RULES OF THE

TENNESSEE DEPARTMENT OF INTELLECTUAL AND DEVELOPMENTAL DISABILITIES OFFICE OF LICENSURE

CHAPTER 0465-02-16 MINIMUM PROGRAM REQUIREMENTS FOR DEVELOPMENTAL DISABILITIES SEMI-INDEPENDENT LIVING SERVICES

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0465-02-16-.01 POLICIES AND PROCEDURES.

- (1) The written policies and procedures manual must include the following:
 - (a) Procedures for tuberculosis control and reporting of infectious and communicable diseases to the Tennessee Department of Health.
 - (b) A policy ensuring that employees and volunteers practice infection control procedures and standard precautions that will protect people from infectious diseases.
 - (c) Policies and procedures establishing minimum requirements ensuring reasonable safety to life in the event of fire for all dwellings in which persons supported reside. These policies and procedures must require:
 - 1. Fire safety features of smoke detection, fire extinguishers, and two (2) alternative routes of escape in each dwelling of the person supported; and
 - 2. Training for each person supported at the time of admission in the proper evacuation of his or her respective dwelling and the use of fire safety features.
 - (d) Policies and procedures establishing minimum standards of environmental quality in the dwelling of each person supported. These policies and procedures must ensure:
 - 1. The health of the person supported is not threatened by the standard of environmental quality maintained in his/her dwelling; and
 - 2. Each dwelling of the person supported is furnished and equipped in an adequate manner for meeting his/her individual needs and personal life style.

0465-02-16-.02 PROFESSIONAL SERVICES.

- (1) The licensee must provide or procure assistance for persons supported in locating qualified dental, medical, nursing and pharmaceutical care including care for emergencies during hours of the facility's operation.
- (2) The licensee must ensure that an annual physical examination is provided or procured for each person supported (unless less often is indicated by the physician of the person supported). Such examinations should include routine screenings (such as vision and hearing) and laboratory examination (such as Pap smear and blood work), as determined necessary by the physician and special studies where the index of suspicion is high.

Authority: T.C.A. §§ 4-4-103, 4-5-202, 33-1-201, 33-1-302, 33-1-303, 33-1-305, 33-1-309, 33-2-301, 33-2-302, 33-2-404, 33-2-407. **Administrative History:** New rules filed July 6, 2016; effective October 4, 2016.

0465-02-16-.03 PERSONNEL AND STAFFING.

- (1) A primary staff member must be assigned to each person supported. The primary staff member is to be responsible for monitoring and assisting the person supported in the semiindependent living arrangement. A primary staff member must not be responsible for more than twenty (20) persons supported at one time.
- (2) Primary staff members or other assigned support staff must be available to persons supported on call on a twenty-four (24) hour per day basis.
- (3) The governing body must ensure that employees practice infection control procedures that will protect persons supported from infectious diseases.
- (4) Employees shall be screened or tested for tuberculosis according to the procedures of the Tennessee Department of Health. Documentation of such screening or testing shall be maintained in the employee's personnel file.
- (5) Employees must be provided with a basic orientation in the proper management of seizure disorders for persons supported prior to being assigned to work.

Authority: T.C.A. §§ 4-4-103, 4-5-202, 33-1-201, 33-1-302, 33-1-303, 33-1-305, 33-1-309, 33-2-301, 33-2-302, 33-2-404, 33-2-407. **Administrative History:** New rules filed July 6, 2016; effective October 4, 2016.

0465-02-16-.04 PERSON SUPPORTED RECORDS.

- (1) The record of each person supported must contain the following:
 - (a) A recent photograph and a description of the person supported;
 - (b) The social security number of the person supported:
 - (c) The legal competency status of the person supported, including the name of his/her legal representative (conservator, parent, guardian, or legal custodian), if applicable;
 - (d) The sources of financial support including social security, veteran's benefits and insurance of the person supported;

(Rule 0465-02-16-.04, continued)

- (e) The sources of coverage for medical care costs of the person supported;
- (f) The name, address and telephone number of the physician or healthcare agency providing medical services for the person supported;
- (g) Documentation of all medications prescribed or administered by the licensee to the person supported, which indicates the date prescribed, type, dosage, frequency, amount, and reason;
- (h) A discharge summary of the person supported, which states the date of discharge, reasons for discharge, and referral for other services, if appropriate;
- (i) Report medical problems, accidents, seizures and illnesses of the person supported, and treatments of such medical problems, accidents, seizures and illnesses;
- (j) Report of significant behavior incidents of the person supported, and actions taken;
- (k) Report of the use of restrictive behavior-management techniques on the person supported; and
- (I) Written accounts of all monies received and disbursed on behalf of the person supported.

Authority: T.C.A. §§ 4-4-103, 4-5-202, 33-1-201, 33-1-302, 33-1-303, 33-1-305, 33-1-309, 33-2-301, 33-2-302, 33-2-404, 33-2-407. **Administrative History:** New rules filed July 6, 2016; effective October 4, 2016.

0465-02-16-.05 MEDICATION ASSISTANCE.

- (1) When medications are taken by persons supported under the supervision of staff, the staff must:
 - (a) Consider the ability and training of the person supported, when supervising the selfadministration of medication;
 - (b) Ensure that prescription medications are taken only by the person supported for whom they are prescribed, and in accordance with the directions of a physician;
 - (c) Provide storage for medications in a locked container, which ensures proper conditions of security and sanitation, and prevents accessibility to any unauthorized individual;
 - (d) Assure the disposal of discontinued and outdated medications and containers with worn, illegible or missing labels; and
 - (e) Report all medication variance (errors), medication reactions, or suspected side effects to the practitioner who prescribed the medication.

0465-02-16-.06 DAY ACTIVITIES.

- (1) The governing body must ensure that day activities are provided or procured. Such day activities must be in accordance with the age level, interests, and abilities of the person supported and in accordance with an ISP.
- (2) If the person supported attends an outside school or day program the governing body must ensure that the staff participate with the school personnel in developing an individual education plan or with the day program staff in developing an ISP, as appropriate.

Authority: T.C.A. §§ 4-4-103, 4-5-202, 33-1-201, 33-1-302, 33-1-303, 33-1-305, 33-1-309, 33-2-301, 33-2-302, 33-2-404, 33-2-407. **Administrative History:** New rules filed July 6, 2016; effective October 4, 2016.

0465-02-16-.07 ASSESSMENTS.

- (1) The following assessments of the person supported must be completed prior to the development of an ISP:
 - (a) An assessment of current capabilities in such areas as adaptive behavior and independent living skills;
 - (b) A basic medical history, information, and determination of the necessity of a medical evaluation, and a copy, where applicable, of the results of the medical evaluation of the person supported; and
 - (c) A six (6) month history of prescribed medications, frequently used over-the-counter medications, alcohol, and/or other drugs.

Authority: T.C.A. §§ 4-4-103, 4-5-202, 33-1-201, 33-1-302, 33-1-303, 33-1-305, 33-1-309, 33-2-301, 33-2-302, 33-2-404, 33-2-407. **Administrative History:** New rules filed July 6, 2016; effective October 4, 2016.

0465-02-16-.08 INDIVIDUAL SUPPORT PLAN (ISP) TEAM.

- (1) The licensee must ensure that an ISP team known as the Circle of Support is identified and provided for each person supported. The team may include the following as determined by the person supported:
 - (a) The person supported:
 - (b) The legal representative (conservator, parent, guardian, or legal custodian) of the person supported, if applicable, unless their inability or unwillingness to attend is documented;
 - (c) Appropriate Provider staff;
 - (d) Relevant professionals or individuals, unless their inability to attend is documented:
 - (e) Friends, advocates and other non-paid supports, if applicable; and
 - (f) The Independent Support Coordinator/Case Manager.

(Rule 0465-02-16-.08, continued)

Authority: T.C.A. §§ 4-4-103, 4-5-202, 33-1-201, 33-1-302, 33-1-303, 33-1-305, 33-1-309, 33-2-301, 33-2-302, 33-2-404, 33-2-407. **Administrative History:** New rules filed July 6, 2016; effective October 4, 2016.

0465-02-16-.09 INDIVIDUAL SUPPORT PLAN (ISP) DEVELOPMENT AND IMPLEMENTATION.

- (1) The governing body must ensure that a written ISP is provided and implemented for each person supported. The ISP must meet the following:
 - (a) Developed within thirty (30) days of the admission of the person supported;
 - (b) Developed by the ISP team of the person supported;
 - (c) Includes the date of development of the ISP;
 - (d) Includes signatures of the person supported, appropriate staff, and, if applicable, the legal representative (conservator, parent, guardian, or legal custodian) of the person supported;
 - (e) Specifies the needs identified by assessment of the person supported and addresses those needs within the particular service/program component;
 - (f) Includes personal goals and objectives of the person supported, which are related to the specific needs identified, and specifies which goals and objectives are to be addressed by a particular service/program component; and
 - (g) Includes methods or activities by which the goals and objectives of the person supported are to be implemented.

Authority: T.C.A. §§ 4-4-103, 4-5-202, 33-1-201, 33-1-302, 33-1-303, 33-1-305, 33-1-309, 33-2-301, 33-2-302, 33-2-404, 33-2-407. **Administrative History:** New rules filed July 6, 2016; effective October 4, 2016.

0465-02-16-.10 INDIVIDUAL SUPPORT PLAN (ISP) MONITORING AND REVIEW.

- (1) Written progress notes must be maintained, which include monthly documentation of progress or changes occurring within the ISP.
- (2) The ISP team must review the ISP annually and revise, as necessary.

Authority: T.C.A. §§ 4-4-103, 4-5-202, 33-1-201, 33-1-302, 33-1-303, 33-1-305, 33-1-309, 33-2-301, 33-2-302, 33-2-404, 33-2-407. **Administrative History:** New rules filed July 6, 2016; effective October 4, 2016.

0465-02-16-.11 ADMISSIONS.

- (1) The governing body must ensure that all persons supported in semi-independent living services meet the following criteria:
 - (a) Capable of self-preservation;
 - (b) Able to care for basic self-help and minor health care needs without assistance;

(Rule 0465-02-16-.11, continued)

- (c) Able to care for personal possessions and to maintain personal living area in a state of orderliness and cleanliness to the extent it does not constitute a health hazard:
- (d) Able to travel independently or secure assistance in traveling to work, training, community activities, or to generic services;
- (e) Able to recognize danger or threat to personal safety;
- (f) Able to plan and cook simple meals; and
- (g) Able to secure assistance in crisis situations by such means as the telephone or contacting neighbors or staff.

Authority: T.C.A. §§ 4-4-103, 4-5-202, 33-1-201, 33-1-302, 33-1-303, 33-1-305, 33-1-309, 33-2-301, 33-2-302, 33-2-404, 33-2-407. **Administrative History:** New rules filed July 6, 2016; effective October 4, 2016.

0465-02-16-.12 SUPPORTIVE SERVICES.

- (1) The governing body must ensure that the following support services are provided for each person supported:
 - (a) Transportation or assistance with transportation for non-routine events, special appointments, or long distance travel;
 - (b) Liaison for making appointments and obtaining consultation with professional services;
 - (c) Maintenance of a current list of the names and telephone numbers, within each dwelling of the person supported, for emergency services and the Direct Support Staff available and on-call;
 - (d) Counseling for each person supported as needed on the utilization of professional, social and community services, and assistance in the referral process and in making appointments for such services;
 - (e) Monitoring of food and nutrition to ensure that the person supported is able to plan, shop for, store, and prepare appropriate food and meals;
 - (f) Counseling, training, and other assistance in procuring and taking prescription and non-prescription drugs;
 - (g) Aid in the development of homemaking, money management, and socialization skills;
 - (h) Counseling/Assistance in the use and protection of money; and
 - Assistance in applying for financial benefits for which the person supported may be eligible.

0465-02-16-.13 USE OF RESTRICTIVE BEHAVIOR MANAGEMENT.

- (1) No procedures shall be used for behavior management which results in physical or emotional harm to the person supported.
- (2) Corporal punishment, seclusion, aversive stimuli, chemical restraint, and denial of a nutritionally adequate diet shall not be used.
- (3) Restraint (physical holding, mechanical restraint), medications for behavior management, time-out rooms, or other techniques with similar degrees of restriction or intrusion must not be employed except as an integral part of an ISP.
- (4) Restrictive or intrusive behavior management procedures must not be used until after less restrictive alternatives for dealing with the problem behavior have been systematically tried or considered and have been determined to be inappropriate or ineffective.
- (5) Prior to the implementation of a written program or behavior support plan incorporating the use of a highly restrictive or intrusive technique, the program plan must be reviewed and approved by the person supported or his/her legal representative (conservator, parent, guardian, or legal custodian), with documentation of such approval. A Human Rights Committee must also review and approve the written program.
- (6) When procedures such as physical holding, mechanical restraint, and time-out are used in emergency situations to prevent the person supported from inflicting bodily harm, more than three (3) times within six (6) months, a behavioral assessment shall be conducted by an appropriate professional. Recommendations shall be incorporated into a written plan that is part of the ISP.
- (7) Behavior management medications may be used only when authorized in writing by a physician for a specific period of time.
- (8) The program plan for the use of a mechanical restraint must specify the extent and frequency of the monitoring schedule according to the type and design of the device and the condition of the person supported.
- (9) A person supported who is placed in a mechanical restraint must be released for a minimum of ten (10) minutes at least every two (2) hours and provided with an opportunity for freedom of movement, exercise, liquid intake/refreshment, nourishment, and use of the bathroom.
- (10) Physical restraint/physical holding may be used only until the person supported is calm.
- (11) A person supported who is placed in time-out must be released after a period of not more than sixty (60) minutes.
- (12) The ability of a person supported to exit from time-out must not be prevented by means of keyed or other locks, and locations used for time-out must allow for the immediate entry of staff.