

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

**CHAPTER 0940-5-20
MINIMUM PROGRAM REQUIREMENTS FOR MENTAL RETARDATION
ADULT HABILITATION DAY FACILITIES**

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0940-5-20-.01 POLICIES AND PROCEDURES FOR ADULT HABILITATION DAY FACILITIES. The facility 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. § 33-2-504. *Administrative History:* Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-20-.02 PROFESSIONAL SERVICES IN ADULT HABILITATION DAY FACILITIES.

- (1) The facility must provide or procure assistance for clients in locating qualified dental, medical, nursing and pharmaceutical care including care for emergencies during hours of the facility's operation.
- (2) The facility must ensure that an annual physical examination is provided or procured for each client (unless less often is indicated by the client's physician). Such examinations should include 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.

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

0940-5-20-.03 PERSONNEL AND STAFFING REQUIREMENTS FOR ADULT HABILITATION DAY FACILITIES.

- (1) The facility must provide two (2) direct-services staff members for the first one (1) to twenty (20) clients present in the facility. One (1) additional direct-services staff member must provided for each additional increment of one (1) to twenty (20) clients present.
- (2) The facility must ensure that employees practice infection control procedures that will protect clients from infectious diseases.
- (3) Employees must have a regular tuberculosis skin test within thirty (30) days of employment and as required thereafter by current Department of Health guidelines.

(Rule 0940-5-20-.03, continued)

- (4) 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.
- (5) 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.

0940-5-20-.04 CLIENT RECORD REQUIREMENTS FOR ADULT HABILITATION DAY 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 for 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 indicates 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;
 - (j) Report of significant behavior incidents and of actions taken; and
 - (k) Report of the use of restrictive behavior management techniques.

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

0940-5-20-.05 MEDICATION ADMINISTRATION IN ADULT HABILITATION DAY FACILITIES.

- (1) When medications are taken by clients under the supervision of facility staff, the staff must:
 - (a) Consider the client's ability and training when supervising the administration of medication;
 - (b) Ensure that prescription medications are taken only by clients for whom they are prescribed and in accordance with the directions of a physician;

(Rule 0940-5-20-.05, continued)

- (c) Provide storage for drugs in a locked container which ensures proper conditions of security and sanitation and prevents accessibility to any unauthorized person;
- (d) Assure the disposal of discontinued and outdated drugs and containers with worn, illegible or missing labels; and
- (e) Report all medication errors, drug reactions or suspected overmedication to the practitioner who prescribed the drug.

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

0940-5-20-.06 VOCATIONAL SERVICES IN ADULT HABILITATION DAY FACILITIES. The facility must ensure that work provided is dignified and not demeaning or degrading to the mentally retarded individual. Work activities provided must be challenging to the capabilities of the mentally retarded individual yet can result in a sense of accomplishment and productivity.

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

0940-5-20-.07 CLIENT ASSESSMENT REQUIREMENTS FOR ADULT HABILITATION DAY 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 result of the medical evaluation;
 - (c) A six (6)-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, 1988.

0940-5-20-.08 INDIVIDUAL PROGRAM PLAN TEAM REQUIREMENTS FOR ADULT HABILITATION DAY 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;

(Rule 0940-5-20-.08, continued)

- (d) Relevant professionals or persons, 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.

0940-5-20-.09 INDIVIDUAL PROGRAM PLAN DEVELOPMENT AND IMPLEMENTATION IN ADULT HABILITATION DAY 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 enrollment in 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 client's needs identified by assessment and to be address 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; and
 - (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.

0940-5-20-.10 INDIVIDUAL PROGRAM PLAN MONITORING AND REVIEW IN ADULT HABILITATION DAY 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.
- (3)

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

0940-5-20-.11 REQUIREMENTS FOR THE USE OF RESTRICTIVE BEHAVIOR MANAGEMENT IN ADULT HABILITATION DAY 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 designed 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.

(Rule 0940-5-20-.11, 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 the facility must appoint a Human Rights Committee to review and approve the written program.
- (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 designed 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 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, 1998; effective July 11, 1988.