

**RULES
OF
TENNESSEE DEPARTMENT OF MENTAL HEALTH
AND MENTAL RETARDATION**

**CHAPTER 0940-5-23
MINIMUM PROGRAM REQUIREMENTS FOR MENTAL RETARDATION
INSTITUTIONAL HABILITATION FACILITIES**

TABLE OF CONTENTS

0940-5-23-.01	Policies and Procedures for Institutional Habilitation Facilities	0940-5-23-.09	Day Activity Provisions for Clients of Institutional Habilitation Facilities
0940-5-23-.02	Professional Services in Institutional Habilitation Facilities	0940-5-23-.10	Client Assessment Requirements for Institutional Habilitation Facilities
0940-5-23-.03	Personnel and Staffing Requirements for Institutional Habilitation Facilities	0940-5-23-.11	Individual Program Plan Team Requirements for Institutional Habilitation Facilities
0940-5-23-.04	Client Record Requirements for Institutional Habilitation Facilities	0940-5-23-.12	Individual Program Plan Development and Implementation in Institutional Habilitation Facilities
0940-5-23-.05	Medication Administration in Institutional Habilitation Facilities	0940-5-23-.13	Individual Program Plan Monitoring and Review in Institutional Habilitation Facilities
0940-5-23-.06	Client Health, Hygiene and Grooming Provisions for Institutional Habilitation Facilities	0940-5-23-.14	Human Rights Committee Provisions for Institutional Habilitation Facilities
0940-5-23-.07	Client Clothing Provision for Institutional Habilitation Facilities	0940-5-23-.15	Requirements for the Use of Restrictive Behavior Management in Institutional Habilitation Facilities
0940-5-23-.08	Recreational Activity Provisions in Institutional Habilitation Facilities		

0940-5-23-.01 POLICIES AND PROCEDURES FOR INSTITUTIONAL HABILITATION FACILITIES.
The written policies and procedures manual must include procedures for tuberculosis control and reporting of infectious and communicable diseases to the Tennessee Department of Health.

Authority: T.C.A. § 33-2-504. *Administrative History:* Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-23-.02 PROFESSIONAL SERVICES IN INSTITUTIONAL HABILITATION FACILITIES.

- (1) The facility must ensure that each client receives an annual physical examination (unless less often is indicated by the client's physician) which includes routine screenings (such as vision and hearing) and laboratory examinations (such as Pap smear and blood work) as determined necessary by the physician and special studies where the index of suspicion is high.
- (2) The facility must ensure that all clients receive social services including liaison between the client, his family, the facility and the community.
- (3) The facility must ensure that each client receives a medical exam within ninety (90) days before or thirty (30) days after admission.
- (4) The facility must ensure that each client receives an annual dental screening
- (5) The facility must ensure that each client receives qualified dental, medical, nursing, pharmacy, physical and occupational therapy, social, psychological, speech pathology and audiology services in accordance with the Individual Program Plan.
- (6) The facility must ensure that each child is provided with immunizations as required by the Tennessee Department of Health unless contraindicated by a physician's order.

Authority: T.C.A. § 33-2-504. *Administrative History:* Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-23-.03 PERSONNEL AND STAFFING REQUIREMENTS FOR INSTITUTIONAL HABILITATION FACILITIES.

- (1) All professional services must be provided by persons duly licensed or certified to practice their profession in the State of Tennessee, or by persons who are eligible for licensure or certification and under the supervision of duly licensed or certified personnel, as appropriate.
- (2) The facility must provide an overall ratio of one (1) direct-services staff member for each two and one-half (2 ½) clients present.
- (3) The facility must ensure that employees practice infection control procedures that will protect clients from infectious diseases.
- (4) Employees must have a regular tuberculosis skin test within thirty (30) days of employment and as required thereafter by current Tennessee Department of Health guidelines.
- (5) Employees must be provided with a basic orientation in the proper management of individuals with seizure disorders prior to being assigned to work with individuals with such disorders.
- (6) Clients must never be left unattended during normal sleeping hours.
- (7) A staff member must be on duty in the facility who is trained in First Aid and the Heimlich maneuver.

Authority: T.C.A. § 33-2-504. *Administrative History:* Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-23-.04 CLIENT RECORD REQUIREMENTS FOR INSTITUTIONAL HABILITATION FACILITIES.

- (1) Each client record must contain the following information:
 - (a) A recent photograph and a description of the client;
 - (b) The client's social security number;
 - (c) The client's legal competency status;
 - (d) The client's sources of financial support, including social security, veteran's benefits and insurance.
 - (e) The sources of coverage of medical care costs;
 - (f) The name, address and telephone number of the physician or health agency providing medical services;
 - (g) Documentation of all drugs prescribed or administered by the facility which indicated date prescribed, type, dosage, frequency, amount and reason;
 - (h) A discharge summary which states the date of discharge, reasons for discharge and referral for other services, if appropriate;
 - (i) Report of medical problems, accidents, seizures and illnesses and treatments for such medical problems, accidents, seizures and illnesses;

(0940-5-23-.04 continued)

- (j) Report of significant behavior incidents and of actions taken;
- (k) Report of the use of restrictive behavior-management techniques;
- (l) A list of each individual article of each client's personal property valued at fifty dollars (\$50) or more including its disposition, if no longer in use; and
- (m) Written accounts of all monies received and disbursed on behalf of the client.

Authority: T.C.A. § 33-2-504. *Administrative History:* Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-23-.05 MEDICATION ADMINISTRATION IN INSTITUTIONAL HABILITATION FACILITIES.

- (1) The facility must consider the client's ability and training when supervising the administration of medication.
- (2) The facility must ensure that prescription medications are taken only by clients for whom they are prescribed and in accordance with the directions of a physician.
- (3) Drugs must be stored in a locked container which ensures proper conditions of security and sanitation and prevents accessibility to any unauthorized person;
- (4) Discontinued and outdated drugs and containers with worn, illegible, or missing labels must be disposed.
- (5) All medication errors, drug reactions, or suspected overmedications must be reported to the practitioner who prescribed the drug.
- (6) Evidence of the current prescription of each medication taken by a client must be maintained by the facility.
- (7) Written specifications, by title, of the personnel permitted to administer various categories of medication must be maintained.
- (8) The Individual Program Plans must document when clients are capable of self-administration.

Authority: T.C.A. § 33-2-504. *Administrative History:* Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-23-.06 CLIENT HEALTH, HYGIENE AND GROOMING PROVISIONS IN INSTITUTIONAL HABILITATION FACILITIES.

- (1) The facility must provide clients with assistance and training, as needed, with health, hygiene and grooming practices.
- (2) The facility must provide clients with assistance and training in the use of dental appliances, eyeglasses and hearing aids.
- (3) The facility must encourage clients to maintain a well groomed and clean appearance that is age and activity appropriate and within reason of current acceptable styles of grooming and dressing and appearance.
- (4) Facility staff must be responsible for the implementation of the orders of a physician concerning recuperative procedures subsequent to a client's illness or injury.

(0940-5-23-.06 continued)

- (5) The facility must ensure that each client bathes or receives a bath daily and that hair and nails are clean and groomed weekly.
- (6) Facility staff must clean incontinent clients immediately, including a change of clothing and linen as necessary.

Authority: T.C.A. § 33-2-504. *Administrative History:* Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-23-.07 CLIENT CLOTHING PROVISIONS IN INSTITUTIONAL HABILITATION FACILITIES.

- (1) Each client must be provided the least restrictive level of support and assistance needed in the selection and purchase of clothing.
- (2) The facility must allow each client to dress himself in his/her own clothes and to change clothes at appropriate times, according to individual abilities.
- (3) The facility must assist each client in securing an adequate allowance of personally owned, individualized, normal, clean and seasonal clothes for each client.
- (4) Any marking of clients' clothing for identification purposes must be done in an inconspicuous manner.

Authority: T.C.A. § 33-2-504. *Administrative History:* Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-23-.08 RECREATIONAL ACTIVITY PROVISIONS IN INSTITUTIONAL HABILITATION FACILITIES. The facility must ensure that opportunities are provided for recreational activities which are appropriate to, and adapted to the needs, interests and ages of the clients served.

Authority: T.C.A. § 33-2-504. *Administrative History:* Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-23-.09 DAY ACTIVITY PROVISIONS FOR CLIENTS OF INSTITUTIONAL HABILITATION FACILITIES.

- (1) The facility 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 clients and in accordance with Individual Program Plans.
- (2) If the client attends a school or day program provided outside of the facility, the facility's staff must participate with the school personnel in developing an individual education plan or with the day program staff in developing an Individual Program Plan, as appropriate.
- (3) The facility must ensure the participation of direct-services staff in developing and implementing daily activity schedules for each client.
- (4) Client activity schedules must not have more than three (3) hours of dead or unscheduled time daily.
- (5) The facility must ensure that each multiply-handicapped and non-ambulatory client:
 - (a) Is assisted by a direct-service staff member in spending at least three (3) hours of their waking day out of bed unless contraindicated by a physician's order;
 - (b) Is assisted by a direct-services staff member in spending a portion of their waking day out of their bedroom area;

(0940-5-23-.09 continued)

- (c) Is assisted by a direct-services staff member in an exercise period daily; and
 - (d) Is assisted in being mobile whenever possible by the use of wheelchairs or other mobility devices.
- (6) The facility must ensure that each client is provided with a planned period of outdoor activity on a daily basis except during inclement weather.

Authority: T.C.A. § 33-2-504. *Administrative History:* Original rule filed May 26, 1988; effective July, 1988.

0940-5-23-.10 CLIENT ASSESSMENT REQUIREMENTS FOR INSTITUTIONAL HABILITATION FACILITIES

- (1) The following client assessments must be completed prior to the development of the Individual Program Plan:
- (a) An assessment of current functioning in such areas as adaptive behavior and independent living skills;
 - (b) A basic medical history and information and determination of the necessity of a medical evaluation and a copy, where applicable, of the results of the medical evaluation;
 - (c) A six month history of prescribed medications, frequently used over-the-counter medications and alcohol or other drugs; and
 - (d) An existing psychological assessment on file which is updated as recommended by interdisciplinary team decision.

Authority: T.C.A. § 33-2-504. *Administrative History:* Original rule filed May 26, 1988; effective July 11, 1998.

0940-5-23-.11 INDIVIDUAL PROGRAM PLAN TEAM REQUIREMENTS FOR INSTITUTIONAL HABILITATION FACILITIES.

- (1) The facility must ensure that an Individual Program Plan team is identified and provided for each client. The team must minimally include the following:
- (a) The client, unless contraindicated by the individual program plan team;
 - (b) The client's parents or guardian, if appropriate, unless their inability or unwillingness to attend is documented;
 - (c) Direct services staff with input from each shift and weekend staff, as appropriate;
 - (d) Relevant professionals or person unless their inability to attend is documented; and
 - (e) A mental retardation specialist.

Authority: T.C.A. § 33-2-504. *Administrative History:* Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-23-.12 INDIVIDUAL PROGRAM PLAN DEVELOPMENT AND IMPLEMENTATION IN INSTITUTIONAL HABILITATION FACILITIES.

- (1) The facility must ensure that a written, Individual Program Plan (IPP) is provided and implemented for each client. The IPP must meet the following requirements:
 - (a) Developed within thirty (30) days of the client's admission to the facility;
 - (b) Developed by the client's Individual Program Plan team;
 - (c) Includes the date of development of the IPP;
 - (d) Includes the signatures of client or guardian and the appropriate staff;
 - (e) Specifies the clients' needs identified by assessment and to be addressed within the particular service/program component;
 - (f) Includes client goals and objectives which are related to the specific needs identified and which are to be addressed by the particular service/program component;
 - (g) Includes methods or activities by which the client goals and objectives are to be implemented.

Authority: T.C.A. § 33-2-504. *Administrative History:* Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-23-.13 INDIVIDUAL PROGRAM PLAN MONITORING AND REVIEW IN INSTITUTIONAL HABILITATION FACILITIES.

- (1) Written progress notes must be maintained which include monthly documentation of progress or changes occurring within the IPP.
- (2) The Individual Program Plan team must review the IPP annually and revise, if indicated.

Authority: T.C.A. § 33-2-504. *Administrative History:* Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-23-.14 HUMAN RIGHTS COMMITTEE PROVISIONS FOR INSTITUTIONAL HABILITATION FACILITIES. The facility must provide a Human Rights Committee to ensure client's rights and provide advocacy for clients. The committee must consist minimally of at least three (3) members including one (1) member who is independent of the facility. The committee's meetings and decisions must be documented.

Authority: T.C.A. § 33-2-504. *Administrative History:* Original rule filed May 26, 1988; effective July, 1988.

0940-5-23-.15 REQUIREMENTS FOR THE USE OF RESTRICTIVE BEHAVIOR MANAGEMENT IN INSTITUTIONAL HABILITATION FACILITIES.

- (1) Corporal punishment must not be used.
- (2) Behavior-management programs must not employ techniques that may result in denial of a nutritionally adequate diet.
- (3) Physical restraint, drugs for behavior management, time-out rooms, aversive stimuli, or other techniques with similar degrees of restriction or intrusion must not be employed except as an integral part of an Individual Program Plan that is designated by the client's Individual Program Plan team to lead to a less restrictive way of managing, and ultimately to the elimination of, the behavior.

(0940-5-23-.15 continued)

- (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 incorporating the use of a highly restrictive or intrusive technique, the facility must document that the program has been reviewed and approved by the client or the client's legal guardian and by the facility's Human Rights Committee.
- (6) Emergency procedures used to prevent a client from inflicting bodily harm may not be repeated more than three (3) times within six (6) months without being incorporated into a written behavior-management program that is part of an Individual Program Plan designated by the client's Individual Program Plan team.
- (7) Behavior-management drugs may be used only when authorized in writing by a physician for a specific period of time.
- (8) Chemical restraint may be used only when authorized and supervised by a physician in attendance.
- (9) A client placed in chemical restraint must be under continuous staff observation.
- (10) If the use of chemical restraint is necessary beyond twenty-four (24) hours, the situation must be re-evaluated, authorized and supervised by a physician in attendance.
- (11) The program for the use of a mechanical restraint must specify the extent and frequency of the monitoring according to the type and design of the device and the condition of the client.
- (12) A client placed in mechanical restraint must be released for a minimum of ten (10) minutes at least every two (2) hours and provided with an opportunity for motion, exercise, liquid intake and toileting.
- (13) Personal restraint/physical holding may be used only until the client is calm.
- (14) If the use of personal restraint/physical holding is necessary beyond sixty (60) minutes, the situation must be re-evaluated and authorized by a mental retardation specialist.
- (15) The client placed in a time-out room must be released after a period of not more than sixty (60) minutes.
- (16) The ability of a client to exit a time-out room must not be prevented by means of keyed or other locks; and time-out rooms must allow for the immediate entry of staff.
- (17) Aversive stimuli may be used only when the behavior of a client is likely to cause irreparable harm to himself or others, the behavior precludes his or her development and less negative procedures have, in the immediate past, been documented to be ineffective in reducing or eliminating this particular behavior.

Authority: T.C.A. § 33-2-504. **Administrative History:** Original rule filed May 26, 1988; effective July 11, 1988.