

SOUTH CAROLINA

Overview

All adult day care (ADC) facilities are required to be licensed by the South Carolina Department of Health and Environmental Control (DHEC), whether they serve publicly-funded or only private pay participants.

The South Carolina Department of Health and Human Services Community Long-Term Care program operates a Medicaid 1915(c) waiver program called Community Choices that authorizes adult day health care (ADHC) as a covered service. The Department of Disabilities and Special Needs also operates several 1915(c) waiver programs that offer ADHC services to different populations. In addition to being licensed as an ADC provider, ADHC providers must meet additional Medicaid requirements. Out-of-state ADHC providers must maintain a current ADC license from an equivalent licensing agency.

ADC services for participants who are not eligible for Medicaid are supported by small grants from the Family Caregiver Support Program, the Alzheimer's Association, and the South Carolina Respite Coalition. The source of this funding is a mix of federal and state grants. The Department of Veterans Affairs also provides funding for ADC.

Both licensing and Medicaid requirements are described in this profile.

Definitions

Adult day care services means activities and therapies offered in a day care facility for adults through an individualized care plan that sets forth measurable goals or behaviorally stated objectives, with such services being designed to activate, motivate, and retrain impaired or other categories of adults to enable them to sustain or regain functional independence.

Day care facility for adults is a facility for adults age 18 years or older that offers a program of individual and group activities and therapies in a group setting. The program is directed toward providing community-based day care services for adults in need of a supportive setting, thereby preventing unnecessary institutionalization. The program must operate a minimum of 4 hours and a maximum of 14 hours a day.

Adult Day Health Care. The objective of ADHC services is to restore, maintain, and promote the health status of Medicaid waiver participants through the provision of ambulatory health care and health-related supportive services in an ADC center. Providers may subcontract for licensed nursing services. The unit of service is a participant day of ADHC services consisting of a minimum of 5 hours at the center.

When a participant needs to be at the center for more than 5 hours per day because no one is at home to care for the participant, the ADHC provider must allow the participant to remain at the center for up to 8 hours. The hours of operation may be any 8-hour period between 7:00am and 6:00pm.

Parameters for Who Can Be Served

Adults needing a supportive setting to prevent unnecessary institutionalization can be served in an ADC facility. However, individuals who are confined to a bed because of a physical or mental condition may not be served. The physician's report for each participant will enable an ADC facility to determine if it has the services needed to meet the individual's needs. Day care facilities for adults shall not serve participants whose needs exceed the resources outlined in the regulations.

Inspection and Monitoring

Each facility must be inspected before initial licensure and at least annually by authorized representatives of DHEC. All licensed and prospective licensed facilities are subject to inspection at any time. Medicaid providers are surveyed with unannounced site visits. The Division of Long-Term Care Waiver Management, Provider Compliance Department has developed a policy for clarification of the ADHC provider compliance process. A sanction scoring process has been developed to ensure that reviews are equitable and that providers know what to expect when they are reviewed. The policy gives detailed information on how provider compliance sanctions are implemented.

Required and Optional Services

All ADC and ADHC programs furnish socialization, social activities, nutrition services, and supervision to ensure safety. They also monitor participants' health and functioning at a basic level to determine if the program can continue to meet participants' health and functional needs. The table below lists additional required and optional services.

Required and Optional Services	Adult Day Care		Adult Day Health Care	
	Required	Optional	Required	Optional
ADL Assistance	X		X	
Health Education and Counseling			X	
Health Monitoring/Health-Related Services			X	
Medication Administration		X	X	
Nursing Services			X	
Physical Therapy, Occupational Therapy, or Speech Therapy				
Skilled Nursing Services				
Social Services				
Transportation			X ¹	

1. Transportation is required for all ADHC participants who reside within 15 miles of the center.

Medication Provisions

Each participant's physician's report must include information regarding medications (name, type, dosage, and whether the individual is capable of self-administering). The licensing standards do not include any requirements regarding the conditions under which participants can self-administer medications or the conditions for administering medications to participants. Medicaid requires a registered nurse (RN) to supervise medication administration.

Staffing Requirements

Type of Staff. Each facility must have staff capable of providing program services and supervision for participants. A full-time *administrator* has the authority to manage and administer the facility. An individual must be appointed in writing to act in the absence of the administrator. At least one staff member who is certified with American Red Cross first-aid training and cardiovascular pulmonary resuscitation (CPR) (or American Heart Association CPR) and capable of recognizing symptoms of distress must be present when participants are in the facility. If the staff member is a licensed nurse, first-aid training is not required.

In addition, Medicaid requires ADHC providers to have on staff a *registered nurse* to monitor vital signs as needed; to observe the functional level of the participants and note any changes in the physical condition of each participant; to supervise the administration of medications; and to coordinate treatment plans with the physician, therapist, and other involved service delivery agencies. The RN must approve the documentation of the services provided. Should the RN position become vacant, the ADHC provider must notify the local Community Long-Term Care office no later than the next business day.

Staffing Ratios. The minimum staff-to-participant ratio is one direct care staff member to eight participants. Volunteers and interns may be used to augment the staff.

In addition to the minimum staffing required by licensing, the following staffing standards for nurses and case managers apply whenever Medicaid waiver program participants are present:

- For 1-44 participants, one RN must be present as follows: 1-10, present for 2 hours minimum; 11-20, present for 3 hours minimum; 21-25, present for 4 hours minimum; 26-35, present for 5 hours minimum; and 36-44, present for 6 hours minimum.
- For 45-88 participants, one RN and one additional RN or licensed practical nurse (LPN) must be present for a minimum of 5 hours.

- For 89-133 participants, one RN and two additional RNs or LPNs; or one RN, one additional RN or LPN, and one case manager must be present for a minimum of 5 hours.
- For 134 or more participants, one RN and three additional RNs or LPNs; or one RN, two additional RNs or LPNs, and one case manager must be present for a minimum of 5 hours.

Training Requirements

Each facility must have and execute a written orientation program to familiarize each new staff member with the facility and its policies and procedures. The program must include, at a minimum, fire safety measures and infection control. In-service training programs must be planned and provided for all employees to ensure and maintain their understanding of their duties and responsibilities.

Location of Licensing, Certification, or Other Requirements

Regulation Number 61-75, Standards for Licensing Day Care Facilities for Adults. South Carolina Department of Health and Environmental Control. [Updated December 5, 2003] <http://www.scdhec.gov/Health/docs/61-75.pdf>

Medicaid Home and Community-Based Waiver, Scope of Services for Adult Day Health Care Services. Source: Office of the Director, Community Long-Term Care Waiver Management, Department of Health and Human Services. [August 1, 2014]

Information Sources

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REGULATORY REVIEW OF ADULT DAY SERVICES: FINAL REPORT, 2014 EDITION

Files Available for This Report

FULL REPORT

Executive Summary <http://aspe.hhs.gov/daltcp/reports/2014/adultday14es.cfm>
HTML <http://aspe.hhs.gov/daltcp/reports/2014/adultday14.cfm>
PDF <http://aspe.hhs.gov/daltcp/reports/2014/adultday14.pdf>

SEPARATE STATE PROFILES

[**NOTE:** These profiles are available in the full HTML and PDF versions, as well as each state available as a separate PDF listed below.]

Alabama	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AL.pdf
Alaska	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AK.pdf
Arizona	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AZ.pdf
Arkansas	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AR.pdf
California	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-CA.pdf
Colorado	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-CO.pdf
Connecticut	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-CT.pdf
Delaware	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-DE.pdf
District of Columbia	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-DC.pdf
Florida	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-FL.pdf
Georgia	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-GA.pdf
Hawaii	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-HI.pdf
Idaho	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-ID.pdf
Illinois	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-IL.pdf
Indiana	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-IN.pdf
Iowa	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-IA.pdf
Kansas	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-KS.pdf
Kentucky	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-KY.pdf
Louisiana	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-LA.pdf

Maine	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-ME.pdf
Maryland	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MD.pdf
Massachusetts	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MA.pdf
Michigan	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MI.pdf
Minnesota	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MN.pdf
Mississippi	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MS.pdf
Missouri	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MO.pdf
Montana	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MT.pdf
Nebraska	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NE.pdf
Nevada	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NV.pdf
New Hampshire	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NH.pdf
New Jersey	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NJ.pdf
New Mexico	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NM.pdf
New York	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NY.pdf
North Carolina	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NC.pdf
North Dakota	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-ND.pdf
Ohio	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-OH.pdf
Oklahoma	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-OK.pdf
Oregon	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-OR.pdf
Pennsylvania	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-PA.pdf
Rhode Island	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-RI.pdf
South Carolina	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-SC.pdf
South Dakota	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-SD.pdf
Tennessee	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-TN.pdf
Texas	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-TX.pdf
Utah	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-UT.pdf
Vermont	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-VT.pdf
Virginia	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-VA.pdf
Washington	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WA.pdf
West Virginia	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WV.pdf
Wisconsin	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WI.pdf
Wyoming	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WY.pdf