

Reference Number: 502-01-DD

Title of Document: Admissions/Discharge of Individuals To/From DDSN Funded Community Residential Settings

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Applicability: DSN Boards and Contracted Residential Service Providers

Purpose: To assure that people who are eligible for South Carolina Department of Disabilities and Special Needs (SCDDSN) services receive the services most appropriate to meet their needs and that limited resources are utilized prudently.

I. General Conditions of Community Residential Service Provision

- A. Unless otherwise authorized by SCDDSN, the residential setting must have a valid certificate or license issued by SCDDSN or the South Carolina Department of Health and Environmental Control (SCDHEC) to provide services.
- B. The residential setting must have sufficient capacity as indicated on its license or certificate to serve those admitted.
- C. The residential service provider must have a valid contract with SCDDSN or a valid subcontract with a DSN Board to deliver the residential services in specified settings.

II. Initial Admission into Community Residential Services

The following conditions must be met prior to admission.

- A. The person must have been determined eligible to receive SCDDSN services.

- B. The person must be on the DDSN Critical Needs waiting list or currently residing in one of the SCDDSN Regional Centers (reference 502-05-DD) unless otherwise approved by SCDDSN when there are sufficient resources available to support such admissions (e.g., Residential Priority I waiting list, Court Ordered judicial admission, living with aging caregiver).
- C. The person/guardian must have chosen to receive services in the proposed residential setting. This choice should be an informed choice that is documented. Documentation must be maintained in the person's record. Additionally, others living in the home should support the person's admission.
- D. The proposed residential setting must represent the least restrictive setting in which the person's needs can be met. The following lists residential settings from most to least restrictive.
 - 1. Regional Center
 - 2. Community ICF/MR
 - 3. CRCF
 - 4. CTH II
 - 5. SLP II/CTH I
 - 6. SLP I/CTH I
 - 7. Supported Living
- E. The residential provider must have resources and expertise necessary to safely and effectively meet the needs of the person being admitted.
- F. Efforts must be made to establish person's Medicaid eligibility and ICF/MR Level of Care need prior to residential admission.
- G. The funding for services in the proposed setting must have been approved by SCDDSN. A complete, fully signed "Community Residential Admission Discharge Report (Attachment A) will constitute approval of funding.
- H. The SCDDSN "Community Residential Admission/Discharge Report" (Attachment A) must be completed by DSN Board/contracted service provider proposing to serve the person and signed by the appropriate SCDDSN officials (Assistant District Director, District Director, and Director of Cost Analysis/designee) prior to the admission. SCDDSN officials will return a fully signed copy of this form to the DSN Board/contracted residential/service coordination service provider.

III. Transfer between DSN Board/Contracted Service Provider's Community Residential Setting (applies to all transfers be they to less, more or equally restrictive settings or intra- or inter- agency transfers)

- A. There must be a legitimate reason for the transfer (e.g., the person requires a more/less intensive level of service, the person is not compatible with the other persons residing at the home, the person desires to move to another home closer to his family).

- B. The person/guardian must have chosen to receive services in the proposed residential setting. This choice should be an informed choice that is documented. Documentation must be in the person's record. Additionally, others living in the home should support the person's transfer.
- C. The proposed residential setting should represent the least restrictive setting in which the person's needs can be met. The following lists residential settings from most to least restrictive.
 - 1. Regional Center
 - 2. Community ICF/MR
 - 3. CRCF
 - 4. CTH II
 - 5. SLPII/CTH I
 - 6. SLP I/CTH II
 - 7. Supported Living
- D. The funding for services in the proposed setting must have been approved by SCDDSN. A complete, fully signed "Community Residential Admission/Discharge Report" (Attachment A) will constitute approval of funding.
- E. The residential provider must have resources and expertise necessary to safely and effectively meet the needs of the person being admitted.
- F. The DDSN "Community Residential Admission/Discharge Report" (Attachment A) must have been completed by DSN Board/contracted service provider currently serving the person and have been signed by the appropriate SCDDSN officials (Assistant District Director, District Director, Director of Cast analysis/designee) prior to the transfer. SCDDSN officials will return a fully signed copy of this form to the DSN Board/contracted residential/service coordination service provider. If the proposed transfer involves moving someone from a Regional Center/community ICF/MR to a non-ICF/MR residential setting, final approval will not be provided until that person has been enrolled in the MR/RD Waiver.

IV. Residential Discharge

- A. There must be a legitimate reason for the discharge (e.g., the person no longer requires residential services, the DSN Board/contracted service provider does not have a residential setting capable of meeting the person's needs, the person has died).
- B. If applicable, there must be a plan that outlines the post-discharge service/support needs of the person. This plan should be shared with future service providers.
- C. If alternative services are proposed, funding for those services must have been approved prior to discharge. A complete, fully signed "Community Residential Admission/Discharge Report" will signify SCDDSN's approval.

- D. The SCDDSN “Community Residential Admission/Discharge Report” (Attachment A) must have been completed by DSN Board/contracted residential/service coordination service provider currently serving the person and have been signed by the appropriate SCDDSN officials (Assistant District Director, District Director, Director of Cost Analysis/designee) prior to the discharge. SCDDSN officials will return a fully signed copy of this form to the DSN Board/contracted residential/service coordination service provider.

V. Residential Vacancies

- A. DSN Boards must admit people (as specified in Section II B of this document) into a funded residential vacancy within 30 calendar days. Failure to do so may result in financial sanction unless reasonable justification for extended vacancy has been approved by SCDDSN.
1. For the purpose of this funding requirement, a residential vacancy is considered to exist if someone receiving community residential services has been admitted to a SCDDSN Regional Center for short term behavioral/medical stabilization or has not been sleeping at the residence for ten (10) consecutive nights.
 2. DSN Boards/contracted residential providers must notify their respective Assistant District Director of any such temporary residential vacancies with three (3) days. Notice should include the projected date that the person will return to the community residence. Notice should be provided via email or memo.
- B. DSN Board/contracted service providers must provide a monthly summary of efforts to fill any residential vacancies using the attached SCDDSN “Residential Vacancy” form (Attachment C). This report must be submitted to the Assistant District Director no later than the first (1st) Monday of each month.
- C. DSN Boards/contracted service providers should remain knowledgeable of those SCDDSN Regional Center residents who have expressed a desire to receive residential services in a community-based setting. SCDDSN will periodically distribute a listing of SCDDSN Regional Center residents who desire to receive services in the community.

VI. Respite

- A. DSN Boards/contracted service providers can provide respite in certain residential settings (i.e., CTH I, CTH II, CRCF, ICF/MR) to people who are in crisis or as a planned break for the person’s primary caretaker.
- B. In order to provide respite, there must be sufficient licensed/certified capacity in the residential setting to accommodate all who will be present.
- C. The residents of the home must agree to respite being provided unless the provision of respite is approved by local Human Rights Committee and SCDDSN. If a resident’s bedroom will be used in his/her absence for respite, appropriate consent must be obtained from the resident and, if desired, he/she must be able to secure personal belongings in his/her absence.

- D. The SCDDSN “Residential Respite” form (Attachment B) must be completed by DSN Board/contacted service provider proposing to provide the respite and be approved by SCDDSN official (District Director) prior to the provision of any residential respite in excess of three (3) calendar days. The Executive Director must approve any residential respite provided for three (3) calendar days or less.

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State Director
(Approval)

To view the attachments below, please see the Agency’s website under the “Attachments to Directives” page under this directive number.

Attachments:

Attachment A: Community Residential Admission/Discharge Report
Attachment B: Residential Respite Form
Attachment C: Residential Vacancy Form