

**RULES  
OF THE  
TENNESSEE DEPARTMENT OF INTELLECTUAL AND DEVELOPMENTAL DISABILITIES  
OFFICE OF LICENSURE**

**CHAPTER 0465-02-07  
MINIMUM PROGRAM REQUIREMENTS FOR INTELLECTUAL DISABILITIES ADULT HABILITATION  
DAY FACILITIES/SERVICES**

**TABLE OF CONTENTS**

0465-02-07-.01	Policies and Procedures	0465-02-07-.07	Assessments
0465-02-07-.02	Professional Services	0465-02-07-.08	Individual Support Plan (ISP) Team
0465-02-07-.03	Personnel and Staffing	0465-02-07-.09	Individual Support Plan (ISP) Development And Implementation
0465-02-07-.04	Person Supported Records	0465-02-07-.10	Individual Support Plan (ISP) Monitoring And Review
0465-02-07-.05	Medication Administration	0465-02-07-.11	Use of Restrictive Behavior Management
0465-02-07-.06	Vocational Services		

**0465-02-07-.01 POLICIES AND PROCEDURES.**

The licensee must maintain a written policies and procedures manual which includes procedures for tuberculosis control and reporting of infectious and communicable diseases to the Tennessee Department of Health.

**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.

**0465-02-07-.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 examinations (such as Pap smear and blood work), as deemed 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.

**0465-02-07-.03 PERSONNEL AND STAFFING.**

- (1) The licensee must provide two (2) direct support staff members for the first twenty (20) persons supported. One (1) additional direct support staff member must be provided for each additional increment of twenty (20) persons supported present.
- (2) The licensee must ensure that employees practice infection control procedures that will protect persons supported from infectious diseases.
- (3) 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.

(Rule 0465-02-07-.03, continued)

- (4) Employees must be provided with a basic orientation in the proper techniques and strategies for the support of persons supported with seizure disorders, prior to being assigned to work with them.
- (5) A staff member must be on duty who is trained in First Aid and Cardiopulmonary Resuscitation (CPR).

**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.

#### **0465-02-07-.04 PERSON SUPPORTED RECORDS.**

- (1) The record of each person supported must contain the following information:
  - (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;
  - (d) The sources of financial support of the person supported, including social security, veteran's benefits and insurance;
  - (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 of the person supported;
  - (g) Documentation of all drugs/medications prescribed or administered by the licensee to the person supported, which indicates the date prescribed, type, dosage, frequency, amount, and reason for prescription;
  - (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 of medical problems, accidents, seizures and illnesses, and treatments for such medical problems, accidents, seizures and illnesses for the person supported;
  - (j) Report of significant behavior incidents and of actions taken for the person supported; and
  - (k) Report of the use of restrictive behavior management techniques for 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.

#### **0465-02-07-.05 MEDICATION ADMINISTRATION.**

- (1) When medications are administered by certified staff to persons supported the licensee must:

(Rule 0465-02-07-.05, continued)

- (a) Consider the ability and training of the person supported, when supervising the self-administration 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.

**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.

#### **0465-02-07-.06 VOCATIONAL SERVICES.**

- (1) The licensee must ensure that work provided is dignified and not demeaning or degrading to the person supported. Vocational Service activities provided must be challenging to the capabilities of the person supported yet result in a sense of accomplishment and productivity.
- (2) Day services shall be provided or procured in accordance with the age level, interests, and abilities of the person supported as specified in the ISP.

**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.

#### **0465-02-07-.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 result of the medical evaluation;
  - (c) A six (6) month history of prescribed medications, frequently used over-the-counter medications, alcohol, and/or other drugs; and
  - (d) An existing psychological assessment on file which is updated as recommended by the ISP team.

**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.

**0465-02-07-.08 INDIVIDUAL SUPPORT PLAN (ISP) TEAM.**

- (1) The rights of a person supported may only be modified or limited under the following conditions:
  - (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.

**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.

**0465-02-07-.09 INDIVIDUAL SUPPORT PLAN (ISP) DEVELOPMENT AND IMPLEMENTATION.**

- (1) The licensee must ensure that a written ISP is provided and implemented for each person supported. The ISP must meet the following requirements:
  - (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.

**0465-02-07-.10 INDIVIDUAL SUPPORT PLAN (ISP) MONITORING AND REVIEW.**

- (1) Written progress notes must be maintained, which include at least quarterly reviews of progress or changes occurring in the ISP.
- (2) Changes relative to health, safety, and implementation of outcome based services must be assessed on an ongoing basis and reflected within the quarterly reviews.
- (3) 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.

**0465-02-07-.11 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.

(Rule 0465-02-07-.11, continued)

- (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.

**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.