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Applicability: DSN Boards, Contract Provider Agencies, DDSN Central Office,
DDSN District Offices

I. Purpose

The purpose of this policy is to assure that individuals who are eligible for the Department of Disabilities and Special Needs (DDSN) services are provided services in the most timely and equitable manner possible, and that those who have critical needs that jeopardize their health and safety are given priority to services and supports.

II. Prioritized Waiting Lists - Defined

- A. DDSN has three types of waiting lists that it manages: Critical Needs, Residential Services and Home and Community Based Waivers (HCB Waiver). Each of these types of waiting lists is further broken down into differentially prioritized lists with defined criteria as follows:

1. Critical Needs: Those consumers in life-threatening situations requiring immediate services.

A critical need is defined as a life-threatening situation that requires immediate action. Life threatening situations typically are limited to situations where the consumer:

DISTRICT I

P.O. Box 239
Clinton, SC 29325-5328
Phone: (864) 938-3497

Midlands Center - Phone: 803/935-7500
Whitten Center - Phone: 864/833-2733

DISTRICT II

9995 Miles Jamison Road
Summerville, SC 29485
Phone: 843/832-5576

Coastal Center - Phone: 843/873-5750
Pee Dee Center - Phone: 843/664-2600
Saleeby Center - Phone: 843/332-4104

- a) has been recently abused/neglected by primary caregiver;
- b) is homeless (to include situations where consumer is being discharged from an alternative placement and is unable to return to parent's home or live independently);
- c) has seriously injured self or others and continues to pose a threat to the health and safety of self or others; or
- d) has been judicially admitted to DDSN or is included in the DJJ subclass.

All efforts to address critical situations through the use of in-home support services, where appropriate, including Home and Community Based (HCB) Waiver services, must be exhausted prior to any consideration of residential placement. Refusal of in-home supports does not constitute a critical situation. Additionally, living with relatives or friends must be ruled out prior to an individual being considered homeless. DDSN has limited funding to use in those situations where the criteria for critical needs is either met or would be met if not for the use of such funding to provide care, supervision or supports to the consumer and his/her family. This funding, named 'crisis stabilization' funding is further defined in Section IV. This section also explains the procedures for requesting this funding from DDSN.

2. Residential Services: 24-hour supports provided by or contracted for operation by DDSN.

- A. Priority I: Those consumers in urgent situations with features suggesting there is a probability the consumer will require residential placement within the next 12 months.

A Priority I need is defined as an urgent situation which is anticipated to require residential services through DDSN within the next year to prevent harm to the consumer or the consumer's family. An urgent situation is considered to exist when the consumer has a history of significant behavioral or medical challenges that have not been or cannot be effectively met through routine or enhanced in-home services. These difficulties, while significantly disruptive to the current setting in which the consumer resides, do not pose an imminent threat to the health and safety of the consumer or others. It is anticipated that the degree of threat to the health and safety of the consumer will continue to increase. DDSN must approve Priority I status.

- B. Priority II: The consumer and/or family perceive that residential placement may be needed in the future, greater than one year. DDSN does not review placement on this list. Names can be added by service coordinators/early interventionists (SC/EI).

DDSN will give service priority to people with critical needs first, then Priority I.

3. Home and Community Based Waivers (HCB Waiver):

Consumers will be served off of the waiver waiting lists based upon urgency of need (i.e., individuals on the critical/urgent waiting lists will be offered services prior to those on the lower priority waiting lists). Those individuals on the regular waiver waiting lists will be served in the order of entry onto the waiting list (i.e., those who have been on the waiting list longer will be offered services first). Waiver slots will be allocated based on availability of funding.

A. MR/RD Waiver

Consumers discharged from an ICF/MR, children in South Carolina Department of Social Services (SCDSS) custody for whom SCDSS has agreed to financially sponsor enrollment in the MR/RD waiver, and those who reside in or need DDSN sponsored residential placement may be enrolled in the MR/RD waiver without need to be first placed on a waiting list.

1. Critical (MR/RD)

A critical need is defined as one in which the consumer:

- 1) requires a service available through the MR/RD waiver, which if not provided will likely result in serious and imminent harm; and
- 2) has an immediate need for direct care or supervision; or
- 3) has recently lost a primary caregiver or is at imminent risk of losing a primary caregiver; or
- 4) is ready for or has recently been discharged from a hospital and needs services immediately to prevent re-admission.

2. Regular (MR/RD)

Anyone requesting waiver enrollment who does not meet critical criteria described above or people for whom there is a reasonable indication of benefitting from MR/RD waiver services will be placed on the regular MR/RD waiver waiting list.

B. HASCI WAIVER

1. Urgent (HASCI)

An urgent need is defined as one in which the consumer meets the criteria required to be placed on the Regular HASCI Waiver waiting list and has two (2) or more of the following conditions present:

- a) very severe injury with functional limitations (SCI at quadriplegia level or severe TBI);
- b) emergency need for assistance with personal care;
- c) recent loss of primary caregiver (permanently gone within past 90 days) or imminent risk of losing primary caregiver (permanently gone within next 90 days), and no other natural supports to replace the primary caregiver;
- d) recently discharged (within past 90 days) or pending discharge (within next 90 days) from acute care or rehabilitation hospital with complex unmet service needs;
- e) lack of active support network.

2. Regular (HASCI)

A regular need includes all other requests that do not meet the urgent criteria.

C. PDD Waiver

There is only one (1) waiting list for the Pervasive Developmental Disorders Waiver waiting list. Children for whom there is a reasonable indication of benefiting from PDD Waiver services will be added and removed on a first come, first served basis.

D. CSW Waiver

There is only one (1) waiting list for the Community Supports Waiver. People for whom there is a reasonable indication that they could benefit from CS Waiver services will be added and removed on a first come, first served basis.

The separate procedures for inclusion of a consumer's name on one (1) of the waiting lists outlined in Section III are as follows:

III. Prioritizing Waiting Lists: Procedures for Placement or Removal

A. Procedure for Placement on/Removal from Critical Needs Waiting List

Application for inclusion of a consumer on the critical needs waiting list requires the following actions by the service coordination/early interventionist provider:

1. The SC/EI must first determine that all the appropriate in-home services and supports have been implemented and found to be insufficient to adequately address the consumer and his/her family's needs or that in-home supports are not appropriate; i.e., homelessness, loss of caregiver, etc.

It is the responsibility of the service coordination/early interventionist provider to maintain sufficiently frequent contact with consumers and their families so potential problem situations may be recognized at an early enough stage to attempt problem resolution prior to it reaching a critical needs status. There are situations where this is not possible, such as those consumers on Level II and SC/EI is not notified by family until situation becomes critical.

2. The SC/EI must make a home visit at a time convenient to the family to:
 - a. assess the consumer's and family's needs;
 - b. assure that all appropriate in-home supports and services have been utilized including natural supports or that in-home supports are not appropriate; and
 - c. verify that the existing situation meets the definition of a critical case as defined above.
3. Subsequent to the home visit, a Report of Critical/Urgent Circumstances (see Attachment A) along with supporting documentation must be completed and submitted to the SC/EI Supervisor and the provider's Executive Director/CEO for review and concurrence. If a HCB Waiver "slot" request has not already been submitted to District Office, such a request should be attached to the Report of Critical/Urgent Circumstances (see the DDSN MR/RD or HASCI Waiver Manual).
 - a. If a critical situation is considered to be present due to the consumer's or parent's/caregiver's health, specific information from the person's physician must be provided relative to those health issues.
 - b. If issues are behavioral in nature, efforts toward resolution (where appropriate) may include:
 - 1) referral to an approved behavior consultant (or reasonable attempts to locate consultant);

- 2) development of a behavior support plan;
 - 3) documentation of implementation of the behavior support plan (via progress notes and the intervention data summary report);
 - 4) documentation of other available behavioral resources used to support local interventions to address behavioral issues. If the consumer has autism or a brain injury, spinal cord injury, or similar disability, a referral to the Autism Division or the HASCI Division for clinical consultation must be obtained before submitting a Report of Critical/Urgent Circumstances.
- c. The Report of Critical/Urgent Circumstances form along with supporting documentation shall then be forwarded to the appropriate District Office.
4. District Office Procedures for Review of Report of Critical/Urgent Circumstances
- a. Upon receipt, the District Office Crisis Coordinator (DOCC) will review each Report of Critical/Urgent Circumstances to assure that it is properly prepared, complete, and contains required supporting documentation. Incomplete reports will be returned to the Executive Director/CEO with a written explanation requesting clarification and/or submission of additional supporting documentation.
 - b. If the Report of Critical/Urgent Circumstances is complete, then the DOCC will evaluate whether it meets the defined criteria for the consumer to be placed on the critical needs waiting list. The DOCC will document the results of this evaluation, to include an assessment of the level of service that the consumer appears to need (if meeting the criteria to be placed on the critical needs waiting list) on the appropriate review form (see Attachment B) and submit to the District Director along with the supporting information submitted by the service coordination/early interventionist provider.
 - c. The District Director will evaluate recommendations of DOCC and will document the decision on the noted review form. The District Director will also note if an on-site visit by the DOCC is required to more thoroughly respond to the situation. The District Director will provide a copy of the review form to the DOCC
 - d. The DOCC will notify the respective consumer's SC/EI of the disposition via email as soon as possible.
 - e. It typically requires five (5) to ten (10) days from DDSN receipt of

a fully completed Report of Critical/Urgent Circumstance for a decision to be finalized regarding placement of the individual on the critical needs waiting list. In those circumstances where the individual's health and safety would be seriously jeopardized by such a decision-making period, the provider Executive Director/CEO should contact the District Director to arrange for immediate intervention.

5. Once a consumer's name is placed on the critical needs list, the consumer's SC/EI is responsible to develop a plan to meet the consumer's needs.
 - a. Until the need is resolved, the SC/EI should be in regular contact with the consumer/family to assess the status of the situation. The DOCC will also monitor the status of those consumers who have remained on the critical needs waiting list for a lengthy period of time.
 - b. As appropriate, the SC needs to follow the procedure detailed in the Directive 502-01-DD: Admissions/Discharge of Individuals To/From DDSN Funded Community Residential Placements and the DDSN MR/RD or HASCI Waiver Manuals to provide residential services to the individual.
 - c. If a waiver participant, the SC/EI must follow the procedures detailed in the DDSN MR/RD, HASCI, or CSW Waiver Manuals to provide enhanced in-home services to the individual.
 - d. The plan to serve the consumer on the critical needs waiting list may not propose a service that is more restrictive than what has been approved by DDSN for the consumer to receive.
 - e. The plan may include services to be provided by the consumer's choice of qualified providers (including DSN Boards).
 - f. All applicable qualified providers will receive an updated copy of the critical needs waiting list on a weekly basis to assist in responding to needs in the most timely manner and assist the providers in filling service vacancies.
 - g. If a consumer or family declines DDSN's offer of residential placement, DDSN has the right to remove the person's name from the waiting list.

B. Procedure for Placement On/Removal from Priority I Residential Waiting List

Application for inclusion of a consumer on the Priority I residential waiting list requires the following actions by the service coordination/early interventionist provider:

1. The SC/EI must determine that all appropriate in-home services and supports have been implemented, that they are appropriate to meet the consumer's needs, and that they are consistent with the desires and aspirations of the consumer and his/her family.
2. The SC/EI must assure that the service plan is updated and reflects the issues identified in No. 1 above.
3. The SC/EI must have a face-to-face visit with the consumer and his/her family. A home visit is recommended but not required.
4. Subsequent to the face-to-face visit, a Report of Critical/Urgent Circumstances (see Attachment A) along with supporting documentation to include an updated service plan must be completed and submitted to the SC/EI Supervisor for review and concurrence. Although the involvement of the provider Executive Director/CEO is not required, it is recommended that he/she be kept apprised of significant consumer events such as placement on the Priority I residential waiting list.
5. The Report of Critical/Urgent Circumstances form, along with appropriate supporting documentation, shall then be forwarded to the appropriate DOCC.

District Office procedures for reviewing, analyzing, and processing requests for placement on the Priority I residential waiting list:

1. The District Office shall follow similar procedures for consumer requests for inclusion on the Priority I residential waiting list as for inclusion on Critical Needs waiting list.

C. Procedure for Placement on Priority II Residential Waiting List

A Priority II circumstance is one where the consumer and/or family perceive that residential placement may be needed in the future - greater than one year.

1. If residential placement is perceived as a possible future need, the SC/EI will add the consumer's name in STS to the Priority II waiting list.
2. If a person is on the Priority II waiting list and circumstances become urgent, steps for placement on the critical list must be completed.

D. Procedures for Placement on/Removal From the Home and Community Based Waivers, Critical/Urgent and Regular Waiting Lists

Please refer to the DDSN MR/RD, HASCI, PDD or Community Support Waiver Manuals for specific instructions. You may also contact your District Director or his/her staff for guidance.

IV. **Criteria and Procedures for Requesting Crisis Stabilization Funding from DDSN**

A. Crisis Stabilization - Criteria

Allocation of funding will be prioritized to assist consumers and their families with the greatest need. This funding is considered to be essential and crucial to assure the health, safety or welfare of the consumer who either:

1. Has been approved by the District Office for placement on the critical needs waiting list or;
2. Would be approved for placement on the critical needs waiting list if not for crisis stabilization funding. Efforts to resolve the current critical need must be exercised before consideration of crisis stabilization funds.

Consideration will be given to the personal resources of the consumer (and the consumer's parents/legal guardian if under 21 years old) when awarding funding. Access to crisis stabilization funds is not an entitlement.

B. Crisis Stabilization – Procedures for Requesting from DDSN

DDSN understands the importance of responding quickly to requests for funding. In some cases, it is anticipated that the provider will need to act immediately to resolve the health, safety or welfare issues of the consumer or his/her caregiver(s). In such cases, DDSN will accept requests for funding after action has been taken and resources allocated or expended, including depleting providers IFS-R funding.

1. Emergency Requests – Immediate action is required to address an unsafe, risky or dangerous situation.
 - Contact the District Director for immediate intervention.
2. All other requests (e.g., person is already on critical list, and the provider believes the situation, if continued, will result in a direct threat to the health, safety, and welfare of the consumer and/or his/her family) should be made using Attachment C and faxed or emailed to the DDSN District Office Crisis Coordinator. The District Office will respond to

requests within five (5) to ten (10) days from DDSN receipt of a thorough request.

V. Procedures for Reporting Age of Caregivers of Consumers

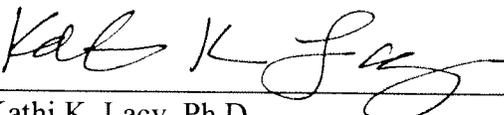
While DDSN does not maintain a separate waiting list for consumers with aging caregivers, it does periodically run "aging caregiver" reports to plan for consumers' future needs. The report is run on demand and generally includes caregiver's ages greater than 55, greater than 65 and greater than 80. Data elements are captured via the CDSS by entering each consumer's caregiver's year of birth. If a consumer has more than one caregiver, all must meet the age criteria. In order to identify consumers with aging caregivers, SC/EIs must enter all caregivers for the consumer and their respective year of birth in the CDSS "Contacts" section.

VI. Appeals

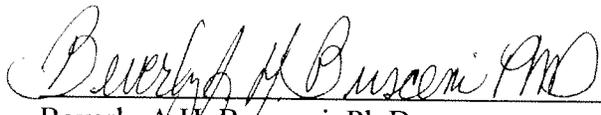
Adverse decisions regarding the placement of consumers on a DDSN waiting list may be appealed in accordance with the procedures outlined in the DDSN Directive 535-11-DD: Appeal and Reconsideration Policy and Procedures.

VII. Quality Assurance

Service Division (MR/RD, HASCI, or Autism) Directors, or their designees, will periodically conduct post-audit reviews of the placement of consumers on the DDSN waiting lists to assure compliance with DDSN policy.



Kathi K. Lacy, Ph.D.
Associate State Director, Policy
(Originator)



Beverly A. Buscemi, Ph.D.
State Director
(Approved)

To access the following attachments, please see the agency website page "Attachments to Directives" under this directive number.

Attachments:

Attachment A - REPORT OF CRITICAL/URGENT CIRCUMSTANCES

Attachment B - REVIEW OF REPORT OF CRITICAL/URGENT CIRCUMSTANCES

Attachment C - REQUEST FOR CRISIS STABILIZATION FUNDING FORM