

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

## **MINUTES**

May 17, 2018

The South Carolina Commission on Disabilities and Special Needs met on Thursday, May 17, 2018, 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:**

Eva Ravenel, Chairman

Gary Lemel – Vice Chairman

Mary Ellen Barnwell – Secretary

Chris Neeley

Vicki Thompson

Lorri Unumb

#### **Absent**

Sam Broughton, Ph.D.

### **DDSN Administrative Staff**

Mr. Pat Maley, Interim State Director; Mr. David Goodell, Associate State Director, Operations; Ms. Lisa Weeks, Interim Associate State Director, Administration; Mrs. Susan Beck, Associate State Director, Policy; Ms. Tana Vanderbilt, General Counsel (For other Administrative Staff see Attachment 1 – Sign In Sheet).

### **Guests**

(See Attachment 1 Sign-In Sheet)

### **Coastal Regional Center (via videoconference)**

(See Attachment 2 Sign-In Sheet)

### **Georgetown County DSN Board**

### **Pee Dee Regional Center (via videoconference)**

(See Attachment 4 Sign-In Sheet)

Pickens County DSN Board (via videoconference)  
(See Attachment 5 Sign-In Sheet)

Whitten Regional Center (via videoconference)  
(See Attachment 6 Sign-In Sheet)

MaxAbilities (via videoconference)  
(See Attachment 7 Sign-In Sheet)

### News Release of Meeting

Chairman Ravenel called the meeting to order and Commissioner Barnwell read a statement of announcement about the meeting that was mailed to the appropriate media, interested persons, and posted at the Central Office and on the website in accordance with the Freedom of Information Act.

### Invocation

Commissioner Barnwell gave the invocation.

### Adoption of the Agenda

The Commission adopted the May 17, 2018 Meeting Agenda by unanimous consent. Chairman Ravenel stated an Executive Session would not be held. (Attachment A)

### Approval of the Minutes of the April 19, 2018 Commission Meetings

The Commission approved the April 19, 2018 Commission Meeting minutes by unanimous consent.

### Public Input

The following individual spoke during Public Input: Deborah McPherson.

### Commissioners' Update

Commissioners Thompson and Unumb spoke of events in their district.

### Nominating Committee

Chairman Ravenel appointed Commissioners Broughton, Lemel and Thompson to serve on the Nominating Committee for the election of officers.

### State Director's Report

Pat Maley reported on the following:

Thanked the upstate executive directors for ramping up the Direct Support Professional certification course at the local technical college. This initiative will aid in reducing abuse, neglect and exploitation incidents through tracking to better fulfill the very important duties of direct support staff.

The Adult Health Care Consent Act directive is on the agency website for comments. The Office of the Attorney General will provide an independent opinion.

Waiver Administrative Division Services – Percentage of the case manager **assessed** reduction in services remains consistent with information that was presented in March.

Mercer Healthcare Consulting has been retained to conduct a review of DDSN's payment system. It will first examine our payment system and make recommendations, which will then be followed by a rate study. Mercer is planning to start the week of June 4th.

Final Rule workshops were held to help providers transition to compliance. We are in the implementation phase.

Information on billing capability on case management initiative to move to market rates will be reported at the June Commission Meeting.

Mr. Rufus Britt will serve as Interim State Director of Operations upon Mr. David Goodell's retirement. He has accepted the challenge to address our short-term direct care worker shortage at the Regional Centers.

### State Director Search Committee Update

Committee Chairman Thompson reported that the Committee so far has received 116 applicants. All applicants are very qualified and exceptional. The Committee will conduct interviews on June, 20, 2018.

### Fiscal Year 2018-2019 Comprehensive Permanent Improvement Projects

Mrs. Joan Cooper presented information on five CPIP projects requesting Commission approval. Discussion followed. On motion of Commissioner Thompson, seconded and passed, the Commission approved the five CPIP projects totaling \$1,715,000.00. (Attachment B)

Critical Needs List and Residential Vacancies Update

Mr. Goodell presented information on the critical needs list and the system bed capacity/vacancies. He stated we are moving in the right direction and spoke of the initiatives to serve high management individuals. It was discussed that it would be helpful to look into federal grants to obtain much needed mental health services and to push hard to forge a relationship with DMH. Mr. Maley presented information to get more funding and capacity to meet the needs of this population. Staff will pull together a proposal for Commissioners Neeley and Unumb to present in Washington. (Attachment C)

FY 2018-2019 Budget Update

Mr. Maley stated there has not been an update of the budget since the April Commission meeting. Sometime in June, the Senate and House will reconcile the budget. Our anticipation is the agency will at least receive what the House has proposed.

Financial Update

Mr. Maley spoke of the cash flow projection. The June Medicaid revenue will have a positive impact on the agency's budget. Capital accounts will not go negative as we have ample fallback. (Attachment D)

Quarterly Quality Management Report

Mr. Maley provided information on abuse, neglect and exploitation (ANE) trends for the third quarter of FY 2018 which included factors that are driving uptick in ANE outcomes. (Attachment E)

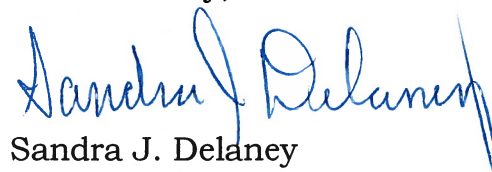
Department of Transportation Grant

Mr. Maley presented information on the Department of Transportation grant for the Pee Dee Region requesting Commission approval to move forward with the transaction. On motion of Commissioner Neeley, seconded and passed, the Commission approved the Department of Transportation grant. (Attachment F)

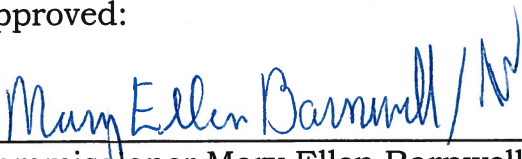
Next Regular Meeting

June 21, 2018 to be held at the DDSN Central Office.

Submitted by,

  
Sandra J. Delaney

Approved:

A handwritten signature in blue ink that reads "Mary Ellen Barnwell" followed by a stylized flourish or initials.

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Commissioner Mary Ellen Barnwell  
Secretary

# SC COMMISSION ON DISABILITIES AND SPECIAL NEEDS

## Commission Meeting

May 17, 2018

### Guest Registration Sheet

**(PLEASE PRINT)**

Name and Organization

1. Melissa Ritter SCDDSN
2. Jerry C. Mize Oconee DSN
3. CHUCK NORMAN DDSN
4. Deborah & Heather McPherson Richland County
5. Kathleen Lint Aging with Flair
6. KATHLEEN ROBERTS (WHITTEN CENTER) SUPADD
7. Ben Orner DDSN
8. Shat Jones Kershaw DSN
9. Lynn Lugo SCDDSN
10. Susan Davis USC MHA USC
11. Heather Waddell TDC
12. Arike Moss Calhoun DSN Board
13. Stephanie Milliam Calhoun DSN Board
14. Zephira Bell Kershaw DSN
15. KEVIN YACOBI DDSN
16. Hayes Davis Protection & Advocacy
17. Bob Jones Newberry DSNB
18. Corly Fieldhouse Arc of SC
19. Throd Warrick Beckett Center
20. Jim Dalton DDSN

SC COMMISSION ON DISABILITIES AND SPECIAL NEEDS

Commission Meeting

May 17, 2018

Guest Registration Sheet

(PLEASE PRINT)

Name and Organization

- 21. JOAN COOPER SCDDSN
- 22. Beth Bunge Bright Start
- 23. Carolann Neulan BIASC
- 24. David Fiorini DHHS
- 25. Tamara Kimmick DD&N
- 27. Joyce Davis BIASC
- 28. Suzanne Hyman Project HOPE
- 29. Dorothy Goodwin Community Options
- 30. David Davis Autism
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**SC COMMISSION ON DISABILITIES AND SPECIAL NEEDS**  
**Commission Meeting**  
May 17, 2018

**Guest Registration Sheet**

**(PLEASE PRINT)** Name and Organization

- 21. Felita Martino DDSN Dist II
- 22. Ronda Ritchie DDSN Dist. II
- 23. Hester Wannamaker DDSN Dist II
- 24. Rufus Britton DDSN Dist II
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SC COMMISSION ON DISABILITIES AND SPECIAL NEEDS  
Commission Meeting  
May 17, 2018

**Guest Registration Sheet**

**(PLEASE PRINT)** Name and Organization

- 1. Deborah K. Smiths District II Office
- 2. Susan L. John Horry County Disabilities
- 3. John Hitchman Facility Adm.
- 4. Mike Keith Marion. Dillon DSN
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SC COMMISSION ON DISABILITIES AND SPECIAL NEEDS

Commission Meeting

Attachment 5

May 17, 2018

Guest Registration Sheet

**(PLEASE PRINT)** Name and Organization

- 1. Debbie Wilson - Anderson County DSN Board
- 2. Elaine Thene PCBDSN
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**SC COMMISSION ON DISABILITIES AND SPECIAL NEEDS**  
**Commission Meeting**  
May 17, 2018

**Guest Registration Sheet**

**(PLEASE PRINT)** Name and Organization

- 1. Pat Fagan SCDDSN
- 2. Nancy Hall SCDDSN
- 3. Jason Tevonn LCOSNB
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# SC COMMISSION ON DISABILITIES AND SPECIAL NEEDS

## Commission Meeting

May 17, 2018

### Guest Registration Sheet

**(PLEASE PRINT)**

Name and Organization

1. michelle Shaffer

MaxAbilities of York Co.

2. Mary Poole

MaxAbilities of York Co.

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**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  
Columbia, South Carolina**

**May 17, 2018**

**10:00 A.M.**

1. Call to Order *Chairman Eva Ravenel*
2. Welcome - Notice of Meeting Statement *Commissioner Mary Ellen Barnwell*
3. Invocation *Commissioner Mary Ellen Barnwell*
4. Introduction of Guests
5. Adoption of Agenda
6. Approval of the Minutes of the April 19, 2018 Commission Meeting
7. Public Input
8. Commissioners' Update *Commissioners*
9. Nominating Committee *Chairman Eva Ravenel*
10. State Director's Report *Mr. Pat Maley*
11. State Director Search Committee Update *Committee Chairman Vicki Thompson*
12. Business:
  - A. Fiscal Year 2018-2019 Comprehensive Permanent Improvement Projects (CPIP) *Ms. Joan Cooper*
  - B. Critical Needs List and Residential Vacancies Update *Mr. David Goodell*
  - C. FY 2018-2019 Budget Update *Mr. Pat Maley*
  - D. Financial Update *Mr. Pat Maley*
  - E. Quarterly Quality Management Report *Mr. Pat Maley*
  - F. Department of Transportation Grant *Mr. Pat Maley*
13. Executive Session *Chairman Eva Ravenel*
14. Next Regular Meeting (June 21, 2018)
15. Adjournment

**FY 18-19 COMPREHENSIVE PERMANENT IMPROVEMENT PLAN  
Request Commission Approval at the May 17, 2018 Meeting**

|   |                        |
|---|------------------------|
| <b>1 Campus Security</b>  | <b>\$ 300,000.00</b>   |
| <b>Midlands Center and Coastal Center</b>   |                        |
| <p>The project scope includes controlling vehicular access and restricting unauthorized access to Midlands Center and Coastal Center, limiting access to a single gate entrance, extending fencing as appropriate, altering the entrance driveway for queuing and turn around, installing an automatic drop arm gate that is activated by photo badges or call in, installing surveillance cameras at the gate area, running conduit for network communications and power lines to the gate and camera locations, and installing a security control panel at the campus security office for monitoring by the OD clerk.</p> |                        |
| <b>2 HVAC Systems Replacement for Coastal Center</b>  | <b>\$ 500,000.00</b>   |
| <b>Hillside Dorms 320 and 420</b>   |                        |
| <p>The scope of work for this project for two dormitories includes replacement of the chiller, boiler and fan coils with a new VRF split system and DX ventilation unit. The work will include related electrical, remediation, and other associated repairs.</p>   |                        |
| <b>3 Roof Repairs &amp; Replacement for Coastal Center</b>  | <b>\$ 365,000.00</b>   |
| <b>Admin B-1 &amp; B-2; Centerview H2, H3, &amp; H4; and Maintenance</b>  |                        |
| <p>The project scope includes roofing replacement and repairs at the following Coastal Center buildings: Admin B-1, Admin B-2, Centerview H2, Centerview H3, Centerview H4, and Maintenance. Roof surfaces have been surveyed and identified to be at the end of life cycle and should be replaced with new roofing. The roofs include both low slope and sloped roofing surfaces.</p>  |                        |
| <b>4 HVAC System Replacement for Whitten Center</b>   | <b>\$ 150,000.00</b>   |
| <b>Hallet School Auditorium</b>   |                        |
| <p>The scope of work for this project includes a new split system heat pump air conditioning unit with auxiliary hot water heating coil and associated renovations required to support the HVAC work.</p>   |                        |
| <b>5 Demolition of Whitten Center Suber Building</b>  | <b>\$ 400,000.00</b>   |
| <p>The project scope includes demolition of a 44,330 sq. ft. dormitory building that was abandoned due to condition more than 10 years ago.</p>   |                        |
| <b>Total</b>  | <b>\$ 1,715,000.00</b> |

FY 18 3rd Quarter Report - Critical Needs List & System Bed Capacity/Vacancies

System-Wide Beds

| Setting      | funded & filled beds | vacancies | avg. days vacant | vacancy length distribution |            |             |             | Reg. Ctr   | target capacity | on-board beds | excess (under) | state funded beds | #  | Reg. Ctr. Triage                  | capacity | on-board |
|--------------|----------------------|-----------|------------------|-----------------------------|------------|-------------|-------------|------------|-----------------|---------------|----------------|-------------------|----|-----------------------------------|----------|----------|
|              |                      |           |                  | 0-4 months                  | 5-8 months | 9-12 months | > 12 months |            |                 |               |                |                   |    |                                   |          |          |
| SLP I        | 254                  | 4         | NA               | 4                           | 0          | 0           | 0           | Coastal    | 152             | 149           | -3             | Correct Care *    | 25 | Pee Dee                           | 6        | 0        |
| SLP II       | 446                  | 14        | 441              | 3                           | 2          | 1           | 7           | Midlands   | 138             | 145           | 7              | CTH II            | 8  | Midlands                          | 6        | 0        |
| CTH I        | 182                  | 2         | NA               | 2                           | 0          | 0           | 0           | PD/Saleeby | 188             | 191           | 3              | HM group home     | 17 | total                             | 12       | 0        |
| CTH II ***   | 2158                 | 36        | 158              | 18                          | 7          | 9           | 2           | Whitten    | 194             | 192           | -2             | OOS Hospital **   | 2  | <b>To Be Implemented Q1 FY 19</b> |          |          |
| CRCF         | 387                  | 12        | 80               | 10                          | 0          | 2           | 0           |            |                 |               |                | PRTF              | 1  |                                   |          |          |
| ICF Comm     | 493                  | 10        | 66               | 7                           | 3          | 0           | 0           | total      | 672             | 677           | 5              | TFC **            | 3  |                                   |          |          |
| ICF Reg. Ctr | 672                  | 0         | 0                | 0                           | 0          | 0           | 0           |            |                 |               |                | total             | 56 |                                   |          |          |
| total        | 4592                 | 78        | 167              | 44                          | 12         | 12          | 9           |            |                 |               |                |                   |    |                                   |          |          |

Critical Needs List Placement Throughput Rate Sample - Oct. 2017

| Oct-17                 | 24 hour crisis & high behavior needs | jail or hospital | high behavior need | avg. behavior need | total |
|------------------------|--------------------------------------|------------------|--------------------|--------------------|-------|
| # on Crit. Needs List  | 6                                    | 15               | 58                 | 38                 | 117   |
| avg. days to placement | 121                                  | 177              | 215                | 172                | 193   |

Critical Needs List Quarterly Placements

| Fiscal Year Quarter & Year | 24 hour crisis & high behavior needs | jail or hospital | high behavior need | avg. behavior need | total |
|----------------------------|--------------------------------------|------------------|--------------------|--------------------|-------|
| Q3 FY2018                  | 7                                    | 16               | 16                 | 38                 | 77    |
| Q2 FY2018                  | 5                                    | 12               | 15                 | 23                 | 55    |
| Q1 FY2018                  | 4                                    | 2                | 18                 | 31                 | 55    |
| Q4 FY2017                  | 4                                    | 12               | 18                 | 30                 | 64    |
| Q3 FY2017                  | 7                                    | 7                | 21                 | 36                 | 71    |

Critical Needs List Quarterly Total

| Fiscal Year Quarter & Year | 24 hour crisis & high behavior | jail or hospital | high behavior need | avg. behavior need | total |
|----------------------------|--------------------------------|------------------|--------------------|--------------------|-------|
| Q3 FY2018                  | 11                             | 15               | 54                 | 31                 | 111   |
| Q2 FY2018                  | 6                              | 13               | 47                 | 32                 | 98    |
| Q1 FY2018                  | 4                              | 15               | 60                 | 38                 | 117   |
| Q4 FY2017                  | 8                              | 19               | 56                 | 49                 | 132   |
| Q3 FY2017                  | 9                              | 17               | 52                 | 45                 | 123   |

\* approximately 25% of these individuals could be safely served in Medicaid funded CTH lis if sufficient capacity existed

\*\* Therapeutic Foster Care & Out of State Hospital cost share with other state agency

\*\*\* 21 High Management beds becoming available late Spring & Summer 2018

Report & methodology owner Dave Goodell

**SC Department of Disabilities and Special Needs  
FY 2018 Monthly Financial Summary - Operating Funds  
Month Ended: April 30, 2018**

|  | <u>General Fund<br/>(Appropriations)</u> | <u>Medicaid<br/>Fund</u> | <u>Other Operating<br/>Funds</u> | <u>Federal and<br/>Restricted Funds</u> | <u>Total</u>                     |
|--|--|--------------------------|----------------------------------|---|----------------------------------|
| <b>FY 2017 Unreserved Cash Brought Forward</b> | <b>\$ 947,655</b>                        | <b>\$ 2,500,725</b>      | <b>\$ 4,288,046</b>              | <b>\$ 6,586</b>                         | <b>\$ 7,743,012</b> <sup>1</sup> |
| <b><u>FY 2018 YTD Activity</u></b>             |  |                          |                                  |   |                                  |
| <b><u>Receipts/Transfers</u></b>               |  |                          |                                  |   |                                  |
| Revenue  | \$ 251,382,705                           | \$ 324,914,212           | \$ 4,679,275                     | \$ 1,253,919                            | \$ 582,230,111                   |
| Interfund Transfers                            | \$ (33,500,000)                          | \$ 33,500,000            | \$ (1,572,825)                   | \$ -                                    | \$ (1,572,825)                   |
| <b>Total Receipts/Transfers</b>                | <b>\$ 217,882,705</b>                    | <b>\$ 358,414,212</b>    | <b>\$ 3,106,450</b>              | <b>\$ 1,253,919</b>                     | <b>\$ 580,657,286</b>            |
| <b><u>Disbursements</u></b>                    |  |                          |                                  |   |                                  |
| Personal Services                              | \$ (40,781,010)                          | \$ (13,727,927)          | \$ (48,225)                      | \$ (198,378)                            | \$ (54,755,540)                  |
| Fringe Benefits                                | \$ (16,722,657)                          | \$ (5,928,746)           | \$ -                             | \$ (82,385)                             | \$ (22,733,788)                  |
| Other Operating Expense                        | \$ (147,325,799)                         | \$ (329,319,640)         | \$ (1,243,290)                   | \$ (1,024,432)                          | \$ (478,913,161)                 |
| Capital Outlays                                | \$ -                                     | \$ (269,491)             | \$ (58,927)                      | \$ -                                    | \$ (328,418)                     |
| <b>Total Disbursements</b>                     | <b>\$ (204,829,466)</b>                  | <b>\$ (349,245,804)</b>  | <b>\$ (1,350,442)</b>            | <b>\$ (1,305,195)</b>                   | <b>\$ (556,730,907)</b>          |
| <b>Outstanding Accounts Payable Balance</b>    | <b>\$ -</b>                              | <b>\$ (194,796)</b>      | <b>\$ (23,767)</b>               | <b>\$ (34,529)</b>                      | <b>\$ (253,092)</b>              |
| <b>Unreserved Cash Balance - 4/30/2018</b>     | <b>\$ 14,000,894</b>                     | <b>\$ 11,474,337</b>     | <b>\$ 6,020,287</b>              | <b>\$ (79,219)</b>                      | <b>\$ 31,416,299</b>             |

<sup>1</sup> \$5,000,000 of the total cash balance has been reserved for future Medicaid Settlements

<sup>2</sup> \$952,616 of the total cash balance has been reserved for PDD Carryforward



**FY 17/18 Legislative Authorized & Spending Plan Budget VS Actual Expenditures (as of 4/30/2018)**

| Funded Program - Bud   | Original Budget          | Budget Adjustments     | Current Budget           | YTD Actual Expense       | Balance                  |
|--|--------------------------|------------------------|--------------------------|--------------------------|--------------------------|
| ADMINISTRATION   | \$ 7,883,999.00          | \$ 15,000.00           | \$ 7,898,999.00          | \$ 5,490,141.25          | \$ 2,408,857.75          |
| PREVENTION PROGRAM   | \$ 257,098.00            | \$ 585,902.00          | \$ 843,000.00            | \$ 100,955.00            | \$ 742,045.00            |
| GREENWOOD GENETIC CENTER   | \$ 11,858,376.00         | \$ 0.00                | \$ 11,858,376.00         | \$ 11,085,004.00         | \$ 773,372.00            |
| CHILDREN'S SERVICES  | \$ 14,859,525.00         | \$ 4,381,436.00        | \$ 19,240,961.00         | \$ 14,518,387.25         | \$ 4,722,573.75          |
| BABYNET  | \$ 9,312,500.00          | \$ 0.00                | \$ 9,312,500.00          | \$ 9,312,500.00          | \$ 0.00                  |
| IN-HOME FAMILY SUPP  | \$ 87,577,481.00         | -\$ 11,501,917.00      | \$ 76,075,564.00         | \$ 43,265,260.69         | \$ 32,810,303.31         |
| ADULT DEV&SUPP EMPLO   | \$ 70,022,008.00         | \$ 9,679,896.00        | \$ 79,701,904.00         | \$ 67,473,165.87         | \$ 12,228,738.13         |
| SERVICE COORDINATION   | \$ 22,707,610.00         | -\$ 1,004,697.00       | \$ 21,702,913.00         | \$ 17,055,012.38         | \$ 4,647,900.62          |
| AUTISM SUPP PRG  | \$ 14,136,026.00         | \$ 10,963,882.00       | \$ 25,099,908.00         | \$ 11,771,534.75         | \$ 13,328,373.25         |
| Pervasive Developmental Disorder (PDD) Program                         | \$ 9,780,880.00          | -\$ 1,362,000.00       | \$ 8,418,880.00          | \$ 1,607,519.18          | \$ 6,811,360.82          |
| HD&SPINL CRD INJ COM   | \$ 3,040,532.00          | \$ 1,336,219.00        | \$ 4,376,751.00          | \$ 3,507,470.49          | \$ 869,280.51            |
| REG CTR RESIDENT PGM   | \$ 79,396,018.00         | \$ 498,017.00          | \$ 79,894,035.00         | \$ 56,486,012.24         | \$ 23,408,022.76         |
| HD&SPIN CRD INJ FAM  | \$ 27,758,987.00         | \$ 640,914.00          | \$ 28,399,901.00         | \$ 14,906,376.39         | \$ 13,493,524.61         |
| AUTISM COMM RES PRO  | \$ 23,557,609.00         | \$ 5,359,351.00        | \$ 28,916,960.00         | \$ 25,295,136.68         | \$ 3,621,823.32          |
| INTELL DISA COMM RES   | \$ 333,536,387.00        | -\$ 13,994,349.71      | \$ 319,542,037.29        | \$ 252,420,034.49        | \$ 67,122,002.80         |
| STATEWIDE CF APPRO   |                          | \$ 0.00                | \$ 0.00                  |                          | \$ 0.00                  |
| STATE EMPLOYER CONTR   | \$ 32,089,541.00         | \$ 575,053.00          | \$ 32,664,594.00         | \$ 22,733,788.19         | \$ 9,930,805.81          |
| DUAL EMPLOYMENT  |                          |                        |                          | \$ 0.00                  | \$ 0.00                  |
| CAPITAL PROJECTS   |                          |                        |                          | -\$ 44,300.00            | \$ 44,300.00             |
| <b>Legislative Authorized Total</b>                                    | <b>\$ 747,774,577.00</b> | <b>\$ 6,172,706.29</b> | <b>\$ 753,947,283.29</b> | <b>\$ 556,983,998.85</b> | <b>\$ 196,963,284.44</b> |
| Legislative authorization capacity above actual spending plan budget   |                          |                        | <b>-\$72,221,645.29</b>  |                          |                          |
| DSDN spending plan budget  |                          |                        | <b>\$681,725,638.00</b>  | <b>\$ 556,983,998.85</b> | <b>\$ 124,741,639.15</b> |
| Percent of total spending plan budget                                  |                          |                        | 100.0%                   | 81.7%                    | 18.3%                    |
| % of FY completed (expenditures) & % of FY remaining (available funds) |                          |                        | 100.0%                   | 83.3%                    | 16.7%                    |
| Difference   |                          |                        | 0.0%                     | -1.6%                    | 1.6%                     |

**REASONABLE**

Carry Forward + Cash Flow Analysis Indicates Sufficient Cash to Meet FY 18 Estimated Expenditure Commitments: YES  ; At-Risk  ; NO

**FY 16/17 expenditures categorized to provide insight into direct service consumers costs vs. non-direct service costs:**

| Expenditure                    | % of total     | Any indication FY 16/17 expenditures for direct services to consumers (95.48%) will decline in FY 17/18? |
|--------------------------------|----------------|--|
| Central Office Admin & Program | 2.36%          | YES ; NO X   |
| Indirect Delivery System Costs | 1.42%          |  |
| Lander University              | 0.05%          |  |
| Board & QPL Capital            | 0.59%          |  |
| Greenwood Autism Research      | 0.10%          |  |
| Direct Service to Consumers    | 95.48%         |  |
| <b>Total</b>                   | <b>100.00%</b> |  |

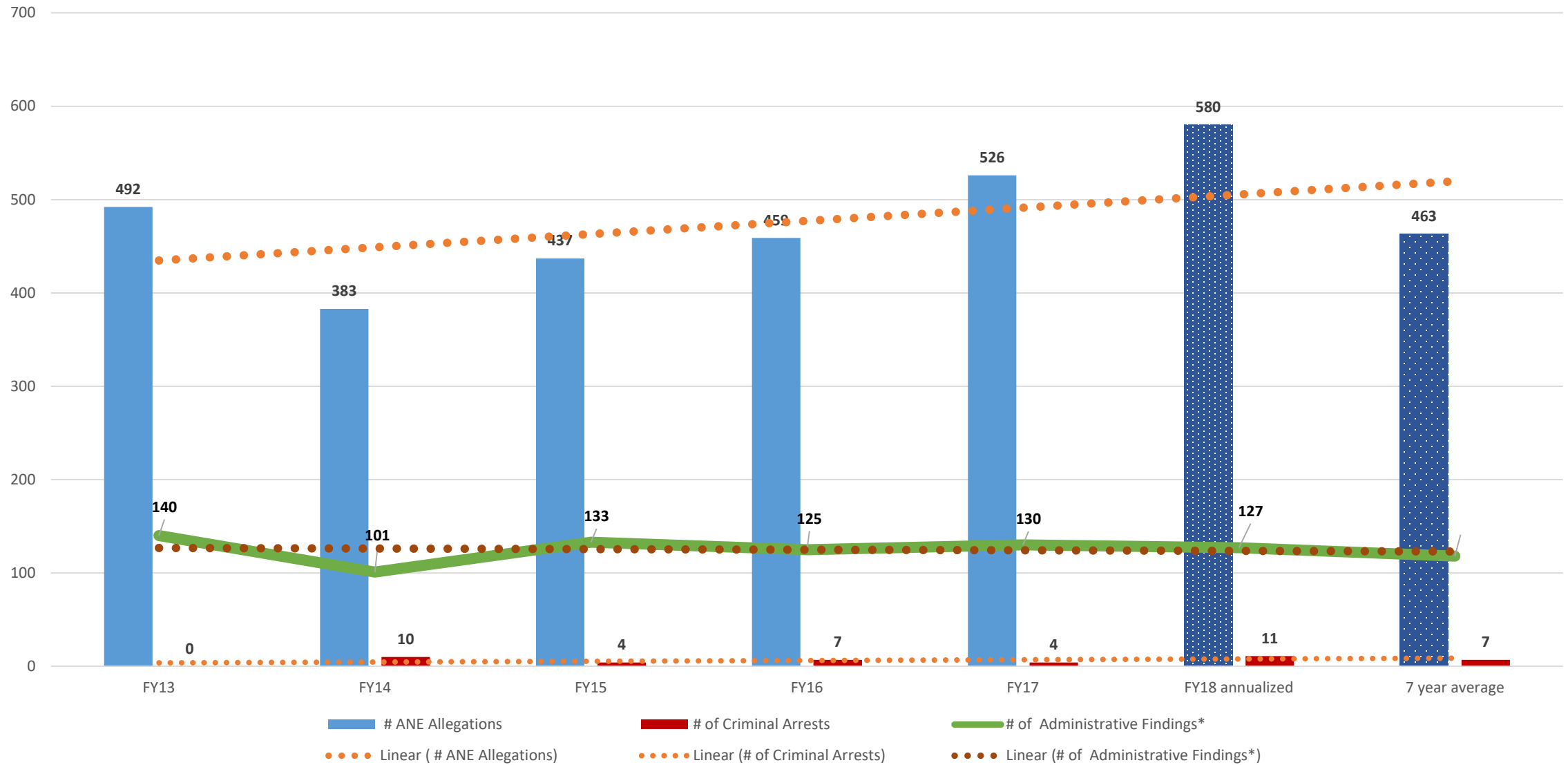
NOTE: Prior FY data will be calculated and presented to provide assurance as to the consistent pattern of direct service & non-direct service expenditures and explanation for increases/decreases

Methodology & Report Owner: Lisa Weeks

# **Abuse, Neglect & Exploitation Trends**

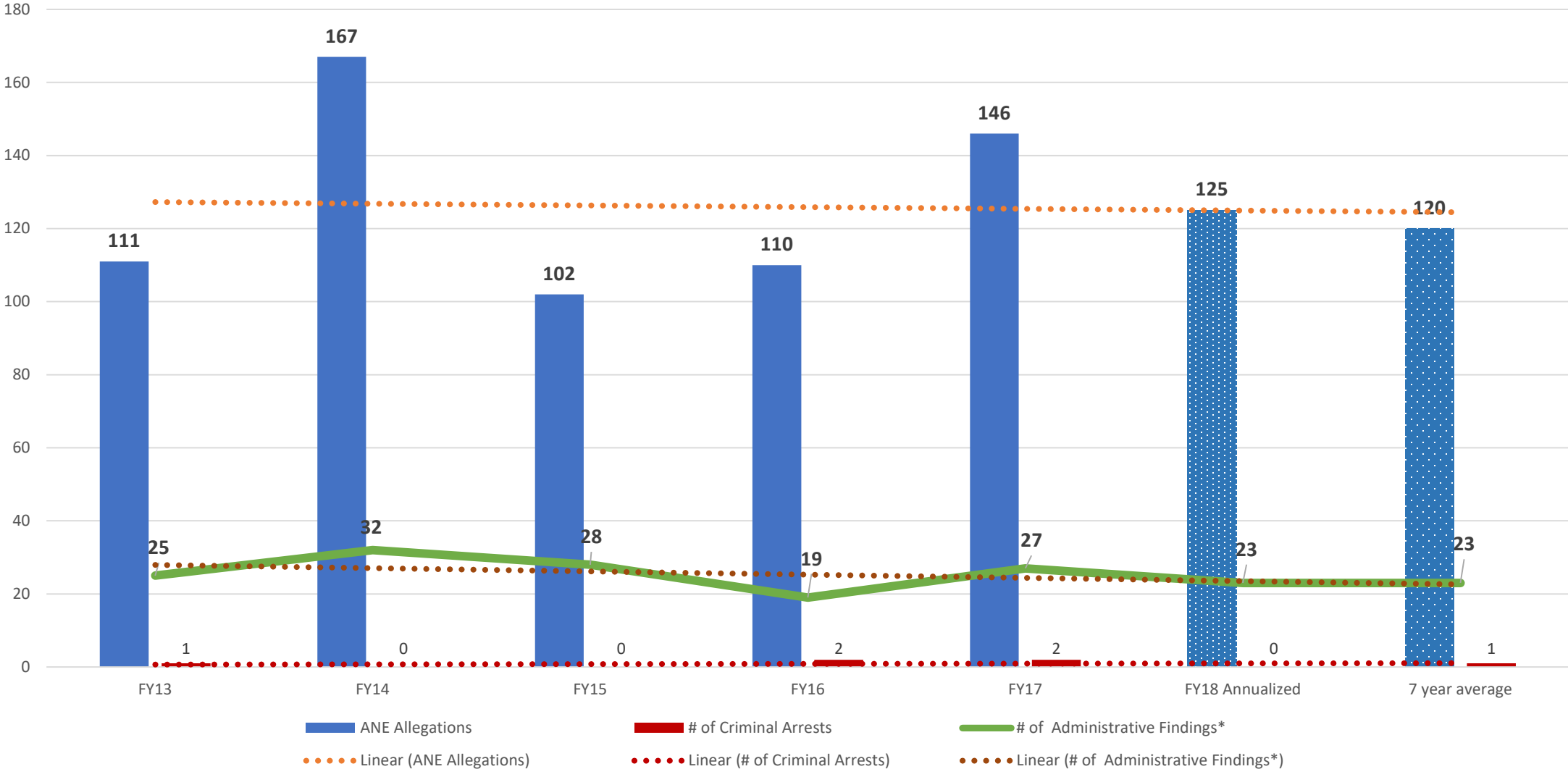
## **3rd Quarter, Fiscal Year 2018**

# ANE Allegations with Comparison to Arrest Data and Administrative Findings- Community Residential



FY18 data through 3/31/2018

# ANE Allegations with Comparison to Arrest Data and Administrative Findings- Regional Centers



## SCDDSN Incident Management Report 5 year trend data (Community -Based Programs and Regional Centers) Thru 3/31/2018

|   | FY13 | FY14 | FY15 | FY16 | FY17 | FY18<br>[annualized] | 5 Year<br>Average |
|---|------|------|------|------|------|----------------------|-------------------|
| <b>Death Reporting</b>  |      |      |      |      |      |                      |                   |
| # of Deaths Reported- Community Settings  | 68   | 59   | 65   | 63   | 78   | <b>73</b>            | <b>67</b>         |
| Rate per 100  | 1.6  | 1.4  | 1.8  | 1.4  | 1.6  | <b>1.6</b>           | <b>1.6</b>        |
| # of Deaths Reported- Regional Centers  | 20   | 31   | 31   | 26   | 24   | <b>25</b>            | <b>26</b>         |
| Rate per 100  | 2.5  | 4.0  | 4.1  | 3.6  | 3.4  | <b>3.6</b>           | <b>3.5</b>        |
| <b>Critical Incident Reporting</b>  |      |      |      |      |      |                      |                   |
| <u>Pre-FY 2018</u> Methodology for # of Critical Incident Reports in Community Day & Residential Settings<br>(INCLUDES major medical, 2 day hospitalization, and business-operations events)  | 1338 | 1277 | 1385 | 1666 | 1883 |                      | <b>1509</b>       |
| Rate per 100  | 16.9 | 15.8 | 16.8 | 19.2 | 21.1 |                      | <b>18</b>         |
| <u>Post-FY 2018</u> Methodology for # of Critical Incident Reports in Community Day & Residential<br>(EXCLUDES Major Medical, 3 day hospitalizations, and business-operations events based on revised<br>Directive 100-09-DD, effective 11/1/17; FY13 - FY17 data restated using Post-FY 2018 methodology<br>to permit comparisons) | 651  | 662  | 780  | 1002 | 1018 | <b>1119</b>          | <b>916</b>        |
| Rate per 100 with revised criteria  | 8.2  | 8.5  | 9.5  | 11.5 | 11.4 | <b>12.5</b>          | <b>10.7</b>       |
| <u>Pre-FY 2018</u> Methodology for # of Critical Incident Reports in Regional Centers   | 248  | 224  | 241  | 287  | 323  |                      | <b>265</b>        |
| Rate per 100  | 31.2 | 29.6 | 32   | 40   | 45.9 |                      | <b>35.8</b>       |
| <u>Post-FY 2018</u> Methodology for # of Critical Incident Reports in Regional Centers (FY13 to FY17<br>restated using Post FY 2018 methodology to permit comparisons)  | 19   | 21   | 54   | 78   | 108  | <b>120</b>           | <b>76</b>         |
| Rate per 100 with revised criteria  | 2.3  | 2.7  | 7.2  | 11   | 15.3 | <b>17.8</b>          | <b>10.8</b>       |

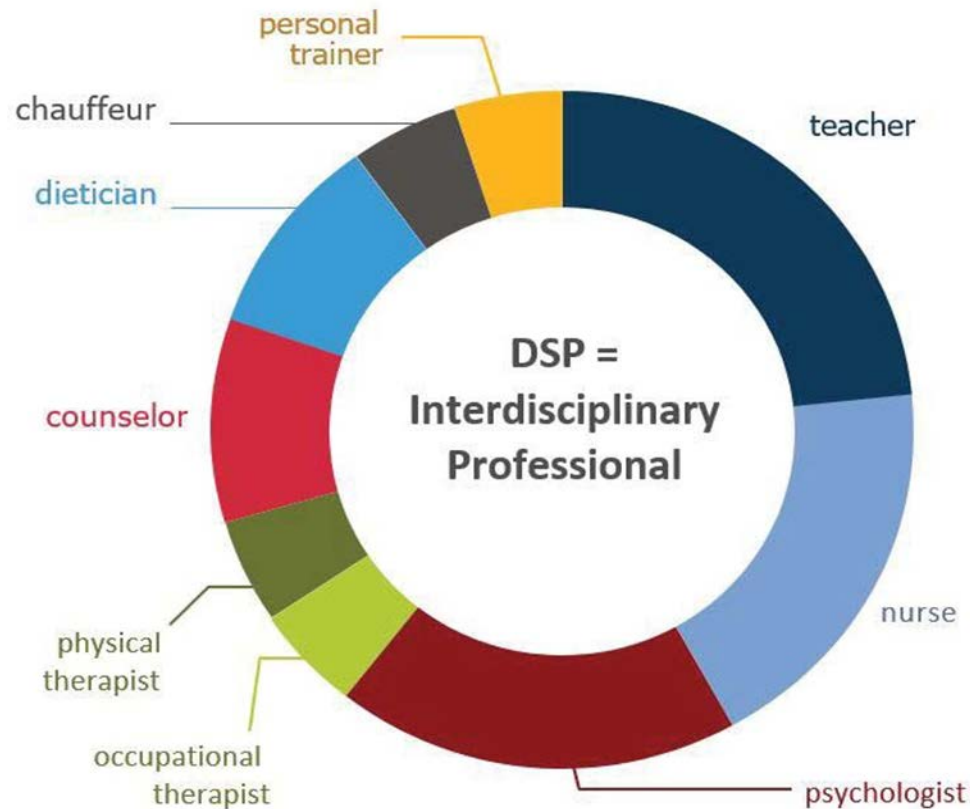
# Factors Driving Uptick in ANE Outcomes



## High Behavior Need Consumers Entering Residential Settings

| Critical Needs List Quarterly Total |  |                     |                          |                          |       |
|-------------------------------------|--|---------------------|--------------------------|--------------------------|-------|
| Fiscal Year<br>Quarter &<br>Year    | 24 Hour<br>Crisis &<br>High<br>Behavior<br>Needs | Jail or<br>Hospital | High<br>Behavior<br>Need | Avg.<br>Behavior<br>Need | Total |
| Q3 FY2018                           | 11   | 15                  | 54                       | 31                       | 111   |
| Q2 FY2018                           | 6  | 13                  | 47                       | 32                       | 98    |
| Q1 FY2018                           | 4  | 15                  | 60                       | 38                       | 117   |
| Q4 FY2017                           | 8  | 19                  | 56                       | 49                       | 132   |
| Q3 FY2017                           | 9  | 17                  | 52                       | 45                       | 123   |
| Average                             | 67%  |                     |                          | 33%                      | 100%  |

# Direct Support Professional Expected Skill Set & Work Requirements



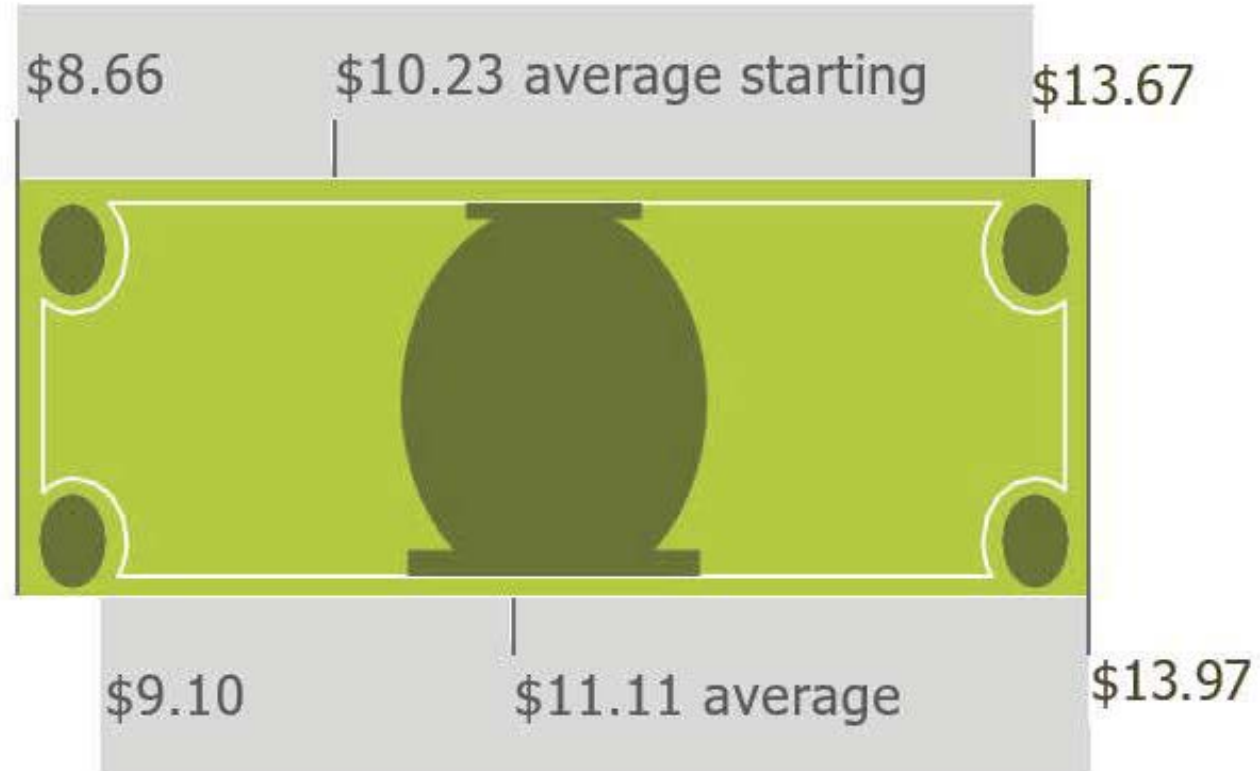
- Physically demanding
- High stress
- 24/7 operation
- Requires unexpected overtime
- High individual accountability
- Preferably attract employees who benefit from intrinsic job satisfaction

Source: 2017 Report from the Presidential Commission on People with Intellectual Disabilities (link: [https://nadsp.org/wp-content/uploads/2018/02/PCPID-2017 -Americas-Direct-Support-Workforce-Crisis-low-res.pdf](https://nadsp.org/wp-content/uploads/2018/02/PCPID-2017-Americas-Direct-Support-Workforce-Crisis-low-res.pdf))



# Direct Support Professional (DSP) Wages

## STARTING & AVERAGE WAGES



Average hourly wages for DSPs

*Source: National Core Indicators, 2017.*

# Impact of DSP Expected Skills & Job Requirements at Current Wage Levels

## TURNOVER RATE

**44.8%** turnover rate in DSP workforce

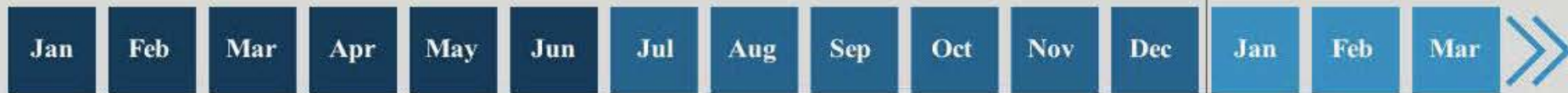


## TENURE

**17.5%** Fewer than 6 months

**14.6%** 6-12 months

**56.9%** 12 months or longer



\*The percentages do not add to 100 because all organizations did not report for each category.

# Turnover in South Carolina (2016 NCI Survey)

- SC providers reported a 37% turnover rate; national rate is 45%. DDSN Regional Center FY 2017 turnover is at 45%.
- South Carolina is fortunate 75% of direct care workers have greater than one year experience; 65% nationally. Long-serving staff nearing retirement eligibility are sustaining the system.
- Geographic location matters--some SC providers report lower turnover rates, while others have given up hope of ever getting out of using massive overtime to meet staffing needs.

67% of residential providers reported inadequate direct care staffing levels for residential consumers.

Source: DDSN Fall 2017 Survey to Providers

"Supervisors also spend large percentages of their time working direct support shifts themselves, which leaves less time for them to actually supervise their employees."

Source: 2017 Report from the Presidential Commission on People with Intellectual Disabilities

How do we **CLOSE the GAP** between eroding DSP capacity & capabilities and residential consumers' increasing behavioral needs?

# Direction for Improvement: Establish Standards

## Mandatory Staffing & Cost Expectations for Residential Providers

| Mandatory Staffing & Cost Expectations             | Industry Best Practice | South Carolina Practice * |
|--|------------------------|---------------------------|
| Direct Care Worker Staffing Ratios Based on Acuity | Yes                    | No                        |
| 1 <sup>st</sup> Line Supervisor Staffing Ratios    | Yes                    | No                        |
| Nurse Staffing Ratios                              | Yes                    | No                        |
| Transportation                                     | Yes                    | No                        |
| Overhead Dollars per Consumer                      | Yes                    | No                        |

\*Providers given autonomy to set own staffing levels based on their professional judgment and available capitated funds, which are not actuarially based on any established staffing standards.

## Invest in Training & Compensating 1st Line Supervisors

Effective 1st line supervisors dedicated to personnel development and field operational effectiveness compensate for most other organizational shortcomings.

Example of Best Practice to Integrate Staffing Requirements into the Provider Payment System to Ensure Health, Safety & Welfare of Consumers Throughout the Service Delivery System

|  |   | Supervised Living            |                   |                 |
|--|---|------------------------------|-------------------|-----------------|
|  |   | Four or Fewer Bed Residences |                   |                 |
|  |   | Low Support                  | Medium Support    | High Support    |
| ICAP Levels  |   | 1,2                          | 3                 | 4,5             |
| Unit of Service  |   | Day                          | Day               | Day             |
| Direct Support Staff Wages and Benefits                    | <i>Wages</i>  |                              |                   |                 |
|  | Direct Staff Hourly Wage                                      | \$10.58                      | \$10.58           | \$10.58         |
|  | <i>Employee Benefits</i>                                      |                              |                   |                 |
|  | Benefit Rate (as a percent of wages)                          | 27.0%                        | 27.0%             | 27.0%           |
|  | Hourly Staff Cost Before Productivity Adj. (wages + benefits) | \$13.43                      | \$13.43           | \$13.43         |
|  | <i>Productivity Assumptions</i>                               |                              |                   |                 |
|  | Total Hours   | 40.00                        | 40.00             | 40.00           |
|  | - Participating in PSS Meetings                               | 0.10                         | 0.10              | 0.10            |
|  | - Employer and One-on-One Supervision Time                    | 0.50                         | 0.50              | 0.50            |
|  | - Training  | 1.00                         | 1.00              | 1.00            |
|  | - Paid Time Off (Holidays, Vacation, Sick)                    | 3.85                         | 3.85              | 3.85            |
|  | "Billable" Hours  | 34.55                        | 34.55             | 34.55           |
|  | Productivity Adjustment                                       | 1.16                         | 1.16              | 1.16            |
|  | Staff Cost per Billable Hour                                  | \$15.55                      | \$15.55           | \$15.55         |
| <i>Staffing</i>  |   |                              |                   |                 |
| - Staff Hours per Residence per Week                       | 162.0   | 183.0                        | 225.0             |                 |
| Allocated Staff Hours per Member per Week (see Appendix D) | 54.0  | 61.0                         | 75.0              |                 |
| <b>Weekly Staff Cost per Member</b>                        | <b>\$839.70</b>   | <b>\$948.55</b>              | <b>\$1,166.25</b> |                 |
| Mileage  | <i>Capital Costs</i>  |                              |                   |                 |
|  | - Purchase Price  | \$30,000                     | \$30,000          | \$30,000        |
|  | - Salvage Value   | 10%                          | 10%               | 10%             |
|  | - Useful Life (Miles)   | 100,000                      | 100,000           | 100,000         |
|  | Capital Cost per Mile   | \$0.27                       | \$0.27            | \$0.27          |
|  | <i>Operating Costs</i>  |                              |                   |                 |
|  | Amount per Mile   | \$0.335                      | \$0.335           | \$0.335         |
| - Number of Miles per Week per Residence                   | 300   | 300                          | 300               |                 |
| Allocated Miles per Member per Week                        | 100.0   | 100.0                        | 100.0             |                 |
| <b>Weekly Mileage Cost per Member</b>                      | <b>\$60.50</b>  | <b>\$60.50</b>               | <b>\$60.50</b>    |                 |
| Home Supervision   | - Supervisor Hourly Wage                                      | \$15.92                      | \$15.92           | \$15.92         |
|  | - Benefit Rate (as a percent of wages)                        | 21.0%                        | 21.0%             | 21.0%           |
|  | - Number of Homes Supervised                                  | 4.0                          | 4.0               | 4.0             |
|  | Annual Wage and Benefit Cost of Supervision per Home          | \$10,018.37                  | \$10,018.37       | \$10,018.37     |
|  | - Number of Miles Traveled per Year                           | 7,200                        | 7,200             | 7,200           |
|  | - Miles per Supervised Living Residence per Year              | 1,800                        | 1,800             | 1,800           |
|  | - Amount per Mile   | \$0.575                      | \$0.575           | \$0.575         |
| Annual Supervisor Mileage Cost per Home                    | \$1,035.00  | \$1,035.00                   | \$1,035.00        |                 |
| <b>Weekly Supervision Cost per Member</b>                  | <b>\$53.14</b>  | <b>\$53.14</b>               | <b>\$53.14</b>    |                 |
| Nursing  | - Licensed Practical Nurse Hourly Wage                        | \$17.77                      | \$17.77           | \$17.77         |
|  | - Benefit Rate (as a percent of wages)                        | 20.0%                        | 20.0%             | 20.0%           |
|  | - Number of Members per Nurse                                 | 20                           | 20                | 20              |
|  | Annual Nursing Cost per Member                                | \$2,217.80                   | \$2,217.80        | \$2,217.80      |
| <b>Weekly Nursing Cost per Member</b>                      | <b>\$42.65</b>  | <b>\$42.65</b>               | <b>\$42.65</b>    |                 |
| Admin. and Prog. Support                                   | Weekly Cost per Member Before Admin. and Support              | \$995.99                     | \$1,104.84        | \$1,322.54      |
|  | - Program Support Funding per Member Day                      | \$15.00                      | \$15.00           | \$15.00         |
|  | <b>Weekly Program Support Cost per Member</b>                 | <b>\$105.00</b>              | <b>\$105.00</b>   | <b>\$105.00</b> |
|  | - Administration Percent                                      | 10.0%                        | \$10.0%           | 10.0%           |
|  | <b>Weekly Administrative Cost per Member</b>                  | <b>\$122.33</b>              | <b>\$134.43</b>   | <b>\$158.62</b> |
| Total Cost per Member per Week                             | \$1,223.32  | \$1,344.27                   | \$1,586.16        |                 |
| <b>Rate per Day</b>  | <b>\$174.76</b>   | <b>\$192.04</b>              | <b>\$226.59</b>   |                 |
| <b>Rate per Day at 345 Days per Year</b>                   | <b>\$184.89</b>   | <b>\$203.17</b>              | <b>\$239.73</b>   |                 |



## DDSN Near Real-Time Safety Quality Control: Residential Observations--We Are Not in a Crisis

- Beginning in FY 18, Alliant annually conducts unannounced audit tests on 25% of all residential units (250/year; 63/quarter; 21/month), to include interviews of staff & consumers. Nine quality of care outcomes are assessed, most notably consumer safety and direct care habilitation skills. This is still in the developmental stage with results as only feedback to providers. Will report quarterly to the Commission.
- 49 Residential Observation reports finalized in FY 18 depicts safe residential environments with room for DSPs to improve habilitation skills.
- Consumer & staff interviews did not depict safety issues; two residences (4%) identified safety issues: 1) observed consumer over-mediated (DDSN follow-up determined not to be an issue); and 2) DSP providing 1-on-1 direct care was unaware of the consumer's significant needs.

# Conclusion

- DDSN Delivery System is not in crisis; however, we are incrementally slipping in the wrong direction. This is a national challenge not unique to South Carolina.
- The inching up of South Carolina providers' ANE data is not a function of inadequate ANE policies or management deficiencies to keep "predator" employees out of the system. Rather, it is a function of "real world" economic factors eroding direct care professionals' (DSP) capacity & capabilities, while the consumer population's increasing behavioral needs require DSPs with higher skill levels. This gap is building pressure/stress is the delivery system.

**Section 5310**  
**Enhanced Mobility of Seniors**  
**and Individuals with Disabilities**  
**Funding Plan**

SFY2018-2019

(FFY2018)

**LEGAL & AUTHORIZING SIGNATURES**

Updated April 25, 2018

(Required of all Subrecipients of funding administered by SCDOT OPT)

**RESOLUTION BY BOARD OF DIRECTORS TO APPLY FOR FUNDING**

The Board of Directors of South Carolina Department of Disabilities and Special Needs

(agency)

is aware of the provisions of Federal Transit Administration (FTA) program fund requirements for each application it makes to the state of South Carolina for Federal and/or State funding and hereby authorizes

Lisa Weeks, Interim Associate State Director, Administration (\*authorized representative) of South Carolina Disabilities and Special Needs Board

(Agency) to file application with the South Carolina Department of Transportation (SCDOT) on behalf of South Carolina Department of Disabilities and Special Needs (agency) for federal and/or state funding to

assist in providing community and/or human services transportation services. If this application is approved:

(1) The Board resolves that the South Carolina Department of Disabilities and Special Needs (agency) will provide the required match for the capital, operations and administrative charges, the necessary insurance coverage as required under the agreement, and all necessary local match for operating losses; and

(2) The Board agrees to comply with all FTA and SCDOT Program statutes and regulations, directives, certifications and assurances to carry out the project as described in the application.

*\*Note that Authorized Representative and Witness MUST be 2 separate individuals (2 different names).*

**APPROVED AND ADOPTED**

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\*

\_\_\_\_\_  
*Signature of Attesting Witness*

\_\_\_\_\_  
*Signature of Chairperson*

\_\_\_\_\_  
*Printed Name of Attesting Witness*

\_\_\_\_\_  
*Printed Name of Chairperson*

## SMALL URBAN

| AGENCY NAME                       | Federal          | Local Match      | Total Project    | Project Type |               |
|-----------------------------------|------------------|------------------|------------------|--------------|---------------|
| <b>Apalachian COG</b>             |                  |                  |                  |              |               |
| Senior Solutions                  | \$ 55,000        | \$9,706          | \$64,706         | Vehicle-e    | Cutaway       |
| Charles Lea Center                | \$ 55,000        | \$9,706          | \$64,706         | Vehicle-r    | Cutaway       |
| <b>COG Total</b>                  | <b>\$110,000</b> | <b>\$19,412</b>  | <b>\$129,412</b> |              |               |
| <b>Catawba COG</b>                |                  |                  |                  |              |               |
| York County DSNB                  | \$55,000         | \$9,706          | \$64,706         | Vehicle-r    | Cutaway       |
| <b>COG Total</b>                  | <b>\$55,000</b>  | <b>\$9,706</b>   | <b>\$64,706</b>  |              |               |
| <b>Lowcountry COG</b>             |                  |                  |                  |              |               |
| Beaufort County DSNB              | \$ 50,000        | \$12,500         | \$62,500         | POS          |               |
| Program for Exceptional People    | \$ 55,000        | \$9,706          | \$64,706         | Vehicle-e    |               |
| <b>COG Total</b>                  | <b>\$105,000</b> | <b>\$22,206</b>  | <b>\$127,206</b> |              |               |
| <b>Pee Dee COG</b>                |                  |                  |                  |              |               |
| Senior Citizens Association       | \$55,000         | \$9,706          | \$64,706         | Vehicle-e    | Minivan       |
| Florence County DSNB              | \$55,000         | \$9,706          | \$64,706         | Vehicle-r    | Cutaway       |
| Darlington County COA             | \$55,000         | \$9,706          | \$64,706         | Vehicle-e    | Cutaway       |
| SC DDSN                           | \$55,000         | \$9,706          | \$64,706         | Vehicle-e    | ADA Minivan   |
| <b>COG Total</b>                  | <b>\$220,000</b> | <b>\$38,824</b>  | <b>\$258,824</b> |              |               |
| <b>Santee Lynches</b>             |                  |                  |                  |              |               |
| Sumter Senior Services            | \$50,000         | \$12,500         | \$62,500         | POS          |               |
| Sumter County DSNB                | \$55,000         | \$9,706          | \$64,706         | Vehicle-e    | Purpose-Built |
| Kershaw County DSNB               | \$55,000         | \$9,706          | \$64,706         | Vehicle-e    | Cutaway       |
| <b>COG Total</b>                  | <b>\$160,000</b> | <b>\$31,912</b>  | <b>\$191,912</b> |              |               |
| <b>SMALL URBAN PROJECT TOTAL:</b> | <b>\$650,000</b> | <b>\$122,060</b> | <b>\$772,060</b> |              |               |