Tabulation**  
**FUNDS: J16-9928**  
**BID DATE: June 8, 2020**  
**BADE BID: \$224,460.00**

**ARCHITECT/ENGINEER:** Swygert & Associates  
**PROJECT NUMBER:** J16-9928  
**BID DATE:** Tuesday, June 8, 2020  
**TIME:** 3:00 PM  
**LOCATION:** SCDDSN Central Office, Suite 178

SCDDSN Engineering and Planning Division  
 3440 Harden St. Extension  
 Columbia, SC 29203  
 Phone: (803) 898-9796  
 Fax: (803) 832-8188



| BID TABULATION |  |              |          |              |
|----------------|--|--------------|----------|--------------|
|                | CONTRACTOR NAME  | BID SECURITY | ADDENDUM | BASE BID     |
| 1              | Gregory Electric Company<br>P.O. Drawer 1419, Columbia, SC | X            | X        | \$223,469.00 |

  
 Project Manager

  
 Witness

Reference Number: 368-01-DD

Title of Document: ~~Individual Service Delivery Records Management~~  
Records Retention of Individual Service Records

Date of Issue: February 1, 1995

Effective Date: February 1, 1995

Last Review Date: ~~April 16, 2014 XXXX, 2021~~

Date of Last Revision: ~~April 16, 2014 XXXX, 2021~~ (REVISED)

Applicability: ~~DDS Autism Division~~ DDS Operated Residential Programs, DDSN Regional Centers, -DSN Boards, ~~and~~ Contracted Service Providers, and DDSN Eligibility Division

## I. PURPOSE

This directive establishes the agency's policy regarding the management of records relating to ~~people~~ persons receiving services through the South Carolina Department of Disabilities and Special Needs (DDSN) and its network of service providers. This directive does not apply to any of DDSN's internal records to include operational or financial records, which are addressed in a separate DDSN Records Management Manual.

## II. POLICY

Individual service rRecords are maintained to provide complete and accurate information and ~~support~~ for continuity of care, treatment, and training. The record will contain sufficient information to clearly identify the person, justify the diagnosis, reflect assessment of needs/goals, and establish a plan for implementation of care, including training, treatment, and/or community services/supports, as well as and accurately document results of implementing ation ~~of~~ the plan of care. In addition to complete and accurate documentation, the record will be readily accessible and systematically organized to facilitate retrieving and compiling information. It will be properly secured to ensure confidentiality for the ~~consumer as well as~~ their family person.

**Commented [HC1]:** Ralph Courtney - Aiken DSN Board  
The attachment includes my comments on the draft of the records retention directive. Most of my comments pertain to Attachment B which I see as a helpful resource that can be used as a quick reference. I would like to point out the importance of using the word "minimum" prominently somewhere on the chart. We keep some records a bit longer than the minimum requirements so that our records retention policy will be more easily understood and successfully practiced. We have had a general ten year retention rule stemming from some specific requirements of other contracts that we have had over the years. I also feel strongly that it should be stated that that the originals of the personal documents (listed in Attachment B, Residential Habilitation Column, #3) should go with individuals who move to other providers' residential facilities', back in with their families, etc. I feel confident that that has always been DDSN's intention, but that is not what this chart conveys.

As always, thank you for the opportunity to provide comment on this important segment of what we do. I do hope you find my comments to be legible.



[Untitled].pdf

DDSN Response: All comments have been received, considered, and appropriate changes have been made.

**Commented [HC2]:** Elizabeth Harden - THRIVE Upstate  
It is a great idea to put the requirements for records retention in a chart rather than a narrative. Good job!

DDSN Response: Thank you



~~For DDSN's policy regarding confidentiality of records, please reference DDSN Directive 167-06 DD: Confidentiality of Personal Information.~~

### III. DEFINITIONS

#### A. Types of Records

i) 1.—Active records: Records of ~~consumers persons who are~~ actively receiving services through DDSN or a provider in ~~the agency's DDSN's~~ network.

ii) 2.—Inactive records: Records of ~~people/consumers persons who have been~~ deemed ~~to be~~ ineligible for DDSN services; or ~~are no longer were~~ receiving services ~~and have since been discharged out of from~~ DDSN or its ~~/or to another provider within~~ DDSN's provider network ~~for any reason (e.g., death, relocation, etc., or are deceased).~~

#### B. Types of Documents

i) Vital documents: ~~De~~documents required by DDSN standards, other regulatory standards, or by law to be kept in the record until the end of the designated retention period or until any legal action(s) ~~is are~~ completed, ~~(whichever is longer)~~. Vital documents may include, but ~~are~~ not limited to, the Service Agreement, DDSN eligibility determination, contact/service/progress notes, service/treatment/program/support plans, Medical Necessity Statements, documentation of service delivery, service authorizations, signed consent forms, Level of Care Determination ~~f~~Forms, and signed Freedom of Choice ~~f~~Forms.

Vital documents among DDSN service delivery records most often fall into the following three categories:-

- (a) Fiscal: These documents hold information supporting that supports the expenditure of funds. These funds may be public funds or private funds, including those belonging to the individual.
- (b) Legal: These documents provide give evidence addressing , which addresses the legal rights of the consumer person receiving services, obligations of DDSN to the consumer person, or compliance with relevant laws and regulations.
- (c) Health: These documents record the current health status of the consumer individual, care and treatment currently received or needed, and significant health history.

~~2-ii)~~ Non-vital documents: These are supporting information that can that should be destroyed when no longer needed for reference, ~~(Non-vital documents may include, but are not limited to, activity schedules, clothing inventories, computer system printouts, training programs, and copies of vital documents known as convenience copies made for short term use.)~~

#### C. Types of Record CategoriesRECORD CATEGORIES

i) Intermediate Care Facility for individuals with Intellectual Disabilities (ICF/IID).

~~(ICF/IID) Residential [includes short-term admissions.]~~

ii) Non-ICF/IID which include the following sub-categories:

~~NON-ICF/IID~~

~~1-(a) Non-ICF/IID Residential-Residential Habilitation Services provided in models such as [Residential examples are Community Training Homes (CTH), Supervised Living Programs (SLP), and Community Residential Care Facilities (CRCF)].~~

~~2-(b) Day Programs [Day Program examples are Supported Employment, Child Development, Adult Activity Centers, and Sheltered Workshop.]Employment/Day Services include Day Activity, Career Preparation, Community Services, Support Center, Employment Services - Group, and Employment Services - Individual.~~

~~3-(c) Family Support Services include Case Management, [Family support/case management examples are Service Coordination, Respite, State Funded Family Support, and Early Intervention.]~~

**IV. RECORDS MANAGEMENT AND ACCOUNTABILITY**

A. ~~Agency-wide r~~Responsibility for establishing management ~~of~~ and accountability requirements for the records of DDSN and its provider network is assigned to the DDSN Records Officer, which will be the DDSN's Director of Information Technology.

B. Each service provider will assign/designate a Records Officer for its/their respective agency/company and assign this person them/ ~~them/~~the responsibility for management ~~of~~ and accountability for both paper and electronic records ~~to one person~~. This Records Officer/manager will be held accountable for maintaining the records according to DDSN policy, as well as, and according to the requirements of regulatory agencies and must be given the authority to manage the records and their use.

C. Original records for anyone evaluated ~~for services or for consumers~~ receiving services will be maintained by the service provider and must be available during normal business hours for review by all authorized persons. If electronic documents are required for review/audit, access to the information must be provided. Copies of records, not original records or sole copy records, should be used when those records are required in places other than the service provider's locations ~~or service provider's authorized locations so as~~ to reduce the possibility of loss.

D. Service Providers must have a policy to ensure that records are available as required and ~~to ensure that~~ adequate security safeguards are in place for all work settings to prevent loss or unintended destruction of the contents of records. ~~The policy must require a periodic accounting no less than bi-annually, of active consumer records not each individual document); stipulate the manner and frequency with which this accounting~~

~~will occur; require documentation of the results of the accounting; and indicate circumstances in which an unscheduled partial or total accounting of records will be conducted, such as upon termination of a caseworker.~~

E. Because records include confidential protected health information and/or confidential educational documents, any active or inactive record that cannot be made available in its entirety as stated above, will be considered a lost record and therefore represents an unauthorized disclosure of information. Should this happen, the provider must:

- i) Report the loss of the record or document immediately to the service provider's HIPAA Privacy Officer and the designated Records Officer. This person will then immediately telephone or email a brief report of the loss to DDSN's Privacy Officer. This brief report will then be followed by a detailed written report of the loss to the DDSN Privacy Officer. This written report should use ~~the attached form identified as~~ Attachment A to this directive titled, "Record/Document Loss Report" or the report should provide the same content. Together, these Privacy Officers are responsible for communication about and coordination of an appropriate response to the loss of the record. If the lost record is a Medicaid recipient's active record or inactive record for which the required record retention for Medicaid records has not been exceeded, DDSN will report the loss to South Carolina Department of Health and Human Services (DHHS).
- ii) Notify the ~~service recipient~~individual/legal guardian upon direction of DDSN. Documentation of this notification must be retained and be available in the ~~service recipient's~~individual's remaining or reconstructed case record.

F. Records should only be removed or destroyed in accordance with this ~~policy~~directive. Failure to fully comply with this ~~policy~~directive could result in disciplinary and/or legal action.

## V. RECORD STORAGE, FILING AND RETRIEVAL

All records will be ~~kept in a secure manner and securely stored so to ensure that~~ information contained in the records is kept confidential and safe from damage or destruction. Electronic data must be protected by encryption, specifically including "data at rest" encryption, to meet Health Insurance Portability and Accountability Act (HIPAA) requirements. Active records should be kept at a location which allows ready access by agency staff, DDSN, ~~staff~~ and other entities with a legal right to access. Inactive records should be stored in a central location by the service provider until the end of the retention period. Inactive records may be stored using ~~be recorded using some~~ suitable electronic media approved by DDSN to facilitate their security and/or to reduce required storage space. To seek approval on electronic media, please contact the DDSN Records Officer by emailing records@ddsn.sc.gov.

## VI. ANNUAL REVIEW AND PURGING

Active records should be reviewed annually as a quality control to ensure all inactive files have been moved to a central inactive file location ~~and all superseded documents and/or those no~~

~~longer needed for reference should be moved from the working files to the holding files at the central storage site referenced above.~~

Inactive records will be reviewed annually and destroyed according to the current retention and disposition schedules. Any non-vital documents not previously destroyed should be destroyed as well. Any records destroyed should be reported to the service provider's Records Officer.

## **VII. RECORDS RETENTION AND DISPOSITION**

All individual service records, to include ICF/IID and all Non-ICF/IID services (i.e., CRCF, Residential Habilitation, Employment, Day Services, and State Funded Family Support Services) record retention, review period, disposition, and transfer information are contained in Attachment B.

The retention and disposition schedules of service delivery records are established in conjunction with the SC Department of Archives and History through the DDSN Information Technology Department ~~Office of Information Technology at the Central Office of DDSN~~. The retention and disposition schedules for electronic service records and paper records are the same ~~as those for paper records~~. As part of this process of establishing retention and disposition schedules, a records inventory determines which service delivery records are considered to be vital documents. Retention periods are based on ~~DDSN standards as well as the~~ requirements of regulatory and relevant state and federal law. The goal of the retention and disposition schedules is to ~~insure ensure~~ that records are retained long enough to meet all the requirements for audit and reference, yet be disposed of in a timely manner to reduce document handling and storage. Strict adherence to retention and disposition schedules is necessary for appropriate records management ~~and will be monitored by DDSN's Internal Audit Department.~~

## **VIII. TEFRA MEDICAID RECORDS**

DDSN routinely receives requests from the South Carolina Department of Health and Human Services (SCDHHS) to make an ICF/IID Level of Care (LOC) determination on behalf of persons applying for Medicaid eligibility under the category known as TEFRA (Tax Equity and Fiscal Responsibility Act of 1982). These persons may or may not have applied or -be eligible for DDSN services. These records are to be managed in accordance with this directive with one exception.

The one exception pertains to if an individual does not meet the required criteria for ICF/IID LOC and is not DDSN eligible and is not applying for DDSN eligibility. For these circumstances, then copies of all records, documents, or other information obtained to make the LOC determination must be retained for one year after the LOC decision by the DDSN Eligibility Division or until any appeal of a Medicaid- eligibility denial has ended, whichever is later. When this retention period has ended, these records must be destroyed in a manner such that the personal health information is unreadable.

~~DDSN is from time to time requested by DHHS to make an ICF/IID Level of Care (LOC) determination on behalf of persons applying for Medicaid eligibility under the category known as TEFRA (a reference to the Tax Equity and Fiscal Responsibility Act of 1982. These persons may or may not be eligible for DDSN services.~~

~~For persons who are not DDSN eligible and are not applying for DDSN eligibility, copies of records gathered to make their Level of Care determination must be retained for 90 days after the Level of Care decision by the Consumer Assessment Team or until any appeal of a Medicaid eligibility denial has ended whichever is later. When this retention period has ended, these records should be destroyed in a manner such that the personal health information is unreadable.~~

~~For persons who are DDSN eligible or are seeking DDSN eligibility, records that are gathered for the Level of Care determination should be managed in accordance with this directive. Any reports and documents gathered for the Level of Care determination and that were not previously a part of the primary case record should be retained.~~

### **RECORDS MANAGEMENT AT TRANSFER AND DISCHARGE OF CONSUMERS**

- A. ~~For the purposes of this document, "Transfer" involves the relocation of a consumer:~~
- ~~• from an ICF/IID residence to another ICF/IID residence within the same license and certified area; or~~
  - ~~• from any program or service unit to any other program or service unit within the provider's territorial/program/contractual limits; and~~
  - ~~• ICF/IID and Non ICF/IID transfers require all records to be relocated with the consumer being served to the receiving residence, program, or service.~~
- B. ~~For the purposes of this document, "Discharge" occurs when a consumer is relocated under any of the following situations:~~
- ~~• from one ICF/IID license to another ICF/IID outside of a licensed or certified area;~~
  - ~~• from an ICF/IID to a non ICF/IID program or service;~~
  - ~~• from any program or service where the need for intervention with the consumer and/or their family is no longer required because:~~
    - ~~➤ The consumer moves out of the provider's program;~~
    - ~~➤ The consumer no longer requires services;~~
    - ~~➤ The consumer dies.~~

### **ICF/IID and CRCF Records:**

~~When a consumer moves one licensed (by DHEC) facility within the DDSN/Provider network to another facility, the original residential record shall follow the consumer. In addition to a copy of the original record, the sending provider is required to maintain documentation of where the consumer was moved and date of the move; last known home address, birth date, place of birth and social security number. If the receiving provider notes that documents are missing from the record, it will notify the sending provider in writing, request that the missing documents be forwarded and document this action in the consumer's record. If the sending provider has those documents, they will be forwarded immediately. If the sending provider is unable to locate those~~

~~documents, they will be considered lost and actions required under **RECORDS MANAGEMENT AND ACCOUNTABILITY** will be initiated.~~

~~When the consumer leaves or relocates from a DDSN/Provider network facility to a location outside of the DDSN/Provider network, the last DDSN/Provider facility shall retain the consumer's original records and forward copies to the receiving facility.~~

**~~All Other Records:~~**

~~When a consumer moves within the DDSN/Provider network, the original record shall follow the consumer; in addition to a copy of the original record, the sending facility is required to maintain documentation of where the consumer was moved and date; last known home address, birth date, place of birth and social security number. If the receiving provider notes that documents are missing from the record, it will notify the sending provider in writing, request that the missing documents be forwarded and document this action in the consumer's record. If the sending provider has those documents, they will be forwarded immediately. If the sending provider is missing from the record, it will notify the sending provider in writing, request that the missing documents be forward and document this action in the consumer's record. If the sending provider has those documents, they will be considered lost and actions required under **RECORDS MANAGEMENT AND ACCOUNTABILITY** will be initiated.~~

~~When the consumer leaves or relocates outside of the DDSN/Provider network, the DDSN/Provider facility shall retain the consumer's original records and forward copies to the receiving facility. The confidentiality of, access to, release of, and retention of education records (as defined by the most current regulations of the Individuals with Disabilities Act (IDEA), including those created by DDSN or a qualified DDSN provider, are governed by the Family Education Rights and Privacy Act (FERPA), 34 CFR Part 99.~~

|  |  |
|--|--|
| <del>_____<br/>Susan Kreh Beck, Ed.S., NCSP<br/>Associate State Director Policy<br/>(Originator)</del> | <del>_____<br/>Beverly A. H. Busecemi, Ph.D.<br/>State Director<br/>(Approved)</del> |
| <u>Barry D. Malphrus</u><br>Vice Chairman  | <u>Gary C. Lemel</u><br>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>**

Attachment A: Record/Document Loss Report

Attachment B: Records Retention, Review Period, Disposition, and Transfer Requirements

**Constance Holloway**  
*Interim State Director*  
**Patrick Maley**  
*Chief Financial Officer*  
**Rufus Britt**  
*Associate State Director*  
*Operations*  
**Susan Kreh Beck**  
*Associate State Director*  
*Policy*



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**COMMISSION**  
**Gary C. Lemel**  
*Chairman*  
**Barry D. Malphrus**  
*Vice Chairman*  
**Robin B. Blackwood**  
*Secretary*  
**Gary Kocher, M.D.**  
**Eddie L. Miller**  
**Stephanie M. Rawlinson**  
**David L. Thomas**

Reference Number: 368-01-DD

Title of Document: Records Retention of Individual Service Records

Date of Issue: February 1, 1995

Date of Last Revision: July 15, 2021 (REVISED)

Effective Date: July 15, 2021

Applicability: DDSN Operated Residential Programs, DDSN Regional Centers, DSN Boards, Contracted Service Providers, and DDSN Eligibility Division

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## **I. PURPOSE**

This directive establishes the agency's policy regarding the management of records relating to persons receiving services through the South Carolina Department of Disabilities and Special Needs (DDSN) and its network of service providers. This directive does not apply to any of DDSN's internal records to include operational or financial records, which are addressed in a separate DDSN Records Management Manual.

## **II. POLICY**

Individual service records are maintained to provide complete and accurate information and support continuity of care, treatment, and training. The record will contain sufficient information to clearly identify the person, justify the diagnosis, reflect assessment of needs/goals, and establish a plan for implementation of care, including training, treatment, and/or community services/supports, as well as accurately document results of implementing the plan of care. In addition to complete and accurate documentation, the record will be readily accessible and

systematically organized to facilitate retrieving and compiling information. It will be properly secured to ensure confidentiality for the person.

### III. DEFINITIONS

#### A. Types of Records

- i) **Active records:** Records of persons actively receiving services through DDSN or a provider in DDSN's network.
- ii) **Inactive records:** Records of persons deemed ineligible for DDSN services or are no longer receiving services from DDSN or its provider network for any reason (e.g., death, relocation, etc.).

#### B. Types of Documents

- i) **Vital documents:** Documents required by DDSN standards, other regulatory standards, or by law to be kept in the record until the end of the designated retention period or until any legal action(s) is completed, whichever is longer. Vital documents may include, but not limited to, the Service Agreement, DDSN eligibility determination, contact/service/progress notes, service/treatment/program/support plans, Medical Necessity Statements, documentation of service delivery, service authorizations, signed consent forms, Level of Care Determination forms, and signed Freedom of Choice forms.

Vital documents among DDSN service delivery records most often fall into the following three categories:

- (a) **Fiscal:** These documents hold information supporting the expenditure of funds. These funds may be public funds or private funds, including those belonging to the individual.
  - (b) **Legal:** These documents provide evidence addressing the legal rights of the person receiving services, obligations of DDSN to the person, or compliance with relevant laws and regulations.
  - (c) **Health:** These documents record the current health status of the individual, care and treatment currently received or needed, and significant health history.
- ii) **Non-vital documents:** These are supporting information that can be destroyed when no longer needed. Non-vital documents may include, but are not limited to, activity schedules, clothing inventories, training programs, and copies of vital documents known as convenience copies made for short term use.

#### C. Types of Record Categories

- i) **Intermediate Care Facility for individuals with Intellectual Disabilities (ICF/IID).**



- ii) Non-ICF/IID which include the following sub-categories:
  - (a) Residential Habilitation Services provided in models such as Community Training Homes (CTH), Supervised Living Programs (SLP), and Community Residential Care Facilities (CRCF).
  - (b) Employment/Day Services include Day Activity, Career Preparation, Community Services, Support Center, Employment Services - Group, and Employment Services - Individual.
  - (c) Family Support Services include Case Management, Respite, State Funded Family Support, and Early Intervention.

#### **IV. RECORDS MANAGEMENT AND ACCOUNTABILITY**

- A. Responsibility for establishing management and accountability requirements for the records of DDSN and its provider network is assigned to the DDSN Records Officer, which will be the DDSN's Director of Information Technology.
- B. Each service provider will designate a Records Officer for its respective agency/company and assign this person the responsibility for management and accountability for both paper and electronic records. This Records Officer will be held accountable for maintaining the records according to DDSN policy, as well as be given the authority to manage the records and their use.
- C. Original records for anyone evaluated or receiving services will be maintained by the service provider and must be available during normal business hours for review by all authorized persons. If electronic documents are required for review/audit, access to the information must be provided. Copies of records, not original records or sole copy records, should be used when those records are required in places other than the service provider's locations to reduce the possibility of loss.
- D. Service Providers must ensure adequate security safeguards are in place for all work settings to prevent loss or unintended destruction of the contents of records.
- E. Because records include confidential protected health information and/or confidential educational documents, any active or inactive record that cannot be made available in its entirety as stated above, will be considered a lost record and therefore represents an unauthorized disclosure of information. Should this happen, the provider must:
  - i) Report the loss of the record or document immediately to the service provider's HIPAA Privacy Officer and the designated Records Officer. This person will then immediately telephone or email a brief report of the loss to DDSN's Privacy Officer. This brief report will then be followed by a detailed written report of the loss to the DDSN Privacy Officer. This written report should use Attachment A to this directive titled, "Record/Document Loss Report" or the report should

provide the same content. Together, these Privacy Officers are responsible for communication about and coordination of an appropriate response to the loss of the record. If the lost record is a Medicaid recipient's active record or inactive record for which the required record retention for Medicaid records has not been exceeded, DDSN will report the loss to South Carolina Department of Health and Human Services (DHHS).

- ii) Notify the individual/legal guardian upon direction of DDSN. Documentation of this notification must be retained and be available in the individual's remaining or reconstructed case record.

F. Records should only be removed or destroyed in accordance with this directive. Failure to fully comply with this directive could result in disciplinary and/or legal action.

## **V. RECORD STORAGE**

All records will be securely stored to ensure information contained in the records is kept confidential and safe from damage or destruction. Electronic data must be protected by encryption, specifically including "data at rest" encryption, to meet Health Insurance Portability and Accountability Act (HIPAA) requirements. Active records should be kept at a location which allows ready access by agency staff, DDSN, and other entities with a legal right to access. Inactive records should be stored in a central location by the service provider until the end of the retention period. Inactive records may be stored using suitable electronic media approved by DDSN to facilitate their security and/or to reduce required storage space. To seek approval on electronic media, please contact the DDSN Records Officer by emailing [records@ddsn.sc.gov](mailto:records@ddsn.sc.gov).

## **VI. ANNUAL REVIEW AND PURGING**

Active records should be reviewed annually as a quality control to ensure all inactive files have been moved to a central inactive file location. Inactive records will be reviewed annually and destroyed according to the current retention and disposition schedules. Any non-vital documents not previously destroyed should be destroyed as well. Any records destroyed should be reported to the service provider's Records Officer.

## **VII. RECORDS RETENTION AND DISPOSITION**

All individual service records, to include ICF/IID and all Non-ICF/IID services (i.e., CRCF, Residential Habilitation, Employment, Day Services, and State Funded Family Support Services) record retention, review period, disposition, and transfer information are contained in Attachment B.

The retention and disposition schedules of service delivery records are established in conjunction with the SC Department of Archives and History through the DDSN Information Technology Department. The retention and disposition schedules for electronic service records and paper records are the same. As part of this process of establishing retention and disposition schedules, a records inventory determines which service delivery records are considered to be vital

documents. Retention periods are based on the requirements of regulatory and relevant state and federal law. The goal of the retention and disposition schedules is to ensure that records are retained long enough to meet all the requirements for audit and reference, yet be disposed of in a timely manner to reduce document handling and storage. Strict adherence to retention and disposition schedules is necessary for appropriate records management.

### **VIII. TEFRA MEDICAID RECORDS**

DDSN routinely receives requests from the South Carolina Department of Health and Human Services (SCDHHS) to make an ICF/IID Level of Care (LOC) determination on behalf of persons applying for Medicaid eligibility under the category known as TEFRA (Tax Equity and Fiscal Responsibility Act of 1982). These persons may or may not have applied or be eligible for DDSN services. These records are to be managed in accordance with this directive with one exception.

The one exception pertains to if an individual does not meet the required criteria for ICF/IID LOC and is not DDSN eligible and is not applying for DDSN eligibility. For these circumstances, then copies of all records, documents, or other information obtained to make the LOC determination must be retained for one year after the LOC decision by the DDSN Eligibility Division or until any appeal of a Medicaid eligibility denial has ended, whichever is later. When this retention period has ended, these records must be destroyed in a manner such that the personal health information is unreadable.

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Barry D. Malphrus  
Vice Chairman

---

Gary C. Lemel  
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>***

Attachment A: Record/Document Loss Report

Attachment B: Records Retention, Review Period, Disposition, and Transfer Requirements

# RECORD/DOCUMENT LOSS REPORT

## Consumer Demographics

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Residential Setting (At Home, CTH-I, etc.): \_\_\_\_\_

Telephone (include area code): \_\_\_\_\_

Medicaid Recipient:  YES  NO                      Minor:  YES  NO

Adjudicated Incompetent:  YES  NO  N/A

Legal Guardian: \_\_\_\_\_

Address (include zip code): \_\_\_\_\_

Telephone (include area code): \_\_\_\_\_

Relationship: \_\_\_\_\_

### **Report of Circumstances \*\*\*Has DDSN Privacy Officer been notified?\*\*\***

Below, identify the document(s) that was lost. If you do not have enough room, please add another page. If an entire case record was lost, describe in detail the contents (do not itemize documents) of the record(s) that was lost and the circumstances during which it was lost. In the report, please address the following and any other information you feel to be important.

Date of record loss or an estimate if unknown: \_\_\_\_\_

Date the loss was discovered: \_\_\_\_\_

Name and position title of person responsible for the record at the time of loss:

\_\_\_\_\_

Has the Board/Provider assigned responsibility for management and accounting of all service recipient records to a Board/Provider staff member? If so, who?

\_\_\_\_\_

Were Board/Provider and DDSN policies being followed at the time of loss?

---

Is the consumer and/or legal guardian aware of the record loss?  Yes  No

What has been done to minimize the potential harm to the consumer as a result of the record loss? (HIPAA refers to this as mitigation.)

---

If records are believed stolen, has a report been made to the police?  Yes  No  
Please include a copy of the police report with the Record Loss Report.

What could have been done to prevent the loss?

---

Will there be revisions to your Board/Provider policies as a result of the loss?  Yes  No  
If so, what will they be?

---

Do you have suggestions for changes to DDSN policies regarding record maintenance and security?  Yes  No  
If so, what are they?

---

Person Completing the Report: \_\_\_\_\_

Position Title: \_\_\_\_\_ Telephone (include area code): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**REPORT OF CIRCUMSTANCES**

**ATTACHMENT B - Records Retention, Review Period, Disposition, and Transfer Requirements**

| Service                                      | ICF/IID   | CRCF  | Residential Habilitation   | Employment and Day Services  | Family Support Services   |
|--|---|---|--|--|---|
| Records Retention - General                  | Six (6) years after <b>Death or Discharge</b> ; or six years after the end of the provider's contract period.   | Six (6) years after <b>Death or Discharge</b> ; or six years after the end of the provider's contract period.   | Six (6) years after Death or Discharge; or six years after the end of the provider's contract period.  | Six (6) years after <b>Death or Discharge</b> ; or six years after the end of the provider's contract period.  | Six (6) years after <b>Death or Discharge</b> ; or six years after the end of the provider's contract period.   |
| Records Retention – If Litigation            | If any <b>litigation, claim</b> , or other action involving the records has been initiated prior to the expiration of the six (6) year period the provider will retain the records until the completion of the action and resolution of all issues which arise from it, or until the end of the six (6) year period (whichever is later). | If any <b>litigation, claim</b> , or other action involving the records has been initiated prior to the expiration of the six (6) year period the provider will retain the records until the completion of the action and resolution of all issues which arise from it, or until the end of the six (6) year period (whichever is later). | If any <b>litigation, claim</b> , or other action involving the records has been initiated prior to the expiration of the six (6) year period the provider will retain the records until the completion of the action and resolution of all issues which arise from it, or until the end of the six (6) year period (whichever is later).  | If any <b>litigation, claim</b> , or other action involving the records has been initiated prior to the expiration of the six (6) year period the provider will retain the records until the completion of the action and resolution of all issues which arise from it, or until the end of the six (6) year period (whichever is later).          | If any <b>litigation, claim</b> , or other action involving the records has been initiated prior to the expiration of the six (6) year period the provider will retain the records until the completion of the action and resolution of all issues which arise from it, or until the end of the six (6) year period (whichever is later).   |
| Review Period                                | Active and Inactive Records Annually  | Active and Inactive Records Annually  | Active and Inactive Records Annually   | Active and Inactive Records Annually   | Active and Inactive Records Annually  |
| Records Management at Transfer and Discharge | The SC Department of Health and Environmental Control (DHEC) Licensing Regulations R61-13 and R61-84 regarding retention and transfer of records must be followed for ICF/IID and CRCF settings.  | The SC Department of Health and Environmental Control (DHEC) Licensing Regulations R61-13 and R61-84 regarding retention and transfer of records must be followed for ICF/IID and CRCF settings.  | <p>When an individual moves from one DDSN/Provider network residential habilitation setting to another DDSN/Provider Network Setting - The original file shall be maintained by the original (Sending) - Residential Habilitation Provider. The sending Residential Habilitation provider should send with the individual copies of the following records and documents:</p> <p>The residential assessment (s) and service plan, most recent social history/family information including contacts, most recent medical records, and current personal property inventory.</p> <p>Personal documents maintained on behalf of the individual including, but not limited to, life/burial insurance policy and premium information, personal identification cards, health insurance cards</p> | When an individual moves from one DDSN/Provider network Employment/Day setting to another DDSN/Provider network setting, the original file shall be maintained by the original (sending) Employment/Day provider. The sending Employment/Day provider should send with the individual copies of the Employment/Day assessment(s) and service plan. | <p>For Case Management Services, the process outlined in the DDSN <a href="#">Case Management Standards</a> and/or DDSN <a href="#">Waiver Case Management Standards</a> must be followed.</p> <p>For Early Intervention Services, the process outlined in the DDSN <a href="#">Early Intervention Manual</a> must be followed.</p> <p>For State Funded Family Support and Respite, the original records must be maintained by the provider who administered the service and are not transferred to the receiving provider.</p> |

Updated 7/14/21 @ 4:28pm

**2021-2022 DDSN Officers**

Stephanie Rawlinson: Chair

Barry Malphrus: Vice Chair

Robin Blackwood: Secretary

**2021-2022 Committees**

**Legislative Committee**

Chair: Eddie Miller

David Thomas

Gary Kocher

**Finance and Audit Committee**

Chair: Robin Blackwood

Eddie Miller

Barry Malphrus

**Subcommittee for Wage Equity & Parity (system wide)-** Sub committee Chair- Commissioner David Thomas Additional Members:

CFO Pat Maley

Commissioner Robin Blackwood- Finance Committee Chair

Ryan Way, Clarendon County DDSN

Tyler Rex, Thrive Upstate

Evelyn Ash Turner, Charleston County DDSN Regional Centers

Rufus Britt

HR Director Liz Lemmond

Purpose:

- Review DDSN salaries, bonuses and pay structure
- Review state guidelines, market demands, job requirements & education/experience compared to salaries..
- Meet with stakeholders across the state to determine salary needs and receive input.
- Develop a salary structure without compression.
- Look at job descriptions, job performance, completion of training requirements.
- Develop a bonus structure to encourage longevity of employment.
- Research the cost of living and verify employees are earning a living wage based on communities.
- Possibly look into an adjusted rate for metropolitan areas.
- Report back to the commission any major discrepancies.
- Recommend adjustments to the commission based on this review.

**Sub Committee for FMAP Over-site**

CFO Pat Maley  
Commissioner Robin Blackwood  
Commissioner Eddie Miller  
Family Member Michelle Woodhead, Rock Hill, SC  
DDSN Provider- Dawn Johnson, FCDDSN Executive Director  
DDSN Private Provider- Craig Byrd, Regional Director - CHS Group South Carolina

Internal Audit Director-

Meetings: Should meet monthly via teams after receiving a report from finance.

Purpose:

- To review monthly disbursements of the \$42.5 million dollar FMAP funds
- Verify money is being spent as directed by the commission and within federal guidelines.
- Committee should report back to the DDSN commission chairman immediately any findings or discrepancies identified so issue can be addressed and remedied quickly.

### **Policy Committee**

Chair: Barry Malphrus

David Thomas

Gary Lemel

### **Communications Sub Committee**

Members:

Barry Malphrus- Policy Chair  
Robb McBurney- Interim Legislative Liaison  
Michael Mickey- IT staff  
Colleen Honey - Administrative Coordinator II  
Kenny Sumner, Systems Programmer/Developer III  
Commissioner Robin Blackwood (PR)  
Commissioner Eddie Miller (Listening Sessions)

Purpose:

- Manage & set up news conferences for the commission.
- Review & advise on website design and management.
- Develop a strategy to direct potential consumers to DDSN services.
- Setup regular listening sessions in various counties around the state for the commission.
  - Congressional District commissioner & one additional commissioner should attend.
  - Purpose of sessions are for DDSN commissioners & staff to listen to concerns and ideas.
  - Elected officials, local DDSN board members, Executive Directors, DDSN local employees, families & consumers from each community should be invited and encouraged to attend.

### **Training Taskforce-**

Chair Commissioner Gary Lemel

Members:

Commissioner Gary Kocher  
Anne Dalton, Quality Management  
Kyla Shultz, Risk Management  
Hester Wannamaker, Technical Assistant & Training  
Michael Mickey, Information Technology  
Rufus Britt, Operations Associate State Director



Jake Holt- Certified Behavior Analyst and Support Specialist

- Human Resources

Purpose:

-Review standardized online training models to be used annually by DDSN employees.

-Establish training modules to address the following:

- safety
- hygiene
- behavioral management
- first aid
- DHEC guidelines
- FERPA
- Abuse & Neglect

-Recommend to The commission plans to incentivize DDSN DSP's to Complete Training.

-Recommend Scholarships, Grants, tuition reimbursement and/or bonus programs to incentivize DDSN direct service providers to pursue education and continue working for DDSN while and after obtaining said education.

### **Autism Taskforce**

Chair- Commissioner Robin Blackwood

(Committee chair will have the ability to add committee members as needed & submit those names to the commission for approval)

Members-

Angela M. Muirhead, Executive Director Beautiful Gate Center, Mt. Pleasant, SC

Rufus Britt

Daniel Davis

Community leaders in this field

Purpose:

-Review and discuss issues with regards to Autism in SC on behalf of the SCDDSN commission.

-Determine if DDSN is meeting the needs of those with Autism.

-Meet with stakeholders, consumers and obtain input.

-Meet with experts and professionals in the field of Autism to develop new concepts and better advocate at all levels.

-Early intervention.

-Address Innovation- find cutting edge developments in this field which can be used in SC.

-Make recommendations of ways to expand or improve services to these consumers.

### **Taskforce for ICF Reform & Improvement**

Chair- Stephanie Rawlinson- Commission Chairman

Constance Holloway - SCDDSN Interim Executive Director

Commissioner Robin Blackwood- Finance Committee Chair

Commissioner Barry Malphrus

Jacob Flowers- Legal

Rufus Britt- Associate State Director operations

Julie Cooke- Risk Management Coordinator

Ann Dalton- Director of Quality Management

Andrew Tharin- Engineering

Lori Cordell- Burton Center

Ralph Courtney- Aiken County DDSN

Shonteena Jett- Lee County DDSN

John Hitchman- Sumter County DDSN

Gene Baughman- Program Manager Regional Center Operations

Robb McBurney- Interim Legislative Liaison

Regional Center Facility Administrators

## Regional Center Parents & Family Council Chairs

Issues to address:

- Security
- Cameras
- Behavioral Intervention
- Management
- Staffing
- training
- abuse & neglect
- Rate Enhancement
- food services
- facility's management and upkeep
- transportation
- capitol improvements



## MEMO

Date: July 12, 2021

To: DSN Commissioners

From: CFO Pat Maley

Re: Band B & I Project: Band Increase & Outlier Requests

On 4/5/21, DDSN initiated the Band Increase & Outlier Request Program with funding from the B & I Transition “gap” funds available. To date, DDSN received **38** requests for Band increases and requests for outlier funding. Of these requests, 10 have been approved, 17 denied; 7 being submitted to the July Commission meeting; and **4** are still pending review. Every Friday, new requests are staffed by Operations and Finance Divisions and either approved, denied, or held in abeyance while additional data is collected to make a determination. For all new requests not approved due to lack of sufficient justification, providers are re-contacted and given ample opportunity to send in additional financial information to support the request prior to a final denial is recommended to the Commission.

Attachment A to this memo contains a schedule itemizing all staff recommendations for the **July 2021** Commission meeting, where staff will seek Commission final approval. Attachment B to this memo is a summary of all previously approved Commission funding decisions for this project.

### **Request of the Commission:**

Approve the **7** preliminary staff recommendations contained on Attachment A, which were not approving **7** outlier requests.

## Attachment A

### Staff Recommendation for Band Increases & Outliers for the June Commission Meeting

| Band Increase Request |              |                             |                              | Outlier Request |                  |                 | Staffing Decision |            |
|-----------------------|--------------|-----------------------------|------------------------------|-----------------|------------------|-----------------|-------------------|------------|
| Individual            | Band from/to | Annualized Increase Request | Annualized Increase Approved | Individual      | Amount Requested | Amount Approved | Approve           | Disapprove |
|                       |              |                             |                              | DL              | \$ 41,047        |                 |                   | X          |
|                       |              |                             |                              | KM              | \$ 66,163        |                 |                   | X          |
|                       |              |                             |                              | JP              | \$ 41,047        |                 |                   | X          |
|                       |              |                             |                              | DG              | \$ 37,987        |                 |                   | X          |
|                       |              |                             |                              | JE              | \$ 37,543        |                 |                   | X          |
|                       |              |                             |                              | GB              | \$ 19,384        |                 |                   | X          |
|                       |              |                             |                              | AE              | \$ 31,925        |                 |                   | X          |
|                       |              | \$ -                        | \$ -                         |                 | \$ 79,034        | \$ -            |                   |            |

## Attachment B

### Summary of All Band Increases & Outlier Decisions Pertaining to the B & I Transition Project

| Date Approved by Commission | Band Increase Request |              |                             |                              | Outlier Request |                  |                 | Staffing Decision |            |
|-----------------------------|-----------------------|--------------|-----------------------------|------------------------------|-----------------|------------------|-----------------|-------------------|------------|
|                             | Individual            | Band from/to | Annualized Increase Request | Annualized Increase Approved | Individual      | Amount Requested | Amount Approved | Approve           | Disapprove |
| 5/20/2021                   | GB                    | G to H       | \$18,561                    | \$ 18,561                    |                 |                  |                 | X                 |            |
| 5/20/2021                   | CH                    | Low to High  | \$18,561                    | \$ -                         |                 |                  |                 |                   | X          |
| 5/20/2021                   | DH                    | Low to High  | \$18,561                    | \$ -                         |                 |                  |                 |                   | X          |
| 5/20/2021                   | LH                    | Low to High  | \$18,561                    | \$ -                         |                 |                  |                 |                   | X          |
| 5/20/2021                   | RJ                    | Low to High  | \$18,561                    | \$ -                         |                 |                  |                 |                   | X          |
| 5/20/2021                   | BL                    | G to H       | \$18,561                    | \$ -                         |                 |                  |                 |                   | X          |
| 5/20/2021                   |                       |              |                             |                              | TH              | \$ 109,500       | \$ -            |                   | X          |
| 5/20/2021                   |                       |              |                             |                              | ML              | \$ 112,099       | \$ -            |                   | X          |
| 6/17/2021                   | LJ                    | G to H       | \$18,561                    |                              |                 |                  |                 |                   | X          |
| 6/17/2021                   | TH                    | G to H       | \$18,561                    | \$ 18,561                    |                 |                  |                 | X                 |            |
| 6/17/2021                   | JG                    | G to H       | \$18,561                    | \$ -                         |                 |                  |                 |                   | X          |
| 6/17/2021                   | DP                    | G to H       | \$18,561                    | \$ -                         |                 |                  |                 |                   | X          |
| 6/17/2021                   | BP                    | G to H       | \$18,561                    | \$ 18,561                    |                 |                  |                 | X                 |            |
| 6/17/2021                   | BB                    | G to H       | \$18,561                    | \$ 18,561                    |                 |                  |                 | X                 |            |
| 6/17/2021                   | WM                    | G to H       | \$18,561                    | \$ 18,561                    |                 |                  |                 | X                 |            |
| 6/17/2021                   | CW                    | G to H       | \$18,561                    | \$ 18,561                    |                 |                  |                 | X                 |            |
| 6/17/2021                   | AA                    | G to H       | \$18,561                    | \$ 18,561                    |                 |                  |                 | X                 |            |
| 6/17/2021                   | PK                    | G to H       | \$18,561                    | \$ -                         |                 |                  |                 |                   | X          |
| 6/17/2021                   | DK                    | G to H       | \$18,561                    | \$ -                         |                 |                  |                 |                   | X          |
| 6/17/2021                   | SH                    | G to H       | \$18,561                    | \$ -                         |                 |                  |                 |                   | X          |
| 6/17/2021                   | MB                    | G to H       | \$18,561                    | \$ -                         |                 |                  |                 |                   | X          |
| 6/17/2021                   | AS                    | G to H       | \$18,561                    | \$ 18,561                    |                 |                  |                 | X                 |            |
| 6/17/2021                   |                       |              |                             |                              | GB              | \$ 98,837        | \$ 41,046       | X                 |            |
| 6/17/2021                   |                       |              |                             |                              | JB              | \$ 134,783       | \$ 80,660       | X                 |            |
| 6/17/2021                   |                       |              |                             |                              | MD              | \$ 13,607        | \$ -            |                   | X          |
| 6/17/2021                   |                       |              |                             |                              | AJ              | \$ 13,607        | \$ -            |                   | X          |
| 6/17/2021                   |                       |              |                             |                              | MS              | \$ 73,362        | \$ -            |                   | X          |
|                             |                       |              | \$371,220                   | \$ 148,488                   |                 | \$ 555,795       | \$ 121,706      |                   |            |

**Memorandum of Understanding  
Between  
The S.C. Department on Aging  
And  
The S.C. Department of Disabilities and Special Needs  
For  
Workforce Development and Training**

This Memorandum of Understanding (“MOU”) entered into this [8<sup>th</sup>] day of July, 2021,

**BETWEEN**

The S.C. Department on Aging (“SCDOA”), of 1301 Gervais St., Ste. 350, Columbia, SC 29201

And

The S.C. Department of Disabilities and Special Needs (“DDSN”), of 3440 Harden St. Ext.,  
Columbia, SC 29203

(collectively, “the Parties”)

**I. Background**

WHEREAS, the SCDOA enhances the quality of life for seniors in South Carolina. They work with a network of regional and local organizations to develop and manage services that help seniors remain independent in their homes and communities; and

WHEREAS, the Long-Term Care Ombudsman program (“LTCOP”), housed within the SCDOA, has the responsibility to identify, investigate, and resolve complaints made by or on behalf of residents concerning actions or inactions relating to the health, safety, welfare, and rights of residents; and

WHEREAS, the LTCOP under federal law shall lead state-level coordination and support appropriate coordination between the program and other entities with responsibilities relevant to the health, safety, well-being, and/or rights of residents; and

WHEREAS, DDSN is the state agency that plans, develops, coordinates and funds services for South Carolinians with the severe, lifelong disabilities of: intellectual disability and related disabilities; autism spectrum disorder; traumatic brain injury; and spinal cord injury and similar disabilities; and

WHEREAS, workforce development and training for employees with responsibilities relevant to the health, safety, well-being, and rights of residents in facilities operated or contracted by DDSN is imperative to optimize quality of life for said residents.

NOW, THEREFORE, the Parties enter into this MOU to mutually promote the workforce development of those DDSN employees working in state-operated regional centers, administrative

reviewers, and any other staff that the Parties identify as gaining tangible benefit, through training across multiple modalities to support the work of the Parties. This MOU will establish the basic terms to be used between the Parties. The terms contained herein depict the roles and responsibilities between the Parties for workforce development and training, as well as the scope of work to be undertaken by the parties; it is expected that additional terms may be added, and existing terms may be changed or deleted as needed. The basic terms are as follows:

## **II. Scope of Work**

In partnership, the SCDOA will develop and provide training to those staff identified by DDSN in the following areas:

- Resident's Rights;
- Abuse, Neglect, and Exploitation under the Omnibus Adult Protection Act (S.C. Code § 43-35-10 et. seq.); and
- Responsibilities of the LTCOP under federal and state law (to include general information on how investigations carried out by LTCOP representatives proceed).

The trainings will not include topics such as de-escalation, or any other topic outside of the purview of the LTCOP/SCDOA under federal or state law. The trainings will be given in recorded format and provided to DDSN for storage such that DDSN may utilize the training on-demand when onboarding employees.

## **III. Roles and Responsibilities**

Each party will appoint a person to serve as the official contact and coordinate the activities of each organization in carrying out this MOU. The initial appointees of each organization are:

Sarah Dunning, (803) 734.9932, sdunning@aging.sc.gov, on behalf of SCDOA; and

Gene Baughman, (803) 240.2479, gene.baughman@ddsn.sc.gov, on behalf of DDSN.

### **DDSN's scope of work for the project includes the following:**

- Assess current staff to determine those employees in state-operated regional centers and administrative reviewers to receive the trainings;
- House trainings on DDSN website or other portal for access by future employees;
- Administer pre- and post-training evaluation tests to assess competencies gained as well as the efficacy of each training; and
- On a quarterly basis, share evaluations with the LTCOP to gauge the efficacy of the training.

### **SCDOA's scope of work for the project includes the following:**

- Develop comprehensive trainings on topics outlined above in Section II;
- Conduct and record trainings on Zoom platform; and
- Develop pre- and post-training evaluation tests to assess competencies gained as well as the efficacy of each training.

**IV. Closing Date**

The term of this MOU is for a period of one year, to close on June 30, 2022, and may be extended upon written mutual agreement. It shall be reviewed periodically to ensure that it is fulfilling its purpose and to make any necessary revisions. Either DDSN or SCDOA may terminate this MOU upon thirty (30) days written notice without penalties or liabilities.

**V. Representations**

This MOU does not involve the exchange of funds or other compensation. Any reimbursement, contribution of funds, or transfer of anything of value between the parties to this document will be handled in accordance with applicable laws, regulations, and procedures. Such endeavors will be outlined in separate agreements that shall be made in writing by representatives of the parties and shall be independently authorized by appropriate statutory authority. This document does not provide such authority.

The signing of this MOU is not a formal undertaking. It implies that the signatories on behalf of the Parties will strive to reach, to the best of their ability, the objectives stated in the MOU.

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

By: Constance Holloway  
Name: Constance Holloway  
Title: SCDDSN Interim State Director  
Date: July 8, 2021  
Address: 3440 Harden Street Extension  
Columbia, SC 29203

**South Carolina Department of Aging**

By: Connie D. Munn  
Name: Connie D. Munn  
Title: Agency Director, SCDOA  
Date: July 8, 2021  
Address: 1301 Gervais Street, Suite 350  
Columbia, SC 29201

**Constance Holloway**  
*Interim State Director*  
**Patrick Maley**  
*Chief Financial Officer*  
**Rufus Britt**  
*Associate State Director*  
*Operations*  
**Susan Kreh Beck**  
*Associate State Director*  
*Policy*




3440 Harden Street Extension  
Columbia, South Carolina 29203  
**803/898-9600**  
**Toll Free: 888/DSN-INFO**  
**Home Page: [www.ddsn.sc.gov](http://www.ddsn.sc.gov)**

**COMMISSION**  
**Gary C. Lemel**  
*Chairman*  
**Barry D. Malphrus**  
*Vice Chairman*  
**Robin B. Blackwood**  
*Secretary*  
**Gary Kocher, M.D.**  
**Eddie L. Miller**  
**Stephanie M. Rawlinson**  
**David L. Thomas**

## MEMORANDUM

**TO:** Facility Administrators  
Regional Center Frontline & Support Personnel

**FROM:** Constance Holloway, Esq.   
DDSN Interim State Director

**DATE:** June 10, 2021

**SUBJECT:** Zero Tolerance for Abuse, Mistreatment of Individuals in Our Care

Today, a former employee of our agency hired to provide care and supervision to those we serve was arrested and charged with assault and abuse of a vulnerable adult. While the individual accused is innocent until proven guilty, this correspondence serves as a formal reinforcement of our **ZERO TOLERANCE** for any mistreatment of individuals in our care. Our agency, unlike other states, is statutorily responsible for the care and supervision of individuals with intellectual disabilities, related disabilities, autism and autism spectrum disorders, traumatic brain and or spinal cord injury, and similar disabilities. This evidences our state's recognition of the unique and often complex needs of those we serve and their families. Our agency has and continues to execute our mission daily. An unfortunate and 100% avoidable event such as this one leading to the arrest of a former employee is an opportune time to reinforce efforts to affix accountability for us all in preventing adverse events for those we serve throughout our state operated Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs-IID) or Regional Centers.

Facility Administrators, Regional Center personnel, and our network own the agency's greatest responsibilities, caring for our state's most vulnerable. The COVID-19 Public Health Emergency (PHE) presents unprecedented challenges for our agency. These challenges, however, in no way excuse acts of mistreatment or harm to those we serve. In the coming days, weeks, and months, our agency will accelerate countermeasures intended to prevent abuse, neglect, exploitation, and or mistreatment of any individual in our care. Again, our agency has **ZERO TOLERANCE** for such acts. A thorough evaluation of our workforce is necessary, to include but not limited to employing pre-requisite certification or credentialing to better support individuals with complex healthcare needs, establish uniform orientation and on-boarding, enhancing supervision and training, increased communication with frontline personnel, realignment and or restructuring to enhance accountability.



On a daily basis, Regional Centers and our network contribute to improving the lives of those we serve. In no way does this memorandum discount all our good works and success stories. Today, however, affirms our duty to protect and serve. All of us are mandated by law to report abuse, neglect, and or exploitation of any individual in our care. There is ZERO TOLERANCE for any failure to comply with this legal and ethical mandate. If you are aware of any mistreatment of any individual in our care, you MUST report immediately directly to South Carolina's State Law Enforcement Division (SLED) by dialing 866-200-6066.

Thank you in advance for honoring your legal and ethical mandate to protect those in our care. A special THANK YOU to those who have remained mission focused throughout the COVID-19 Public Health Emergency. Stay safe and keep those in our care safe.



# Strategies to Mitigate Chronic Staffing Shortages

## DDSN Bonus, Incentive, and Reward Programs Summary

### COVID-19 State of Emergency Enhanced Pay

- **COVID-19 State of Emergency Enhanced Pay Amount:** \$500 per month, no more than \$3,000 per fiscal year.
- **COVID-19 State of Emergency Enhanced Pay Payout Timeframe:** Paid in the payroll period after the eligible month concludes; timeframe subject to some delay due to Facility Administrator or designee needing to provide the request to Central Office Human Resources.
- **Employees Eligible for Enhanced Pay:** DDSN Regional Center essential frontline personnel providing direct service to individuals in our care that are positive for COVID-19.
- **Jobs Eligible for Enhanced Pay:** DSP's, nursing staff, housekeepers assigned to the building and working directing in the building, QIDP and day support staff who work directly in the building.

### COVID-19 Vaccine Incentive Pay

- **COVID-19 Vaccine Incentive Amount:** \$100 maximum (\$50 for each dose completed or \$100 for single dose vaccine).
- **COVID-19 Vaccine Incentive Payout Timeframe:** Paid in the payroll period after the employee provides proof of vaccination.
- **Employees Eligible for Incentive:** DDSN employees, including Central Office, who receive the COVID-19 vaccine





### Job Referral Reward

- **Job Referral Reward Amount:** \$100 per qualified candidate referred.
- **Job Referral Reward Payout Timeframe:** Paid in the payroll period after the date the referred candidate completes 120 days of continuous FTE employment with DDSN.
- **Employees Eligible to Receive Referral Reward:** DDSN employees - except executive staff, HR staff, district directors, facility administrators, and managers with hiring authority over the job to which the candidates were referred.
- **Jobs Eligible for Referral Reward:** Jobs determined by regional DDSN management to be ‘hard to recruit’ and/or ‘high vacancy’ positions.

### Candidate Retention Bonus

- **Candidate Retention Bonus Amount:** \$400 maximum
- **Candidate Retention Bonus Payout Timeframe:**
  - 1<sup>st</sup> \$100: Paid in the payroll period after the date the candidate completes 1 month of continuous FTE employment with DDSN.
  - 2<sup>nd</sup> \$100: Paid in the payroll period after the date the candidate completes 3 months of continuous FTE employment with DDSN.
  - 3<sup>rd</sup> \$100: Paid in the payroll period after the date the candidate completes 6 months of continuous FTE employment with DDSN.
  - 4<sup>th</sup> \$100: Paid in the payroll period after the date the candidate completes 12 months of continuous FTE employment with DDSN.
- **Employees Eligible for Retention Bonus:** DDSN employees - except executive staff, HR staff, district directors, facility administrators, and managers.
- **Jobs Eligible for Retention Bonus:** Jobs determined by regional DDSN management to be ‘hard to recruit’ and/or ‘high vacancy’ positions.





### **Nursing Recruitment and Retention Bonus**

- **Nursing Bonus Amount:** \$3,000 maximum
  - o \$1,000 Recruitment/Sign-On Bonus, and \$2,000 Retention Bonus
- **Nursing Bonus Payout Timeframe:**
  - o \$1,000 Recruitment/Sign-On Bonus to be paid in the payroll period after the date the candidate completes 1 month of continuous FTE employment with DDSN.
  - o \$2,000 Retention Bonus:
    - First Half (\$1,000) of the Retention Bonus to be paid in the payroll period after the date the candidate completes 6 months of continuous FTE employment with DDSN.
    - Second Half (\$1,000) of the Retention Bonus to be paid in the payroll period after the date the candidate completes 12 months of continuous FTE employment with DDSN.
- **Employees Eligible for Nursing Bonus:** DDSN Employees who accept FTE Nursing positions.
- **Jobs Eligible for Nursing Bonus:** EA15 Licensed Practical Nurse II and EA30 Registered Nurse II. FTE Positions ONLY.

### **No-Call Out Bonus (Month of July 2021)**

- **No-Call Out Bonus Amount:** \$300 maximum
- **No-Call Out Bonus Payout Timeframe:** To be paid in the payroll period after the No-Call out period ends.
- **Employees Eligible for No-Call Out Bonus:** DDSN Whitten and Coastal Regional Center employees, in DSP positions, who report to work with no absences for actual work performed for two pay periods (160 hours) from 07/01/2021 – 07/31/2021.
- **Jobs Eligible for No-Call Out Bonus:** EC52 Direct Support Professional I, EC53 Direct Support Professional II, and EC54 Direct Support Professional III.





- Recruiting for temporary weekend nursing personnel (Licensed Practical Nurses or LPNs) with base hourly rate of pay of \$29.93 (equivalent to overtime pay of existing LPN workforce; HR should verify/confirm the hourly rate). Communication to existing workforce should emphasize this effort is to mitigate working on weekends (a chief complaint among nurses). Shift differentials will remain the same. This effort should include all Centers. Directors of Nursing & Facility Administrators own responsibility for ensuring these high costs positions work weekends as intended to avoid workforce abrasion/inequity.
- Recruiting direct support professionals (DSPs) for temporary weekend schedules with base hourly rate of pay of \$19.50 (equivalent to overtime pay of existing DSP workforce; HR should verify/confirm the hourly rate). Communication to existing workforce should emphasize this effort is to mitigate working on weekends (a chief complaint among DSPs). Shift differentials will remain the same. This effort should include all Centers. Directors of Residential Services & Facility Administrators own responsibility for ensuring these high costs positions work weekends as intended to avoid workforce abrasion/inequity.





# Additional Retention Initiatives

- Qualified Intellectual Disabilities Professional (QIDP) Bonuses
- Nursing Compensation Increases
- Unprecedented Outsourcing





# Future Workforce Initiatives

- ❖ Recruitment & Retention of Frontline Personnel
- ❖ Reconstituting Key-Value Added Positions
- ❖ Installing 24/7 Bona-fide Supervision
- ❖ Recruiting Licensed Professionals (i.e., Certified Behavior Analysts, Certified Nursing Assistants, etc.)
- ❖ Enhanced Data Collection
- ❖ Right Sizing
- ❖ Opportunities to Outsource Functions
- ❖ Rebranding & Reconstituting Our System's Safety Net



## All State Agencies are Operating Under a Continuing Resolution Appropriations FY 20/21 Legislative Authorized & Spending Plan Budget VS Actual Expenditures (as of 6/30/2021)

NOTE: Per Comptroller General policy, June 2021 expenses may be processed until 7/14/21. Final FY 2021 expenses will be presented at August meeting.

| Funded Program - Bud   | Continuing Resolution Appropriations | Adjustments         | Adjusted Budget        | YTD Actual Expense      | Remaining Budget       | Percent Expended - Target % |
|--|--------------------------------------|---------------------|------------------------|-------------------------|------------------------|-----------------------------|
|  |                                      |                     |                        |                         |                        | 100.00%                     |
| ADMINISTRATION   | \$ 8,386,999                         | \$ (87,904)         | \$ 8,299,095           | \$ 6,956,963            | \$ 1,342,132           | 83.83%                      |
| PREVENTION PROGRAM   | \$ 157,098                           | \$ -                | \$ 157,098             | \$ 12,500               | \$ 144,598             | 7.96%                       |
| GREENWOOD GENETIC CENTER   | \$ 15,185,571                        | \$ -                | \$ 15,185,571          | \$ 9,482,180            | \$ 5,703,391           | 62.44%                      |
| CHILDREN'S SERVICES  | \$ 12,291,594                        | \$ 355,276          | \$ 12,646,870          | \$ 11,708,558           | \$ 938,312             | 92.58%                      |
| IN-HOME FAMILY SUPP  | \$ 86,302,031                        | \$ (16,122,520)     | \$ 70,179,511          | \$ 51,292,060           | \$ 18,887,451          | 73.09%                      |
| ADULT DEV&SUPP EMPLO   | \$ 83,358,338                        | \$ 6,050,538        | \$ 89,408,876          | \$ 69,763,531           | \$ 19,645,345          | 78.03%                      |
| SERVICE COORDINATION   | \$ 15,166,140                        | \$ (1,590,427)      | \$ 13,575,713          | \$ 12,418,893           | \$ 1,156,820           | 91.48%                      |
| AUTISM SUPP PRG  | \$ 26,368,826                        | \$ (721,496)        | \$ 25,647,330          | \$ 14,699,882           | \$ 10,947,448          | 57.32%                      |
| HD&SPINL CRD INJ COM   | \$ 5,040,532                         | \$ 800,000          | \$ 5,840,532           | \$ 5,204,103            | \$ 636,429             | 89.10%                      |
| REG CTR RESIDENT PGM   | \$ 77,137,897                        | \$ 5,792,303        | \$ 82,930,200          | \$ 73,312,736           | \$ 9,617,464           | 88.40%                      |
| HD&SPIN CRD INJ FAM  | \$ 18,965,193                        | \$ 5,220,933        | \$ 24,186,126          | \$ 19,974,109           | \$ 4,212,017           | 82.58%                      |
| AUTISM COMM RES PRO  | \$ 29,749,084                        | \$ 6,044,263        | \$ 35,793,347          | \$ 34,803,585           | \$ 989,762             | 97.23%                      |
| INTELL DISA COMM RES   | \$ 340,593,466                       | \$ 1,529,602        | \$ 342,123,068         | \$ 330,392,567          | \$ 11,730,501          | 96.57%                      |
| STATEWIDE CF APPRO   | \$ -                                 | \$ -                | \$ -                   |                         | \$ -                   | 0.00%                       |
| STATE EMPLOYER CONTR   | \$ 29,862,643                        | \$ (249,115)        | \$ 29,613,528          | \$ 28,272,159           | \$ 1,341,369           | 95.47%                      |
| Earmarked Authorization over DDSN Spending Plan                        | \$ 56,235,857                        | \$ -                | \$ 56,235,857          |                         | \$ 56,235,857          |                             |
| <b>Legislative Authorized Total</b>                                    | <b>\$ 804,801,269</b>                | <b>\$ 7,021,453</b> | <b>\$ 811,822,722</b>  | <b>\$ 668,293,826</b>   | <b>\$ 143,528,896</b>  |                             |
| Legislative authorization capacity above actual spending plan budget   |                                      |                     | <b>\$ (62,372,707)</b> |                         | <b>\$ (62,372,707)</b> |                             |
| DDSN spending plan budget  |                                      |                     | <b>\$ 749,450,015</b>  | <b>\$ 668,293,826 *</b> | <b>\$ 81,156,189</b>   | <b>89.17%</b>               |
| Percent of total spending plan budget                                  |                                      |                     | 100.00%                | 89.17%                  | 10.83%                 | <b>REASONABLE</b>           |
| % of FY completed (expenditures) & % of FY remaining (available funds) |                                      |                     | 100.00%                | 100.00%                 | 0.00%                  |                             |
| Difference % - over (under) budgeted expenditures                      |                                      |                     | 0.00%                  | -10.83%                 | 10.83%                 |                             |
| Difference \$ - over (under) budgeted expenditures                     |                                      |                     |                        | \$ (81,156,189)         |                        |                             |

\* \$2,295,222 of expenditures have been reimbursed under the CARES Act

Carry Forward + Cash Flow Analysis Indicates Sufficient Cash to Meet FY 21 Estimated Expenditure Commitments: YES  ; At-Risk  ; NO

**Expenditures categorized to provide insight into direct service consumers costs vs. non-direct service costs:**

| Expenditure                    | FY 20 - % of total | FY 19 - % of total |
|--------------------------------|--------------------|--------------------|
| Central Office Admin & Program | 2.24%              | 2.35%              |
| Indirect Delivery System Costs | 1.03%              | 1.22%              |
| Board & QPL Capital            | 0.04%              | 0.07%              |
| Greenwood Autism Research      | 0.03%              | 0.03%              |
| Direct Service to Consumers    | 96.67%             | 96.33%             |
| <b>Total</b>                   | <b>100.00%</b>     | <b>100.00%</b>     |

NOTE: Prior FY data will be calculated and presented to provide assurance as to the consistent pattern of direct service & non-direct service expenditures and explanation for increases/decreases