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TITLE 460 DIVISION OF DISABILITY, AGING, AND REHABILITATIVE SERVICES

Proposed Rule LSA Document #02-46

DIGEST

Adds 460 IAC 6 concerning supported living services and supports for individuals with a developmental disability. The proposed rule includes qualifications for approved providers of supported living services and supports; the process by which the bureau of developmental disabilities services (bureau) approves providers; the bureau's process for monitoring and ensuring compliance with provider standards and requirements; the rights of individuals receiving services; protection of individuals receiving services; and standards and requirements for approved providers of supported living services and supports. Effective 30 days after filing with the secretary of state.

460 IAC 6

SECTION 1. 460 IAC 6 IS ADDED TO READ AS FOLLOWS:

ARTICLE 6. SUPPORTED LIVING SERVICES AND SUPPORTS

Rule 1. Purpose

460 IAC 6-1-1 Purpose

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. The purpose of this article is to establish standards and requirements for the approval and monitoring of providers of supported living services and supports to individuals with a developmental disability. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-1-1*)

Rule 2. Applicability

460 IAC 6-2-1 Providers of services

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. This article applies to the approval and monitoring of providers of supported living services or supported living supports. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-2-1*)

460 IAC 6-2-2 Rules applicable to all providers

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. This rule and 460 IAC 6-3 through 460 IAC 6-17 apply to all providers of supported living services and supports. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-2-2*)

460 IAC 6-2-3 Rules applicable to specific providers

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 3. 460 IAC 6-18 through 460 IAC 6-35 apply to the providers of supported living services and supports specified in the respective rule. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-2-3)

460 IAC 6-2-4 Conflict with Medicaid provisions

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 4. If any provision of this article is deemed to be in conflict with any federal or state statute, regulation, or rule that is specifically applicable to the Medicaid program, then such other statute, regulation, or rule shall supersede that part of this article in which the conflict is found. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-2-4)

Rule 3. Definitions

460 IAC 6-3-1 Applicability of definitions

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. The definitions in this rule apply throughout this article. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-1)

460 IAC 6-3-2 “Abuse” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. “Abuse” means the following:

- (1) Intentional or willful infliction of physical injury.**
- (2) Unnecessary physical or chemical restraints or isolation.**
- (3) Punishment with resulting physical harm or pain.**
- (4) Sexual molestation, rape, sexual misconduct, sexual coercion, and sexual exploitation.**
- (5) Verbal or demonstrative harm caused by oral or written language, or gestures with disparaging or derogatory implications.**
- (6) Psychological, mental, or emotional harm caused by unreasonable confinement, intimidation, humiliation, harassment, threats of punishment, or deprivation.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-2)

460 IAC 6-3-3 “Adult protective services” or “APS” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-10-3; IC 12-11-1.1; IC 12-11-2.1

Sec. 3. “Adult protective services” or “APS” means the program established under IC 12-10-3. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-3)

460 IAC 6-3-4 “Advocate” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 4. (a) “Advocate” means a person who:

- (1) assists an individual with decision making and self-determination; and**
- (2) is chosen by the individual or the individual’s legal representative, if applicable.**

(b) An advocate is not a legal representative unless legally appointed. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-4)

460 IAC 6-3-5 “Applicant” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 5. “Applicant” means a natural person or entity who applies to the BDDS for approval to provide one (1) or more supported living services or supports. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-5)

460 IAC 6-3-6 “BDDS” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1-1; IC 12-11-2.1

Sec. 6. “BDDS” means bureau of developmental disabilities services as created under IC 12-11-1.1-1. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-6)

460 IAC 6-3-7 “Behavioral support plan” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 7. “Behavioral support plan” means a plan that addresses the behavioral support needs of an individual. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-7)

460 IAC 6-3-8 “Behavioral support services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 8. “Behavioral support services” means training, supervision, or assistance in appropriate expression of emotions and desires, compliance, assertiveness, acquisition of socially appropriate behaviors, and the reduction of inappropriate behaviors. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-8)

460 IAC 6-3-9 “Case management services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 9. “Case management services” means services that enable an individual to receive a full range of appropriate services in a planned, coordinated, efficient, and effective manner. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-9)

460 IAC 6-3-10 “Child protection services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1; IC 31-33

Sec. 10. “Child protection services” refers to child protection services established under IC 31-33. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-10)

460 IAC 6-3-11 “Community-based sheltered employment services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 11. “Community-based sheltered employment services” means an agency-operated, work-oriented service consisting of on-going supervision of an individual while the individual is working. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-11)

460 IAC 6-3-12 “Community education and therapeutic activities services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 12. “Community education and therapeutic activities services” means services in the community, such as the following:

- (1) Vocational classes.
- (2) Therapeutic horseback riding.
- (3) Camps.
- (4) Other public events for which there is a separate charge.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-12)

460 IAC 6-3-13 “Community habilitation and participation services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 13. “Community habilitation and participation services” means services outside of an individual’s home that support learning and assistance in any of the following areas:

- (1) Self-care.
- (2) Sensory-motor development.
- (3) Socialization.
- (4) Daily living skills.
- (5) Communication.
- (6) Community living.
- (7) Social skills.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-13)

460 IAC 6-3-14 “Community mental health center” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-7-2-38; IC 12-11-1.1; IC 12-11-2.1

Sec. 14. “Community mental health center” has the meaning set forth in IC 12-7-2-38. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-14)*

460 IAC 6-3-15 “Community mental retardation and other developmental disabilities centers” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-7-2-39; IC 12-11-1.1; IC 12-11-2.1

Sec. 15. “Community mental retardation and other developmental disabilities centers” has the meaning set forth in IC 12-7-2-39. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-15)*

460 IAC 6-3-16 “Crisis assistance services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 16. “Crisis assistance services” means services designed to provide immediate access to short term, intensive services that are needed due to a behavioral or psychiatric emergency. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-16)*

460 IAC 6-3-17 “Developmental disabilities waiver ombudsman” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1; IC 12-11-13

Sec. 17. “Developmental disabilities waiver ombudsman” means the statewide waiver ombudsman described in IC 12-11-13. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-17)*

460 IAC 6-3-18 “Direct care staff” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 18. “Direct care staff” means a person, or an agent or employee of a provider entity, who provides hands-on services to an individual while providing any of the following services:

- (1) Adult day services.
- (2) Adult foster care services.
- (3) Community-based sheltered employment services.
- (4) Community education and therapeutic activities services.
- (5) Community habilitation and participation services.
- (6) Facility-based sheltered employment services.
- (7) Prevocational services.
- (8) Residential habilitation and support services.
- (9) Respite care services.
- (10) Supported employment services.
- (11) Transportation services.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-18)

460 IAC 6-3-19 “Division” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-9-1-1; IC 12-11-1.1; IC 12-11-2.1

Sec. 19. (a) Except for purposes of 460 IAC 6-5-12, “division” means the division of disability, aging, and rehabilitative services created under IC 12-9-1-1.

(b) For purposes of 460 IAC 6-5-12, “division” means the wage and hour division of the United States Department of Labor. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-19)*

460 IAC 6-3-20 “Elopement” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 20. “Elopement” means that an individual leaves, without the authorization or consent of the appropriate provider, the level of supervision identified as appropriate for the individual in the individual’s ISP. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-20)*

460 IAC 6-3-21 “Enhanced dental services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 21. “Enhanced dental services” means services provided to an individual with dental problems, which, if left untreated, would require the individual to be institutionalized. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-21)*

460 IAC 6-3-22 “Entity” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 22. “Entity” means any of the following:

- (1) An association.
- (2) A corporation.
- (3) A limited liability company.
- (4) A governmental entity.
- (5) A partnership.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-22)

460 IAC 6-3-23 “Environmental modification supports” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 23. “Environmental modification supports” means a support that provides an individual with safe access

into and within the individual's home and facilitates independence and self-reliance. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-23)*

460 IAC 6-3-24 "Exploitation" defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1; IC 35-46-1-1

Sec. 24. "Exploitation" means:

(1) unauthorized use of the personal services, the property, or the identity of an individual; or

(2) any other type of criminal exploitation, including exploitation under IC 35-46-1-1;

for one's own profit or advantage or for the profit or advantage of another.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-24)

460 IAC 6-3-25 "Facility-based sheltered employment services" defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 25. "Facility-based sheltered employment services" means employment services provided to an individual that implement the individual's training goals and in which the individual is provided remuneration or other occupational activity. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-25)*

460 IAC 6-3-26 "Family and caregiver training services" defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 26. "Family and caregiver training services" means:

(1) training and education to instruct a parent, family member, or primary caregiver in the treatment regimens and use of equipment specified in an individual's ISP; and

(2) training to improve the ability of the parent, family member or primary caregiver to provide care to or for the individual.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-26)

460 IAC 6-3-27 "Health care coordination services" defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 27. "Health care coordination services" means medical coordination services to manage the health care needs of an individual. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-27)*

460 IAC 6-3-28 "Home health agency" defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1; IC 16-27

Sec. 28. "Home health agency" means an agency licensed under IC 16-27. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-28)*

460 IAC 6-3-29 "Hospital" defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1; IC 16-27-1-2

Sec. 29. "Hospital" means a hospital licensed under IC 16-27-1-2. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-29)*

460 IAC 6-3-30 "Individual" defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 30. “Individual” means an individual with a developmental disability who has been determined eligible for services by a service coordinator pursuant to IC 12-11-2.1-1. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-30)

460 IAC 6-3-31 “Individual community living budget” or “ICLB” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 31. “Individual community living budget” or “ICLB” means the format used by the BDDS to:

(1) uniformly account for all:

(A) service and living costs;

(B) sources and amounts of income and benefits; and

(C) other financial issues;

of an individual; and

(2) approve the allocation of state funding for specified services for the individual.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-31)

460 IAC 6-3-32 “Individualized support plan” or “ISP” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 32. “Individualized support plan” or “ISP” means a plan that establishes supports and strategies intended to accomplish the individual’s long term and short term goals by accommodating the financial and human resources offered to the individual through paid provider services or volunteer services, or both, as designed and agreed upon by the individual’s support team. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-32)

460 IAC 6-3-33 “Integrated setting” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 33. “Integrated setting” means a setting in which at least fifty-one percent (51%) of the persons working in the setting are not disabled, except for the persons providing services under this article. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-33)

460 IAC 6-3-34 “Legal representative” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-10-13-3.3; IC 12-11-1.1; IC 12-11-2.1

Sec. 34 “Legal representative” has the meaning set forth in IC 12-10-13-3.3. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-34)

460 IAC 6-3-35 “Music therapy services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 35. “Music therapy services” means services provided under this article for the systematic application of music in the treatment of the physiological and psychosocial aspects of an individual’s disability and focusing on the acquisition of nonmusical skills and behaviors. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-35)

460 IAC 6-3-36 “Neglect” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 36. “Neglect” means failure to provide supervision, training, appropriate care, food, medical care, or

medical supervision to an individual. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-36)*

460 IAC 6-3-37 “Nutritional counseling services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 37. “Nutritional counseling services” means services provided under this article by a licensed dietitian. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-37)*

460 IAC 6-3-38 “Occupational therapy services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 38. “Occupational therapy services” means services provided under this article by a licensed occupational therapist. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-38)*

460 IAC 6-3-39 “Personal emergency response system supports” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 39. “Personal emergency response system supports” means an electronic communication device that allows an individual to communicate the need for immediate assistance in case of an emergency. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-39)*

460 IAC 6-3-40 “Physical therapy services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 40. “Physical therapy services” means services provided under this article by a licensed physical therapist. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-40)*

460 IAC 6-3-41 “Prevocational services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 41. “Prevocational services” means services aimed at preparing an individual for paid or unpaid employment, by teaching such concepts as compliance, attendance, task completion, problem solving, and safety. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-41)*

460 IAC 6-3-42 “Provider” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 42. “Provider” means a person or entity approved by the BDDS to provide the individual with agreed upon services. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-42)*

460 IAC 6-3-43 “Psychological therapy services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 43. “Psychological therapy services” means services provided under this article by a licensed psychologist. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-43)*

460 IAC 6-3-44 “Recreational therapy services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 44. “Recreational therapy services” means services provided under this article and consisting of a medically approved recreational program to restore, remediate, or rehabilitate an individual in order to:

- (1) improve the individual’s functioning and independence; and**
- (2) reduce or eliminate the effects of an individual’s disability.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-44)

460 IAC 6-3-45 “Rent and food for an unrelated live-in caregiver supports” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 45. “Rent and food for an unrelated live-in caregiver supports” means the additional cost an individual incurs for the room and board of an unrelated, live-in caregiver as provided for in the individual’s ICLB.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-45)

460 IAC 6-3-46 “Reportable incident” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 46. “Reportable incident” refers to incidents described in 460 IAC 6-9-5. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-46)*

460 IAC 6-3-47 “Residential-based habilitation and support services” defined

Authority: IC 12-8-8-4; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 47. “Residential-based habilitation and support services” means services that are designed to ensure the health, safety, and welfare of an individual, and assist in the acquisition, improvement, and retention of skills necessary for the individual to live successfully in the individual’s own home. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-47)*

460 IAC 6-3-48 “Residential living allowance” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1-2; IC 12-11-2.1

Sec. 48. “Residential living allowance” means funds authorized by the BDDS services under IC 12-11-1.1-2(c) to cover the actual costs of room and board expenses as authorized in the individual’s ICLB. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-48)*

460 IAC 6-3-49 “Residential living allowance management services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 49. “Residential living allowance management services” means services that assist an individual in managing the individual’s residential living allowance supports. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-49)*

460 IAC 6-3-50 “Respite care services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 50. “Respite care services” means services provided to individuals unable to care for themselves that are furnished on a short term basis because of the absence or need for relief of those persons normally providing care. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-50)*

460 IAC 6-3-51 Secretary

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-8-1-2; IC 12-11-1.1; IC 12-11-2.1

Sec. 51. “Secretary” means the secretary of family and social services appointed under IC 12-8-1-2. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-51)*

460 IAC 6-3-52 “Specialized medical equipment and supplies supports” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 52. (a) “Specialized medical equipment and supplies supports” means devices, controls, or appliances that:

(1) enable an individual to increase the individual’s abilities to:

(A) perform activities of daily living; or

(B) perceive or control the environment; or

(2) enhance an individual’s ability to communicate.

(b) The term includes the following:

(1) Communication devices.

(2) Interpreter services.

(3) Items necessary for life support.

(4) Ancillary supplies and equipment necessary for the proper functioning of such items.

(5) Durable and nondurable medical equipment.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-52)

460 IAC 6-3-53 “Speech and language therapy services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 53. “Speech and language therapy services” means services provided by a licensed speech pathologist under this article. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-53)*

460 IAC 6-3-54 “Support team” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 54. “Support team” means a team of persons, including an individual, the individual’s legal representative, if applicable, the individual’s providers, provider of case management services, and other persons who:

(1) are designated by the individual;

(2) know and work with the individual; and

(3) participate in the development and implementation of the individual’s ISP.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-54)

460 IAC 6-3-55 “Supported employment services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 55. “Supported employment services” means services that support and enable an individual to secure and maintain paid employment if the individual is paid at or above the federal minimum wage. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-55)*

460 IAC 6-3-56 “Transportation services” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 56. “Transportation services” means services for the transportation of an individual in a vehicle by a provider approved under this article to provide transportation services. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-56)*

460 IAC 6-3-57 “Transportation supports” defined

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 57. “Transportation supports” means supports, such as tickets and passes to ride on public transportation systems, that enable an individual to have transportation for access to the community. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-3-57)

Rule 4. Types of Supported Living Services and Supports

460 IAC 6-4-1 Types of supported living services and supports

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. Supported living services and supports include the following:

- (1) Adult day services.**
- (2) Adult foster care services.**
- (3) Behavioral support services.**
- (4) Case management services.**
- (5) Community-based sheltered employment services.**
- (6) Community education and therapeutic activity services.**
- (7) Community habilitation and participation services.**
- (8) Crisis assistance services.**
- (9) Enhanced dental services.**
- (10) Environmental modification supports.**
- (11) Facility-based sheltered employment services.**
- (12) Family and caregiver training services.**
- (13) Health care coordination services.**
- (14) Music therapy services.**
- (15) Nutritional counseling services.**
- (16) Occupational therapy services.**
- (17) Personal emergency response system supports.**
- (18) Physical therapy services.**
- (19) Prevocational services.**
- (20) Psychological therapy services.**
- (21) Recreational therapy services.**
- (22) Rent and food for unrelated live-in caregiver supports.**
- (23) Residential habilitation and support services.**
- (24) Residential living allowance and management services.**
- (25) Respite care services.**
- (26) Specialized medical equipment and supplies supports.**
- (27) Speech-language therapy services.**
- (28) Supported employment services.**
- (29) Transportation services.**
- (30) Transportation supports.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-4-1)

Rule 5. Provider Qualifications

460 IAC 6-5-1 Applicability

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. This rule applies to all supported living services and supports. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-1)

460 IAC 6-5-2 Adult day services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. To be approved to provide adult day services, an applicant shall be an approved adult day service provider for Medicaid waiver in-home services. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-2*)

460 IAC 6-5-3 Adult foster care services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 3. To be approved to provide adult foster care services, an applicant shall:

- (1) be an entity approved to provide supported living services under this article; and**
- (2) certify that, if approved, the entity will provide adult foster care services using only persons who meet the qualifications set out in 460 IAC 6-14-5.**

(*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-3*)

460 IAC 6-5-4 Behavioral support services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1; IC 25-33-1-5.1

Sec. 4. (a) To be approved to provide behavioral support services as a Level 1 clinician, an applicant shall meet the following requirements:

- (1) Be a licensed psychologist under IC 25-33 and have an endorsement as a health service provider in psychology pursuant to IC 25-33-1-5.1(c); or**
- (2) Have:**
 - (A) at least a master's degree in:**
 - (i) a behavioral science;**
 - (ii) special education; or**
 - (iii) social work; and**
 - (B) evidence of five (5) years of experience in:**
 - (i) working directly with individuals with developmental disabilities, including the devising, implementing, and monitoring of behavioral support plans; and**
 - (ii) the supervision and training of others in the implementation of behavioral support plans.**

(b) To be approved to provide behavioral support services as a Level 2 clinician, an applicant shall meet the following requirements:

- (1) Either:**
 - (A) have a master's degree in:**
 - (i) psychology;**
 - (ii) special education; or**
 - (iii) social work; or**
 - (B) meet all of the following requirements:**
 - (i) Have a bachelor's degree in psychology.**
 - (ii) Be employed as a behavioral consultant on or before September 30, 2001, by a provider of behavioral support services approved under this article.**
 - (iii) Be working on a master's degree in psychology, special education, or social work.**
 - (iv) By December 31, 2006, complete a master's degree in psychology, special education, or social work.**
- (2) Be supervised by a Level 1 clinician.**

(c) To maintain approval as a behavioral support services provider, a behavioral support services provider shall:

- (1) obtain annually at least ten (10) continuing education hours related to the practice of behavioral support:**
 - (A) from a Category I sponsor as provided in 868 IAC 1.1-15; or**

- (B) as provided by the BDDS's behavioral support curriculum list; or
- (2) be enrolled in:
 - (A) a master's level program in psychology, special education, or social work; or
 - (B) a doctoral program in psychology.

(d) For an entity to be approved to provide behavioral support services, the entity shall certify that, if approved, the entity shall provide Level 1 clinician behavioral support services or Level 2 clinician behavioral support services using only persons who meet the qualifications set out in this section.

(e) The provisions in subsection (b)(1)(B) expire on December 31, 2006. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-4)*

460 IAC 6-5-5 Case management services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1; IC 25-23-1

Sec. 5. (a) To be approved to provide case management services, an applicant shall meet the following requirements:

- (1) Have a bachelor's degree, be a registered nurse licensed under IC 25-23-1, or be employed by the state in a PAT III position.
- (2) Meet the experience requirements for a qualified mental retardation professional in 42 CFR 483.430(a).
- (3) Complete a course of case management orientation that is approved by the BDDS.

(b) For an entity to be approved to provide case management services, the entity shall certify that, if approved, the entity will provide case management services using only persons who meet the qualifications set out in this section. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-5)*

460 IAC 6-5-6 Community-based sheltered employment services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 6. To be approved to provide community-based sheltered employment services, an applicant shall meet the following requirements:

- (1) Be an entity.
- (2) Be accredited by one (1) of following organizations:
 - (A) The Commission on Accreditation of Rehabilitation Facilities (CARF) or its successor.
 - (B) The Council on Quality and Leadership in Supports for People with Disabilities or its successor.
 - (C) The Joint Commission on Accreditation of Healthcare Organizations (JACHO) or its successor.
 - (D) The National Commission on Quality Assurance or its successor.
 - (E) An independent national accreditation organization approved by the secretary.
- (3) Be a not-for-profit entity.
- (4) Certify that, if approved, the entity will provide community-based sheltered employment services using only persons who meet the qualifications set out in 460 IAC 6-14-5.
- (5) Not be a community mental health center.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-6)

460 IAC 6-5-7 Community education and therapeutic activity services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 7. To be approved to provide community education and therapeutic activities services, an applicant shall be approved under this article to provide either:

- (1) residential habilitation and support services; or
- (2) community habilitation and participation services.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-7)

460 IAC 6-5-8 Community habilitation and participation services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 8. (a) To be approved to provide community habilitation and participation services, an applicant shall meet the requirements for direct care staff set out in 460 IAC 6-14-5.

(b) For an entity to be approved to provide community habilitation and participation services, the entity shall certify that, if approved, the entity will provide community habilitation and support services using only persons who meet the qualifications set out in 460 IAC 6-14-5. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-8)*

460 IAC 6-5-9 Crisis assistance services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 9. To be approved to provide crisis assistance services, an applicant shall be approved to provide behavioral support services under this article. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-9)*

460 IAC 6-5-10 Enhanced dental services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1; IC 25-14

Sec. 10. (a) To be approved to provide enhanced dental services, an applicant shall be a dentist licensed under IC 25-14.

(b) For an entity to be approved to provide enhanced dental services, the entity shall certify that, if approved, the entity will provide enhanced dental services using only persons who meet the qualifications set out in this section. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-10)*

460 IAC 6-5-11 Environmental modification supports provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 11. To be approved to provide environmental modification supports, an applicant shall:

- (1) be licensed, certified, registered, or otherwise properly qualified under federal, state, or local laws applicable to the particular service that the applicant desires to perform; and
- (2) certify that, if approved, the applicant will perform the services in compliance with federal, state, or local laws applicable to the type of modification being made.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-11)

460 IAC 6-5-12 Facility-based sheltered employment services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 12. To be approved to provide facility-based sheltered employment services, an applicant shall meet the following requirements:

- (1) Be an entity.
- (2) Be accredited, or provide proof of an application to seek accreditation, by one (1) of the following organizations:
 - (A) The Commission on Accreditation of Rehabilitation Facilities (CARF) or its successor.
 - (B) The Council on Quality and Leadership in Supports for People with Disabilities or its successor.
 - (C) The Joint Commission on Accreditation of Healthcare Organizations (JACHO) or its successor.
 - (D) The National Commission on Quality Assurance or its successor.
 - (E) An independent national accreditation organization approved by the secretary.

(3) Be a not-for-profit entity.

(4) Have sheltered workshop certification from the wage and hour division of the United States Department of Labor.

(5) Certify that, if approved, the entity will provide services using only persons who meet the qualifications set out in 460 IAC 6-14-5.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-12)

460 IAC 6-5-13 Family and caregiver training services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 13. To be approved to provide family and caregiver training services, an applicant shall be approved to provide either:

(1) community habilitation and participation services; or

(2) residential habilitation and support services;

under this article. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-13)*

460 IAC 6-5-14 Health care coordination services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1; IC 25-23-1

Sec. 14. (a) To be approved to provide health care coordination services, an applicant shall be either a registered nurse or licensed practical nurse under IC 25-23-1.

(b) For an entity to be approved to provide health care coordination services, the entity shall certify that, if approved, the entity will provide health care coordination services using only persons who meet the qualifications set out in this section. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-14)*

460 IAC 6-5-15 Music therapy services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 15. (a) To be approved to provide music therapy services, an applicant shall be certified by the National Association of Music Therapists.

(b) For an entity to be approved to provide music therapy services, the entity shall certify that, if approved, the entity will provide music therapy services using only persons who meet the qualifications set out in this section. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-15)*

460 IAC 6-5-16 Nutritional counseling services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1; IC 25-14.5

Sec. 16. (a) To be approved to provide nutritional counseling services, an applicant shall be a dietitian certified under IC 25-14.5.

(b) For an entity to be approved to provide nutritional counseling services, the entity shall certify that, if approved, the entity will provide nutritional counseling services using only persons who meet the qualifications set out in this section. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-16)*

460 IAC 6-5-17 Occupational therapy services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1; IC 25-23.5-1-5.5; IC 25-23.5-5

Sec. 17. (a) To be approved to provide occupational therapy services as an occupational therapist, an applicant shall be an occupational therapist certified under IC 25-23.5.

(b) To be approved to provide occupational therapy services as an occupational therapy assistant, an applicant shall be certified under IC 25-23.5-5.

(c) To be approved to provide occupational therapy services as an occupational therapy aide, an applicant shall meet the requirements of IC 25-23.5-1-5.5 and 844 IAC 10-6.

(d) For an entity to be approved to provide occupational therapy services, the entity shall certify that, if approved, the entity will provide occupational therapy services using only persons who meet the qualifications set out in this section. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-17)*

460 IAC 6-5-18 Personal emergency response system supports provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 18. To be approved to provide personal emergency response system supports, an applicant shall:

(1) be licensed, certified, registered, or otherwise properly qualified under federal, state, or local laws applicable to the particular service that the applicant desires to perform; and

(2) certify that, if approved, the applicant will perform the services in compliance with federal, state, or local laws applicable to a personal emergency response system.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-18)

460 IAC 6-5-19 Physical therapy services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1; IC 25-27-1

Sec. 19. (a) To be approved to provide physical therapy services as a physical therapist, an applicant shall be a physical therapist licensed under IC 25-27-1.

(b) To be approved to provide physical therapy services as a physical therapist's assistant, an applicant shall be certified under IC 25-27-1.

(c) For an entity to be approved to provide physical therapy services, the entity shall certify that, if approved, the entity will provide physical therapy services using only persons who meet the qualifications set out in this section. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-19)*

460 IAC 6-5-20 Prevocational services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 20. (a) To be approved to provide prevocational services, an applicant shall meet the requirements for direct care staff set out in 460 IAC 6-14-5.

(b) For an entity to be approved to provide prevocational services, the entity shall certify that, if approved, the entity will provide prevocational services using only persons who meet the qualification set out in 460 IAC 6-14-5. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-20)*

460 IAC 6-5-21 Psychological therapy services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1; IC 25-22.5; IC 25-23.6; IC 25-33-1

Sec. 21. (a) To be approved to provide psychological therapy services, an applicant shall be:

(1) a psychologist licensed under IC 25-33-1;

(2) a marriage and family therapist licensed under IC 25-23.6, IC 25-22.5, or IC 25-33;

(3) a clinical social worker licensed under IC 25-23.6; or

(4) a mental health counselor licensed under IC 25-23.6.

(b) For an entity to be approved to provide psychological therapy services, the entity shall certify that, if approved, the entity will provide psychological therapy services using only persons who meet the qualifications set out in this section. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-21)*

460 IAC 6-5-22 Recreational therapy services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 22. (a) To be approved to provide recreational therapy services, an applicant shall be certified by the national council for therapeutic recreation certification.

(b) To be approved to provide recreational therapy services, an entity shall certify that, if approved, the entity will provide recreational therapy services using only persons who meet the qualifications set out in this section. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-22)*

460 IAC 6-5-23 Rent and food for unrelated live-in caregiver supports provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 23. To be approved to provide rent and food for unrelated live-in caregiver supports, an applicant shall be approved to provide:

(1) community habilitation and participation services; or

(2) residential habilitation and support services;

under this article. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-23)*

460 IAC 6-5-24 Residential habilitation and support services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 24. (a) To be approved to provide residential habilitation and support services, an applicant shall meet the requirements for direct care staff set out in 460 IAC 6-14-5.

(b) In order an entity to be approved to provide residential habilitation and support services, the entity shall certify that, if approved, the entity will provide residential habilitation and support services using only persons who meet the qualifications set out in 460 IAC 6-14-5. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-24)*

460 IAC 6-5-25 Residential living allowance and management services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 25. To be approved to provide residential living allowance and management services, an applicant shall be approved to provide either:

(1) residential habilitation and support services; or

(2) community habilitation and participation services;

under this article. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-25)*

460 IAC 6-5-26 Respite care services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 26. (a) To be approved to provide respite care services, an applicant shall meet the requirements for direct care staff set out in 460 IAC 6-14-5.

(b) For an entity to be approved to provide respite care services, the entity shall meet both of the following requirements:

(1) Be one (1) of the following types of entities:

(A) A home health agency.

(B) An approved adult day service provider under this article.

(C) An entity providing residential services to unrelated individuals.

(2) Certify that, if approved, the entity will provide respite care services using only persons who meet the direct care staff qualifications set out in 460 IAC 6-14-5.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-26)

460 IAC 6-5-27 Specialized medical equipment and supplies supports provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 27. To be approved to provide specialized medical equipment and supplies supports, an applicant shall:

(1) be licensed, certified, registered, or otherwise properly qualified under federal, state, or local laws applicable to the particular service that the applicant desires to perform; and

(2) certify that, if approved, the applicant will perform the services in compliance with federal, state, or local laws applicable to the type of equipment and supplies being provided.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-27)

460 IAC 6-5-28 Speech-language therapy services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1; IC 25-35.6-1-2

Sec. 28. (a) To be approved to provide speech-language therapy services as a speech-language pathologist, an applicant shall be a speech-language pathologist licensed under IC 25-35.6.

(b) To be approved to provide speech language therapy services as a speech-language pathology aide, an applicant shall be:

(1) a speech-language pathology aide as defined in IC 25-35.6-1-2; and

(2) registered pursuant to 880 IAC 1-2.

(c) For an entity to be approved to provide speech-language therapy services, the entity shall certify that, if approved, the entity will provide speech-language therapy services using only persons who meet the qualifications set out in this section. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-28)*

460 IAC 6-5-29 Supported employment services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 29. To be approved to provide supported employment services, an applicant shall meet the following requirements:

(1) Be accredited by, or provide proof of an application to seek accreditation from, one (1) of the following organizations:

(A) The Commission on Accreditation of Rehabilitation Facilities (CARF) or its successor.

(B) The Council on Quality and Leadership in Supports for People with Disabilities or its successor.

(C) The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) or its successor.

(D) The National Commission on Quality Assurance or its successor.

(E) An independent national accreditation organization approved by the secretary.

(2) Certify that, if approved, the applicant will provide services using only persons who meet the qualifications set out in 460 IAC 6-14-5.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-29)

460 IAC 6-5-30 Transportation services provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1; IC 12-17.2-2-4

Sec. 30. (a) To be approved to provide transportation services, an applicant shall be one (1) of the following:

- (1) A community mental retardation and other developmental disabilities centers.**
- (2) A community mental health center.**
- (3) A child care center licensed pursuant to IC 12-17.2-2-4.**
- (4) Otherwise approved under this rule.**

(b) To be approved to provide transportation services, an applicant shall certify that, if approved, transportation services will be provided using only persons having a valid Indiana:

- (1) operator's license;**
- (2) chauffeur's license;**
- (3) public passenger chauffeur's license; or**
- (4) commercial driver's license;**

issued to the person by the Indiana bureau of motor vehicles to drive the type of motor vehicle for which the license was issued. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-30*)

460 IAC 6-5-31 Transportation supports provider qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 31. To be approved to provide transportation supports, an applicant shall be otherwise approved to provide supported living services under this article. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-5-31*)

Rule 6. Application and Approval Process

460 IAC 6-6-1 Applicability

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. This rule applies to all supported living services and supports. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-6-1*)

460 IAC 6-6-2 Initial application

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. To receive initial approval as a supported living services or supports provider, an applicant shall submit the following for each supported living service or support for which the applicant is seeking to be an approved provider:

- (1) An application on a form prescribed by the BDDS.**
- (2) Evidence that the provider meets the qualifications for each supported living service or support that the provider is seeking to be approved to provide as specified in this article.**
- (3) Supporting documents specified on the application form to demonstrate the applicant's programmatic, financial and managerial ability to provide supported living services or supports as set out in this article.**
- (4) A written and signed statement that the applicant will comply with the provisions of this article.**
- (5) A written and signed statement that the applicant will provide services to an individual as set out in the individual's ISP.**

(*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-6-2*)

460 IAC 6-6-3 Action on application

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 4-21.5; IC 12-11-1.1; IC 12-11-2.1

Sec. 3. (a) The BDDS shall determine whether an applicant meets the requirements under this article.

(b) Upon review of an initial application, the BDDS shall either:

- (1) approve the applicant for a period not to exceed (3) years; or
- (2) deny approval to an applicant that does not meet the approval requirements of this article.

(c) The BDDS shall notify an applicant in writing of the BDDS's determination within sixty (60) days of submission of a completed application.

(d) If an applicant is adversely affected or aggrieved by the BDDS's determination, the applicant may request administrative review of the determination. Such request shall be made in writing and filed with the director of the division within fifteen (15) days after the applicant receives written notice of the BDDS's determination. Administrative review shall be conducted pursuant to IC 4-21.5. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-6-3*)

460 IAC 6-6-4 Additional approvals; community residential facilities council

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1; IC 12-28-5-11

Sec. 4. Before beginning to provide supported living services or supports under this article, a provider shall also be approved by the community residential facilities council pursuant to IC 12-28-5-11. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-6-4*)

460 IAC 6-6-5 Renewal of approval

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 4-21.5; IC 12-11-1.1; IC 12-11-2.1

Sec. 5. (a) A provider of supported living services or supports shall file a written request for renewal of the BDDS's approval at least ninety (90) days prior to expiration of the BDDS's previous approval.

(b) Upon receiving a request for renewal of approved status, the BDDS shall determine whether a provider continues to meet the requirements of this article.

(c) The BDDS's determination on renewal of approval shall be based on verification that:

- (1) the provider's operations have been surveyed either:
 - (A) within the preceding twelve (12) months; or
 - (B) as part of the renewal process; and
- (2) there are no outstanding issues that seriously endanger the health or safety of an individual receiving services from the provider.

(d) In considering a request for the renewal of approval, the BDDS shall either:

- (1) approve the applicant for a period not to exceed three (3) years; or
- (2) deny approval to an applicant that does not meet the approval requirements of this article.

(e) The BDDS shall notify a provider in writing of the BDDS's determination at least thirty (30) days prior to the expiration of the provider's approval under this section.

(f) If a provider is adversely affected or aggrieved by the BDDS's determination, the provider may request administrative review of the determination. The request shall be made in writing and filed with the director of the division within fifteen (15) days after the provider receives written notice of the determination. Administrative review shall be conducted pursuant to IC 4-21.5. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-6-5*)

460 IAC 6-6-6 Application to provide additional services

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 6. (a) A provider seeking approval to provide an additional supported living service or support shall

comply with section 2 of this rule.

(b) Approval to provide additional supported living services or supports shall be granted by the BDDS only if:

- (1) the provider's operations have been surveyed either:
 - (A) within the preceding twelve (12) months; or
 - (B) as part of the approval process to provide additional services; and
- (2) there are no outstanding issues that seriously endanger the health or safety of an individual.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-6-6)

Rule 7. Monitoring; Sanctions; Administrative Review

460 IAC 6-7-1 Applicability

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. This rule applies to all supported living services and supports. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-7-1)*

460 IAC 6-7-2 Monitoring; corrective action

Authority: IC 12-8-4-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. (a) The BDDS shall monitor compliance with the requirements of this article at the following times:

- (1) At least annually.
- (2) Upon receiving a complaint or report alleging a provider's noncompliance with the requirements of this article.

(b) The BDDS shall monitor compliance with the requirements of this article through any of the following means:

- (1) Requesting and obtaining information from the provider.
- (2) Site inspections.
- (3) Meeting with an individual or the individual's legal representative as applicable.
- (4) Review of provider records and the records of an individual.
- (5) Follow-up inspection as is reasonably necessary to determine compliance after the BDDS has requested a corrective action plan.

(c) After any site inspection, the BDDS shall issue a written report. The report shall:

- (1) be prepared by the BDDS or its designee;
- (2) document the findings made during monitoring;
- (3) identify necessary corrective action;
- (4) identify the time period in which a corrective action plan shall be completed by the provider;
- (5) identify any documentation needed from the provider to support the provider's completion of the corrective action plan; and
- (6) be submitted to the provider.

(d) A provider shall:

- (1) complete a corrective action plan to the reasonable satisfaction of the BDDS or its designee within the time period identified in the corrective action plan, or within such longer time period agreed to by the BDDS or its designee and the provider;
- (2) notify the BDDS or its designee upon the completion of a corrective action plan; and
- (3) provide the BDDS or its designee with any requested documentation.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-7-2)

460 IAC 6-7-3 Effect of noncompliance; notice

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 4-21.5; IC 12-11-1.1; IC 12-11-2.1

Sec. 3. (a) If a provider does not comply with the requirements of this article and does not complete a corrective action plan to the reasonable satisfaction of the BDDS or its designee within the time allowed, the BDDS shall not authorize:

- (1) the continuation of services to an individual or individuals by the provider, if the services do not comply with this article; or**
- (2) the receipt of services by individuals not already receiving services from the provider at the time the determination is made that the provider did not implement a corrective action plan to the reasonable satisfaction of the BDDS or its designee.**

(b) After an acceptable corrective plan of action has been submitted to the BDDS, the BDDS shall monitor the provider's compliance with the corrective action plan. If the BDDS determines that the provider has not implemented the corrective plan of action, the BDDS shall not authorize:

- (1) the continuation of services to an individual or individuals by the provider, if the services do not comply with this article; or**
- (2) the receipt of services by individuals not already receiving services from the provider at the time the determination is made that the provider did not submit a corrective action plan to the reasonable satisfaction of the BDDS or its designee.**

(c) The BDDS shall give written notice of the BDDS's action under subsection (a) or (b) to:

- (1) the provider;**
- (2) the individual receiving service from the provider; and**
- (3) the individual's legal representative if applicable.**

(d) The written notice under subsection (c) shall include the following:

- (1) The requirements of this article with which the provider has not complied.**
- (2) The effective date, with at least thirty (30) days' notice, of the BDDS's action under subsection (a).**
- (3) The need for planning to obtain services that comply with this article for an individual or individuals.**
- (4) The provider's right to seek administrative review of the BDDS's action.**

(Division of Disability, Aging and Rehabilitative Services; 460 IAC 6-7-3)

460 IAC 6-7-4 Serious endangerment of individual's health and safety

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 4-21.5; IC 12-11-1.1; IC 12-11-2.1

Sec. 4. (a) If a provider's noncompliance with this article seriously endangers the health or safety of an individual such that an emergency exists, as determined by the BDDS or its designee, the BDDS may enter an order for any of the following:

- (1) Termination of continued authorization for the provider to serve any individual whose health or safety is being seriously endangered.**
- (2) Denial of authorization for the receipt of services by individuals not already receiving services from the provider at the time the BDDS determines that a provider's noncompliance with this article endangers the health or safety of an individual.**
- (3) Termination of continued authorization for the provider to provide any services under this article.**

(b) Any action taken pursuant to subsection (a) shall remain in effect until such time as the BDDS or its designee determines that the provider's noncompliance with this article is no longer endangering the health and safety of an individual.

(c) The BDDS shall give written notice of an order under subsection (a) to:

- (1) the provider;**
- (2) the individual receiving service from the provider; and**
- (3) the individual's legal representative as applicable.**

(d) The written notice under subsection (a) shall include the following:

- (1) The requirements of this article with which the provider has not complied.
- (2) A brief statement of the facts and the law leading to the BDDS's determination that an emergency exists.
- (3) The need to immediately obtain services that comply with this article for an individual or individuals.
- (4) The provider's right to seek administrative review of the BDDS's action.

(e) The order issued under subsection (a) shall expire:

- (1) on the date the BDDS determines that an emergency no longer exists; or
- (2) in ninety (90) days;

whichever is less.

(f) During the pendency of any related proceedings under IC 4-21.5, the BDDS may renew an emergency order for successive ninety (90) day periods. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-7-4)*

460 IAC 6-7-5 Revocation of approval

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 5. The BDDS shall revoke the approval of a provider under this rule for the following reasons:

- (1) The provider's repeated noncompliance with this article.
- (2) The provider's continued noncompliance with this article.
- (3) The provider's noncompliance with this article that seriously endangers the health or safety of an individual.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-7-5)

460 IAC 6-7-6 Administrative review

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 4-21.5; IC 12-11-1.1; IC 12-11-2.1

Sec. 6. (a) To qualify for administrative review of an action or determination of the BDDS under this rule, a provider shall file a written petition for review that does the following:

- (1) States facts demonstrating that the provider is:
 - (A) a provider to whom the action is specifically directed;
 - (B) aggrieved or adversely affected by the action; or
 - (C) entitled to review under any law.
- (2) Is filed with the director of the division of disability, aging, and rehabilitative services within fifteen (15) days after the provider receives notice of the agency action or determination.

(b) Administrative review shall be conducted in accordance with IC 4-21.5. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-7-6)*

Rule 8. Rights of Individuals

460 IAC 6-8-1 Applicability

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. This rule applies to all supported living services and supports. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-8-1)*

460 IAC 6-8-2 Constitutional and statutory rights

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1; IC 12-27

Sec. 2. (a) A provider shall ensure that an individual's rights as guaranteed by the Constitution of the United States and the Constitution of Indiana are not infringed upon.

(b) A provider shall ensure that:

(1) an individual's rights as set out in IC 12-27 are not infringed upon; and

(2) an individual has the ability to exercise those rights as provided in IC 12-27.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-8-2)

460 IAC 6-8-3 Promoting the exercise of rights

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 3. To protect an individual's rights and enable an individual to exercise the individual's rights, a provider shall do the following:

(1) Provide an individual with humane care and protection from harm.

(2) Provide services that:

(A) are meaningful and appropriate; and

(B) comply with:

(i) standards of professional practice;

(ii) guidelines established by accredited professional organizations if applicable; and

(iii) budgetary constraints;

in a safe, secure, and supportive environment.

(3) Obtain written consent from an individual, or the individual's legal representative, if applicable, before releasing information from the individual's records unless the person requesting release of the records is authorized by law to receive the records without consent.

(4) Process and make decisions regarding complaints filed by an individual within two (2) weeks after the provider receives the complaint.

(5) Inform an individual, in writing and in the individual's usual mode of communication, of:

(A) the individual's constitutional and statutory rights using a form approved by the BDDS; and

(B) the complaint procedure established by the provider for processing complaints.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-8-3)

Rule 9. Protection of an Individual

460 IAC 6-9-1 Applicability

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. This rule applies to all supported living services and supports. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-9-1)*

460 IAC 6-9-2 Adoption of policies and procedures to protect individuals

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. (a) A provider shall adopt written policies and procedures regarding the requirements of sections 3 and 4 of this rule.

(b) A provider shall require the provider's employees or agents to be familiar with and comply with the policies and procedures required by subsection (a).

(c) Beginning on the date services for an individual commence and at least one (1) time a year thereafter, a provider shall inform:

(1) the individual, in writing and in the individual's usual mode of communication;

(2) the individual's parent, if the individual is less than eighteen (18) years of age, or if the individual's parent is the individual's legal representative; and

(3) the individual's legal representative if applicable;

of the policies and procedures adopted pursuant to this section. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-9-2)*

Services; 460 IAC 6-9-2)

460 IAC 6-9-3 Prohibiting violations of individual rights

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 3. (a) A provider shall not:

- (1) abuse, neglect, exploit, or mistreat an individual; or
- (2) violate an individual's rights.

(b) A provider who delivers services through employees or agents shall adopt policies and procedures that prohibit:

- (1) abuse, neglect, exploitation, or mistreatment of an individual; or
- (2) violation of an individual's rights.

(c) Practices prohibited under this section include the following:

(1) Corporal punishment inflicted by the application of painful stimuli to the body, which includes:

- (A) forced physical activity;
- (B) hitting;
- (C) pinching;
- (D) the application of painful or noxious stimuli;
- (E) the use of electric shock; or
- (F) the infliction of physical pain.

(2) Seclusion by placing an individual alone in a room or other area from which exit is prevented.

(3) Verbal abuse, including screaming, swearing, name-calling, belittling, or other verbal activity that may cause damage to an individual's self-respect or dignity.

(4) A practice that denies an individual any of the following without a physician's order:

- (A) Sleep.
- (B) Shelter.
- (C) Food.
- (D) Drink.
- (E) Physical movement for prolonged periods of time.
- (F) Medical care or treatment.
- (G) Use of bathroom facilities.

(5) Work or chores benefiting others without pay unless:

- (A) the provider has obtained a certificate from the United States Department of Labor authorizing the employment of workers with a disability at special minimum wage rates;
- (B) the services are being performed by an individual in the individual's own residence as a normal and customary part of housekeeping and maintenance duties; or
- (C) an individual desires to perform volunteer work in the community.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-9-3)

460 IAC 6-9-4 Systems for protecting individuals

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 4. (a) Except as specified in this section, this section applies to all providers of supported living services and supports.

(b) A provider shall require that at regular intervals, as specified by the individual's ISP, the individual be informed of the following:

- (1) The individual's medical condition.
- (2) The individual's developmental and behavioral status.
- (3) The risks of treatment.
- (4) The individual's right to refuse treatment.

(c) Except for providers of:

- (1) occupational therapy services;
- (2) physical therapy services;
- (3) music therapy services; and
- (4) speech-language therapy services;

a provider shall establish a protocol for ensuring that an individual is free from unnecessary medications and physical restraints.

(d) Except for providers of:

- (1) occupational therapy services;
- (2) physical therapy services;
- (3) music therapy services; and
- (4) speech-language therapy services;

a provider shall establish a system to reduce an individual's dependence on medications and physical restraints.

(e) A provider shall establish a system to ensure that an individual has the opportunity for personal privacy.

(f) A provider shall establish a system to:

- (1) ensure that an individual is not compelled to perform services for a provider; and
- (2) provide that, if an individual works voluntarily for a provider, the individual is compensated:
 - (A) at the prevailing wage for the job; and
 - (B) commensurate with the individual's abilities;

unless the provisions of section 3(c)(5) of this rule are met.

(g) A provider shall establish a system that ensures that an individual has:

- (1) the opportunity to communicate, associate, and meet privately with persons of the individual's choosing;
- (2) the means to send and receive unopened mail; and
- (3) access to a telephone with privacy for incoming and outgoing local and long distance calls at the individual's expense.

(h) A provider shall establish a system for providing an individual with the opportunity to participate in social, religious, and community activities.

(i) A provider shall establish a system that ensures that an individual has the right to retain and use appropriate personal possessions and clothing.

(j) A provider shall establish a system for protecting an individual's funds and property from misuse or misappropriation.

(k) A provider shall establish a protocol specifying the responsibilities of the provider for:

- (1) conducting an investigation; or
- (2) participating in an investigation;

of an alleged violation of an individual's rights or a reportable incident. The system shall include taking all immediate necessary steps to protect an individual who has been the victim of abuse, neglect, exploitation, or mistreatment from further abuse, neglect, exploitation, or mistreatment.

(l) A provider shall establish a system providing for:

- (1) administrative action against;
- (2) disciplinary action against; and
- (3) dismissal of;

an employee or agent of the provider, if the employee or agent is involved in the abuse, neglect, exploitation, or mistreatment of an individual or a violation of an individual's rights.

(m) A provider shall establish a written procedure for employees or agents of the provider to report violations

of the provider's policies and procedures to the provider.

(n) A provider shall establish a written procedure for the provider or for an employee or agent of the provider for informing:

- (1) adult protective services or child protection services, as applicable;
 - (2) an individual's legal representative, if applicable;
 - (3) any person designated by the individual; and
 - (4) the provider of case management services to the individual;
- of a situation involving the abuse, neglect, exploitation, mistreatment of an individual, or the violation of an individual's rights.

(o) A provider shall establish a written protocol for reporting reportable incidents to the BDDS as required by section 5 of this rule. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-9-4*)

460 IAC 6-9-5 Incident reporting

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 5. (a) An incident described as follows shall be reported to the BDDS on the incident report form prescribed by the BDDS:

- (1) Alleged, suspected, or actual abuse, neglect, or exploitation of an individual. An incident in this category shall also be reported to adult protective services or child protection services as applicable. The provider shall suspend staff involved in an incident from duty pending investigation by the provider.
- (2) Death of an individual. A death shall also be reported to adult protective services or child protection services as applicable.
- (3) A service delivery site that compromises the health and safety of an individual while the individual is receiving services from the following causes:
 - (A) A significant interruption of a major utility, such as electricity, heat, water, air conditioning, plumbing, fire alarm, or sprinkler system.
 - (B) Environmental or structural problems associated with a habitable site that compromise the health and safety of an individual, including:
 - (i) inappropriate sanitation;
 - (ii) serious lack of cleanliness;
 - (iii) rodent or insect infestation;
 - (iv) structural damage; or
 - (v) damage caused by flooding, tornado, or other acts of nature.
- (4) Fire resulting in relocation, personal injury, property loss, or other health and safety concerns to or for an individual receiving services.
- (5) Elopement of an individual.
- (6) Suspected or actual criminal activity by:
 - (A) a staff member, employee, or agent of a provider; or
 - (B) an individual receiving services.
- (7) An event with the potential for causing significant harm or injury and requiring medical or psychiatric treatments or services to or for an individual receiving services.
- (8) Admission of an individual to a nursing facility, including respite stays.
- (9) Injury to an individual when the origin or cause of the injury is unknown.
- (10) A significant injury to an individual, including:
 - (A) a fracture;
 - (B) a burn greater than first degree;
 - (C) choking that requires intervention; or
 - (D) contusions or lacerations.
- (11) An injury that occurs while an individual is restrained.
- (12) A medication error, except for refusal to take medications, that jeopardizes an individual's health and safety, including the following:

- (A) Medication given that was not prescribed or ordered for the individual.
 - (B) Failure to administer medication as prescribed, including:
 - (i) incorrect dosage;
 - (ii) missed medication; and
 - (iii) failure to give medication at the appropriate time.
 - (13) Inadequate staff support for an individual, including inadequate supervision, with the potential for:
 - (A) significant harm or injury to an individual; or
 - (B) death of an individual.
 - (14) Inadequate medical support for an individual, including failure to obtain:
 - (A) necessary medical services;
 - (B) routine dental or physician services; or
 - (C) medication timely resulting in missed medications.
- (b) An incident described in subsection (a) shall be reported by a provider or an employee or agent of a provider who:
- (1) is providing services to the individual at the time of the incident; or
 - (2) becomes aware of or receives information about an alleged incident.
- (c) An initial report regarding an incident shall be submitted within twenty-four (24) hours of:
- (1) the occurrence of the incident; or
 - (2) the reporter becoming aware of or receiving information about an incident.
- (d) A provider shall submit a follow-up report concerning the incident on the BDDS's follow-up incident report form at the following times:
- (1) Within seven (7) days of the date of the initial report.
 - (2) Every seven (7) days thereafter until the incident is resolved.
- (e) A provider is not required to submit a follow-up report if both of the following requirements are met:
- (1) The provider states on an incident report that no follow-up report is necessary.
 - (2) The BDDS does not inform the provider that a follow-up report is necessary.
- (f) All information required to be submitted to the BDDS shall also be submitted to the provider of case management services to the individual. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-9-5)*

460 IAC 6-9-6 Transfer of individual's records upon change of provider

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 6. (a) If an individual changes providers for any supported living service or support, the new provider shall:

- (1) discuss with the individual the new provider's need to obtain a copy of the previous provider's records and files concerning the individual;
- (2) provide the individual with a written form used to authorize the previous provider's release of a copy of the records and files concerning the individual to the new provider; and
- (3) request the individual to sign the release form.

(b) Upon receipt of a written release signed by the individual, a provider shall forward a copy of all of the individual's records and files to the new provider no later than seven (7) days after receipt of the written release signed by the individual. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-9-6)*

Rule 10. General Administrative Requirements for Providers

460 IAC 6-10-1 Applicability

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. This rule applies to all supported living services and supports. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-10-1)*

460 IAC 6-10-2 Documentation of approvals

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. A provider shall maintain documentation that the BDDS has approved the provider for each service provided. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-10-2)*

460 IAC 6-10-3 Compliance with laws

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 3. A provider shall comply with all applicable state and federal statutes, rules, regulations, and requirements, including all applicable provisions of the federal Americans with Disabilities Act (ADA), 42 U.S.C. 12001 et seq. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-10-3)*

460 IAC 6-10-4 Compliance with state Medicaid plan; Medicaid waivers

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 4. A provider shall comply with the provisions of:

(1) the state Medicaid plan; and

(2) any Medicaid waiver applicable to the provider's services.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-10-4)

460 IAC 6-10-5 Documentation of criminal histories

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1; IC 16-27-2-5; IC 31-33-22-1; IC 35-42-1; IC 35-42-4; IC 35-43-4; IC 35-46-1-12; IC 35-46-1-13

Sec. 5. (a) A provider shall obtain a limited criminal history from the Indiana central repository for criminal history information from each employee, officer, or agent involved in the management, administration, or provision of services.

(b) The limited criminal history shall verify that the employee, officer, or agent has not been convicted of the following:

(1) A sex crime (IC 35-42-4).

(2) Exploitation of an endangered adult (IC 35-46-1-12).

(3) Failure to report:

(A) battery, neglect, or exploitation of an endangered adult (IC 35-46-1-13); or

(B) abuse or neglect of a child (IC 31-33-22-1).

(4) Theft (IC 35-43-4), if the person's conviction for theft occurred less than ten (10) years before the person's employment application date, except as provided in IC 16-27-2-5(a)(5).

(5) Murder (IC 35-42-1-1).

(6) Voluntary manslaughter (IC 35-42-1-3).

(7) Involuntary manslaughter (IC 35-42-1-4).

(8) Felony battery.

(9) A felony offense relating to a controlled substance.

(c) A provider shall have a report from the state nurse aid registry of the Indiana state department of health verifying that each employee or agent involved in the management, administration, and provision of services has not had a finding entered into the state nurse aide registry. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-10-5)*

460 IAC 6-10-6 Provider organizational chart

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 6. (a) A provider shall maintain a current organizational chart, including parent organizations and subsidiary organizations.

(b) Upon request, a provider shall supply the BDDS with a copy of the chart described in subsection (a). *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-10-6)*

460 IAC 6-10-7 Collaboration and quality control

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 7. (a) A provider for an individual shall collaborate with the individual's other service providers to provide services to the individual consistent with the individual's ISP.

(b) A provider for an individual shall give the individual's provider of case management services access to the provider's quality assurance and quality improvement procedures.

(c) If a provider administers medication to an individual, the provider for the individual shall implement the medication administration system designed by the individual's provider responsible for medication administration.

(d) If applicable, a provider for an individual shall implement the seizure management system designed by the individual's provider responsible for seizure management.

(e) If applicable, a provider for an individual shall implement the health-related incident management system designed by the individual's provider responsible for health-related incident management.

(f) If applicable, a provider for an individual shall implement the behavioral support plan designed by the individual's provider of behavioral support services.

(g) If an individual dies, a provider shall cooperate with the provider responsible for conducting an investigation into the individual's death pursuant to 460 IAC 6-25-9. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-10-7)*

460 IAC 6-10-8 Resolution of disputes

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 4-21.5; IC 12-11-1.1; IC 12-11-2.1

Sec. 8. (a) If a dispute arises between or among providers, the dispute resolution process set out in this section shall be implemented.

(b) The resolution of a dispute shall be designed to address an individual's needs.

(c) The parties to the dispute shall attempt to resolve the dispute informally through an exchange of information and possible resolution.

(d) If the parties are not able to resolve the dispute:

(1) each party shall document:

(A) the issues in the dispute;

(B) their positions; and

(C) their efforts to resolve the dispute; and

(2) the parties shall refer the dispute to the individual's support team for resolution.

(e) The parties shall abide by the decision of the individual's support team.

(f) If:

- (1) an individual's support team cannot resolve the matter; and
 - (2) the provider of case management services to the individual is not a party to the dispute;
- the provider of case management services to the individual shall resolve the matter.

(g) The parties shall abide by the decision of the provider of case management services to the individual.

(h) If:

- (1) the individual disagrees with the decision of the provider of case management services or the individual's support team cannot resolve the matter; and
 - (2) the provider of case management services to the individual is a party to the dispute;
- then the parties shall refer the matter to the individual's service coordinator for resolution of the dispute.

(i) The service coordinator shall give the parties notice of the service coordinator's decision pursuant to IC 4-21.5.

(j) Any party adversely affected or aggrieved by the service coordinator's decision may request administrative review of the service coordinator's decision within fifteen (15) days after the party receives written notice of the service coordinator's decision.

(k) Administrative review shall be conducted pursuant to IC 4-21.5. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-10-8*)

460 IAC 6-10-9 Automation standards

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 9. A provider shall comply with all automation standards and requirements prescribed by the applicable funding agency concerning documentation and processing of services provided under this article. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-10-9*)

460 IAC 6-10-10 Quality assurance and quality improvement system

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 10. (a) A provider shall have an internal quality assurance and quality improvement system that is:

- (1) focused on the individual; and
- (2) appropriate for the services being provided.

(b) The system described in subsection (a) shall include at least the following elements:

- (1) An annual survey of individual satisfaction.
- (2) Records of the findings of annual individual satisfaction surveys.
- (3) Documentation of efforts to improve service delivery in response to the survey of individual satisfaction.
- (4) An assessment of the appropriateness and effectiveness of each service provided to an individual.
- (5) A process for:
 - (A) analyzing data concerning reportable incidents;
 - (B) developing recommendations to reduce the risk of future incidents; and
 - (C) reviewing recommendations to assess their effectiveness.
- (6) If medication is administered to an individual by a provider, a process for:
 - (A) analyzing medication errors;
 - (B) developing recommendations to reduce the risk of future medication errors; and
 - (C) reviewing the recommendations to assess their effectiveness.
- (7) If behavioral support services are provided by a provider, a process for:

- (A) analyzing the appropriateness and effectiveness of behavioral support techniques used for an individual;
- (B) developing recommendations concerning the behavioral support techniques used with an individual; and
- (C) reviewing the recommendations to assess their effectiveness.

(8) If community habilitation and participation services or residential habilitation and support services are provided by the provider, a process for:

- (A) analyzing the appropriateness and effectiveness of the instructional techniques used with an individual;
- (B) developing recommendations concerning the instructional techniques used for an individual; and
- (C) reviewing the recommendations to assess their effectiveness.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-10-10)

460 IAC 6-10-11 Prohibition against office in residence of individual

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 11. A provider shall not:

- (1) maintain an office in an individual's residence; or
- (2) conduct the provider's business operations not related to services to the individual in the individual's residence.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-10-11)

460 IAC 6-10-12 Human rights committee

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 12. A provider shall cooperate with the division's or the BDDS's regional human rights committee for the geographic area or areas in which the provider is providing services under this article. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-10-12)*

460 IAC 6-10-13 Emergency behavioral support

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 13. (a) In an emergency, physical restraint or removal of an individual from the individual's environment may be used:

- (1) without the necessity of a behavioral support plan; and
- (2) only to prevent significant harm to the individual or others.

(b) The individual's support team shall meet not later than five (5) working days after an emergency physical restraint or removal of an individual from the environment in order to:

- (1) review the circumstances of the emergency physical restraint or removal of an individual;
- (2) determine the need for a:
 - (A) functional analysis;
 - (B) behavioral support plan; or
 - (C) both; and
- (3) document recommendations.

(c) If a provider of behavioral support services is not a member an individual's support team, a provider of behavioral support services must be added to the individual's support team.

(d) Based on the recommendation of the support team, a provider of behavioral support services shall:

- (1) complete a functional analysis within thirty (30) days; and
- (2) make appropriate recommendations to the support team.

(e) The individual's support team shall:

- (1) document the recommendations of the behavioral support services provider; and

(2) design an accountability system to insure implementation of the recommendations.
(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-10-13)

Rule 11. Financial Status of Providers

460 IAC 6-11-1 Applicability

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. This rule applies to all supported living services and supports. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-11-1)*

460 IAC 6-11-2 Disclosure of financial information

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. (a) A provider shall maintain and, upon the BDDS's request, shall make available to the BDDS the following information concerning the provider:

- (1) Financial status.**
- (2) Current expenses and revenues.**
- (3) Projected budgets outlining future operations.**
- (4) Credit history and the ability to obtain credit.**

(b) A provider shall maintain financial records in accordance with generally accepted accounting and bookkeeping practices.

(c) The financial status of a provider shall be audited according to state board of accounts requirements and procedures. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-11-2)*

460 IAC 6-11-3 Financial stability

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 3. A provider shall be financially stable, with the documented ability to deliver services without interruption for at least two (2) months without payment for services. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-11-3)*

Rule 12. Insurance

460 IAC 6-12-1 Applicability

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. This rule applies to all supported living services and supports. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-12-1)*

460 IAC 6-12-2 Property and personal liability insurance

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. A provider shall secure insurance to cover:

- (1) personal injury;**
- (2) loss of life; or**
- (3) property damage;**

to an individual caused by fire, accident, or other casualty arising from, or occurring during, the provision of services to the individual by the provider. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-12-2)*

2)

Rule 13. Transportation of an Individual

460 IAC 6-13-1 Applicability

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. This rule applies to all supported living services and supports. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-13-1)*

460 IAC 6-13-2 Transportation of an individual

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. A provider that transports an individual receiving services in a motor vehicle shall:

- (1) maintain the vehicle in good repair;**
- (2) properly register with the Indiana bureau of motor vehicles; and**
- (3) insure the vehicle as required under Indiana law.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-13-2)

Rule 14. Professional Qualifications and Requirements

460 IAC 6-14-1 Applicability

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. This rule applies to all supported living services and supports. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-14-1)*

460 IAC 6-14-2 Requirement for qualified personnel

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. A provider shall ensure that services provided to an individual:

- (1) meet the needs of the individual;**
- (2) conform to the individual's ISP; and**
- (3) are provided by qualified personnel as required under this article.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-14-2)

460 IAC 6-14-3 Documentation of qualifications

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 3. A provider shall maintain documentation that:

- (1) the provider meets the requirements for providing services under this article; and**
- (2) the provider's employees or agents meet the requirements for providing services under this article.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-14-3)

460 IAC 6-14-4 Employee training

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 4. (a) This section applies to a provider who uses employees or agents in the delivery of services.

(b) A provider shall train the provider's employees or agents in the protection of an individual's rights,

including how to:

- (1) respect the dignity of an individual;
- (2) protect an individual from abuse, neglect, and exploitation;
- (3) implement person-centered planning and an individual's ISP; and
- (4) communicate successfully with an individual.

(c) A provider that develops training goals and objective for an individual shall train the provider's employees or agents in:

- (1) selecting specific objectives;
- (2) completing task analysis;
- (3) appropriate locations for instruction; and
- (4) appropriate documentation of an individual's progress on goals and objectives.

(d) A provider shall train direct care staff in providing a healthy and safe environment for an individual, including how to:

- (1) administer medication, monitor side effects, and recognize and prevent dangerous medication interactions;
- (2) administer first aid;
- (3) administer cardiopulmonary resuscitation;
- (4) practice infection control;
- (5) practice universal precautions;
- (6) manage individual-specific treatments and interventions, including management of an individual's:
 - (A) seizures;
 - (B) behavior;
 - (C) medication side effects;
 - (D) diet and nutrition;
 - (E) swallowing difficulties;
 - (F) emotional and physical crises; and
 - (G) significant health concerns; and
- (7) conduct and participate in emergency drills and evacuations.

(e) Training shall be completed prior to the employee or agent working with an individual. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-14-4)*

460 IAC 6-14-5 Requirements for direct care staff

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 5. All direct care staff working with individuals shall meet the following requirements:

- (1) Be at least eighteen (18) years of age.
- (2) Demonstrate the ability to communicate adequately in order to:
 - (A) complete required forms and reports of visits; and
 - (B) follow oral or written instructions.
- (3) Demonstrate the ability to provide services according to the individual's ISP.
- (4) Demonstrate willingness to accept supervision.
- (5) Demonstrate an interest in and empathy for individuals.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-14-5)

Rule 15. Personnel Records

460 IAC 6-15-1 Applicability

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. This rule applies to all supported living services and supports. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-15-1)*

460 IAC 6-15-2 Maintenance of personnel files

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. (a) A provider shall maintain in the provider's office a file for each employee or agent of the provider.

(b) The provider's file for each employee or agent shall contain the following:

- (1)** A negative tuberculosis screening prior to providing services, and updated in accordance with recommendations of Centers for Disease Control.
- (2)** Cardiopulmonary resuscitation certification and recertification, updated annually.
- (3)** Auto insurance information, updated annually, if the employee or agent will be transporting an individual in the employee's or agent's personal vehicle.
- (4)** Limited criminal history information that meets the requirements of 460 IAC 6-10-5, with the information updated at least every three (3) years.
- (5)** Professional licensure, certification, or registration, including renewals, as applicable.
- (6)** A copy of the employee's or agent's driver's license, updated when the driver's license is due to expire.
- (7)** Copies of:
 - (A)** the employee's time records; or
 - (B)** the agent's invoices for services.
- (8)** Copies of the agenda for each training session attended by the employee or agent, including the following:
 - (A)** Subject matter included in each training session.
 - (B)** The date and time of each training session.
 - (C)** The name of the person or persons conducting each training session.
 - (D)** Documentation of the employee's or agent's attendance at each training session, signed by:
 - (i)** the employee or agent; and
 - (ii)** the trainer.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-15-2)

Rule 16. Personnel Policies and Manuals

460 IAC 6-16-1 Applicability

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. (a) This rule applies to a provider who uses employees or agents to provide services.

(b) This rule applies to all supported living services and supports. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-16-1)*

460 IAC 6-16-2 Adoption of personnel policies

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. (a) A provider shall:

- (1)** adopt and maintain a written personnel policy;
- (2)** review and update the personnel policy as appropriate; and
- (3)** distribute the personnel policy to each employee or agent.

(b) The written personnel policy required by subsection (a) shall include at least the following:

- (1)** A job description for each position, including the following:
 - (A)** Minimum qualifications for the position.
 - (B)** Major duties required of the position.
 - (C)** Responsibilities of the employee in the position.
 - (D)** The name and title of the supervisor to whom the employee in the position must report.
- (2)** A procedure for conducting reference, employment, and criminal background checks on each prospective

employee or agent.

(3) A prohibition against employing or contracting with a person convicted of the offenses listed in 460 IAC 6-10-5.

(4) A process for evaluating the job performance of each employee or agent at the end of the training period and annually thereafter, including a process for feedback from individuals receiving services from the employee or agent.

(5) Disciplinary procedures.

(6) A description of grounds for disciplinary action against or dismissal of an employee or agent.

(7) A description of the rights and responsibilities of employees or agents, including the responsibilities of administrators and supervisors.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-16-2)

460 IAC 6-16-3 Policies and procedures documentation

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 3. (a) A provider shall:

(1) adopt and maintain a written training procedure;

(2) review and update the training procedure as appropriate; and

(3) distribute the training procedure to the provider's employees or agents.

(b) The written training procedure required by subsection (a) shall include at least the following:

(1) Mandatory orientation for each new employee or agent to assure the employee's or agent's understanding of, and compliance with:

(A) the mission, goals, organization, and practices of the provider; and

(B) the applicable requirements of this article.

(2) A system for documenting the training for each employee or agent, including:

(A) the type of training provided;

(B) the name and qualifications of the trainer;

(C) the duration of training;

(D) the date or dates of training;

(E) the signature of the trainer, verifying the satisfactory completion of training by the employee or agent; and

(F) the signature of the employee or agent.

(3) A system for ensuring that a trainer has sufficient education, expertise, and knowledge of the subject to achieve listed outcomes required under the system.

(4) A system for providing annual in-service training to improve the competence of employees or agents in the following areas:

(A) Protection of individual rights, including protection against abuse, neglect, or exploitation.

(B) Incident reporting.

(C) Medication administration if the provider administers medication to an individual.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-16-3)

460 IAC 6-16-4 Operations manual

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 4. (a) A provider shall compile the written policies and procedures required by sections 1 and 2 of this rule into a written operations manual.

(b) The operations manual shall be regularly updated and revised.

(c) Upon the request of the BDDS, the provider shall:

(1) supply a copy of the operations manual to the BDDS or other state agency, at no cost; and

(2) make the operations manual available to the BDDS or other state agency for inspection at the offices of the provider.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-16-4)

Rule 17. Maintenance of Records of Services Provided

460 IAC 6-17-1 Applicability

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. This rule applies to all supported living services and supports. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-17-1)*

460 IAC 6-17-2 Maintenance of records of services provided

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. (a) This section applies to all providers.

(b) A provider shall maintain in the provider's office documentation of all services provided to an individual.

(c) Documentation related to an individual required by this article shall be maintained by the provider for at least seven (7) consecutive years.

(d) A provider shall analyze and update the documentation required by:

- (1) the standards under this article applicable to the services the provider is providing to an individual;**
- (2) the professional standards applicable to the provider's profession; and**
- (3) the individual's ISP.**

(e) A provider shall analyze and update the documentation at least every ninety (90) days if:

- (1) the standards under this article do not provide a standard for analyzing and updating documentation;**
- (2) the professional standards applicable to the provider's profession do not provide a standard; or**
- (3) a standard is not set out in the individual's ISP.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-17-2)

460 IAC 6-17-3 Individual's personal file: site of service delivery

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 3. (a) A provider specified in the individual's ISP as being responsible for maintaining the individual's personal file shall maintain a personal file for the individual at:

- (1) the individual's residence; or**
- (2) the primary location where the individual receives services.**

(b) The individual's personal file shall contain at least the following information:

- (1) The individual's full name.**
- (2) Telephone numbers for emergency services that may be required by the individual.**
- (3) A current sheet with a brief summary regarding:**
 - (A) the individual's diagnosis or diagnoses;**
 - (B) the individual's treatment protocols, current medications, and other health information specified by the individual's ISP;**
 - (C) behavioral information about the individual;**
 - (D) likes and dislikes of the individual that have been identified in the individual's ISP; and**
 - (E) other information relevant to working with the individual.**
- (4) The individual's history of allergies, if applicable.**
- (5) Consent by the individual or the individual's legal representative for emergency treatment for the individual.**
- (6) A photograph of the individual, if:**
 - (A) a photograph is available; and**
 - (B) inclusion of a photograph in the individual's file is specified by the individual's ISP.**

- (7) A copy of the individual's current ISP.
 - (8) A copy of the individual's behavioral support plan, if applicable.
 - (9) Documentation of:
 - (A) changes in the individual's physical condition or mental status during the last sixty (60) days;
 - (B) an unusual event such as vomiting, choking, falling, disorientation or confusion, behavioral problems, or seizures occurring during the last sixty (60) days; and
 - (C) the response of each provider to the observed change or unusual event.
 - (10) If an individual's goals include bill paying and other financial matters, the individual's file shall contain:
 - (A) the individual's checkbook with clear documentation that the checkbook has been balanced; and
 - (B) bank statements with clear documentation that the bank statements and the individual's checkbook have been reconciled.
 - (11) All environmental assessments conducted during the last sixty (60) days, with the signature of the person or persons conducting the assessment on the assessment.
 - (12) All medication administration documentation for the last sixty (60) days.
 - (13) All seizure management documentation for the last sixty (60) days.
 - (14) Health-related incident management documentation for the last sixty (60) days.
 - (15) All nutritional counseling services documentation for the last sixty (60) days.
 - (16) All behavioral support services documentation for the last sixty (60) days.
 - (17) All goal directed documentation for the last sixty (60) days.
- (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-17-3)*

460 IAC 6-17-4 Individual's personal file; provider's office

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 4. (a) A provider specified in the individual's ISP as being responsible for maintaining the individual's personal file shall maintain a personal file for an individual at the provider's office.

- (b) The individual's personal file shall contain documentation of the following:
 - (1) A change in an individual's physical condition or mental status.
 - (2) An unusual event for the individual.
 - (3) All health and medical services provided to an individual.
 - (4) An individual's training goals.
- (c) A change or unusual event referred to in subsection (b) shall include the following:
 - (1) Vomiting.
 - (2) Choking.
 - (3) Falling.
 - (4) Disorientation or confusion.
 - (5) Patterns of behavior.
 - (6) A seizure.
- (d) The documentation of a change or an event referred to in subsections (b) and (c) shall include the following:
 - (1) The date, time, and duration of the change or event.
 - (2) A description of the response of the provider, or the provider's employees or agents to the change or event.
 - (3) The signature of the provider or the provider's employees or agents observing the change or event.
- (e) The documentation of all health and medical services provided to the individual shall:
 - (1) be kept chronologically; and
 - (2) include the following:
 - (A) Date of services provided to the individual.
 - (B) A description of services provided.
 - (C) The signature of the health care professional providing the services.

(f) The individual's training file shall include documentation regarding the individual's training goals required by 460 IAC 6-24-1. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-17-4)

Rule 18. Behavioral Support Services

460 IAC 6-18-1 Preparation of behavioral support plan

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. A behavioral support services provider shall prepare a behavioral support plan for an individual only after the provider has:

- (1) directly observed the individual; and**
- (2) reviewed reports regarding the individual.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-18-1)

460 IAC 6-18-2 Behavioral support plan standards

Authority: IC 12-8-8-4; IC 12-9-2-2; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. (a) A behavioral support plan shall meet the standards set out in this section.

(b) A behavioral support plan shall operationally define the targeted behavior or behaviors.

(c) A behavioral support plan shall be based upon a functional analysis of the targeted behaviors.

(d) A behavioral support plan shall contain written guidelines for teaching the individual functional and useful behaviors to replace the individual's maladaptive behavior.

(e) A behavioral support plan shall use nonaversive methods for teaching functional and useful replacement behaviors.

(f) A behavioral support plan shall conform to the individual's ISP, including the needs and outcomes identified in the ISP and the ISP's specifications for behavioral support services.

(g) A behavioral support plan shall contain documentation that each person implementing the plan:

- (1) has received specific training as provided in the plan in the techniques and procedures required for implementing the behavioral support plan; and**
- (2) understands how to use the techniques and procedures required to implement the behavioral support plan; regardless of whether the person implementing the plan is an employee or agent of the behavioral support services provider.**

(h) A behavioral support plan shall contain a documentation system for direct care staff working with the individual to record episodes of the targeted behavior or behaviors. The documentation system shall include a method to record the following information:

- (1) Dates and times of occurrence of the targeted behavior.**
- (2) Length of time the targeted behavior lasted.**
- (3) Description of what precipitated the targeted behavior.**
- (4) Description of what activities helped alleviate the targeted behavior.**
- (5) Signature of staff observing and recording the targeted behavior.**

(i) If the use of medication is included in a behavioral support plan, a behavioral support plan shall contain:

- (1) a plan for assessing the use of the medication and the appropriateness of a medication reduction plan; or**
- (2) documentation that a medication use reduction plan for the individual was:**
 - (A) implemented within the past five (5) years; and**
 - (B) proved to be not effective.**

(j) If a highly restrictive procedure is included in a behavioral support plan, a behavioral support plan shall contain the following:

- (1) A functional analysis of the targeted behavior for which a highly restrictive procedure is designed.**
- (2) Documentation that the risks of the targeted behavior have been weighed against the risk of the highly restrictive procedure.**
- (3) Documentation that systematic efforts to replace the targeted behavior with an adaptive skill were used and found to be not effective.**
- (4) Documentation that the individual, the individual's support team and the applicable human rights committee agree that the use of the highly restrictive method is required to prevent significant harm to the individual or others.**
- (5) Informed consent from the individual or the individual's legal representative.**
- (6) Documentation that the behavioral support plan is reviewed regularly by the individual's support team.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-18-2)

460 IAC 6-18-3 Written policy and procedure standards

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 3. A provider of behavioral support services shall have written policies and procedures that:

- (1) limit the use of highly restrictive procedures, including physical restraint or medications to assist in the managing of behavior; and**
- (2) focus on behavioral supports that begin with less intrusive or restrictive methods before more intrusive or restrictive methods are used.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-18-3)

460 IAC 6-18-4 Documentation standards

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 4. (a) A provider of behavioral support services shall maintain documentation regarding the development of a behavioral support plan that:

- (1) the least intrusive method was attempted and exhausted first; and**
- (2) if a highly restrictive procedure is deemed to be necessary and included in a behavioral support plan, the actions required by section 2(j) of this rule have been taken.**

(b) A provider of behavioral support services shall maintain the following documentation for each individual served:

- (1) A copy of the individual's behavioral support assessment.**
- (2) If applicable, the individual's behavioral support plan.**
- (3) Dates, times, and duration of each visit with the individual.**
- (4) A description of the behavioral support activities conducted.**
- (5) A description of behavioral support progress made.**
- (6) The signature of the person providing the behavioral support services on each date the behavioral support service is provided.**
- (7) If applicable, a copy of each individual's behavioral support plan.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-18-4)

460 IAC 6-18-5 Level 2 clinician standards

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 5. (a) If a behavioral support plan is developed by a Level 2 clinician, the Level 2 clinician shall be supervised by a Level 1 clinician.

(b) A Level 1 clinician shall give written approval of all behavioral support plans developed by a Level 2

clinician. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-18-5)*

460 IAC 6-18-6 Implementation of behavioral support plan

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 6. All providers working with an individual shall implement the behavioral support plan designed by the individual's behavioral support services provider. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-18-6)*

460 IAC 6-18-7 Human rights committee

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 7. A provider of behavioral support services who:

(1) prepares a behavioral support plan; or

(2) implements a behavioral support plan;

shall cooperate with the division's or the BDDS's regional human rights committee for the geographic area in which the provider is providing services under this article. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-18-7)*

Rule 19. Case Management

460 IAC 6-19-1 Information concerning an individual

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. A provider of case management services shall have the following information about an individual receiving case management services from the provider:

(1) The wants and needs of an individual, including the health, safety and behavioral needs of an individual.

(2) The array of services available to an individual whether the services are available under this article or are otherwise available.

(3) The availability of funding for an individual.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-19-1)

460 IAC 6-19-2 Training and orientation

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. (a) To maintain the BDDS's approval to provide case management services under this article, a provider shall complete twenty (20) hours of training regarding case management services in each calendar year.

(b) The training prescribed by subsection (a) shall include at least ten (10) hours of training approved by the BDDS.

(c) If the BDDS identifies a systemic problem with a provider's case management services, the provider of case management services shall obtain training on the topics recommended by the BDDS. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-19-2)*

460 IAC 6-19-3 Contact information

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 3. (a) A provider of case management services shall give the individual or the individual's legal representative, if applicable, clear instructions for contacting the provider.

(b) A provider of case management services shall give the individual or the individual's legal representative, if applicable, a summary of information and procedures if the individual needs assistance or has an emergency before or after business hours. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-19-3)

460 IAC 6-19-4 Distribution of information

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 4. A provider of case management services shall ensure that:

- (1) the individual;**
- (2) the individual's legal representative, if applicable; and**
- (3) all other providers of services to the individual, regardless of whether the services are provided pursuant to this article;**

have copies of relevant documentation, including information on individual rights, an individual's approved plan of care, filing complaints, and requesting appeals concerning issues and disputes relating to the services provided to the individual. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-19-4)

460 IAC 6-19-5 Evaluation of available providers

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 5. (a) A provider of case management services shall provide the individual or the individual's legal representative, if applicable, with the following information:

- (1) A current list of providers approved under this article, including a complete description of services offered by each provider.**
- (2) Information regarding services the individual may need that are not provided under this article.**
- (3) The current BDDS information guide for individuals on how to choose a provider.**

(b) The provider of case management services shall assist the individual or the individual's legal representative, if applicable, in evaluating potential service providers. (Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-19-5)

460 IAC 6-19-6 Monitoring of services

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 6. (a) A provider of case management shall monitor and document the quality, timeliness, and appropriateness of the care, services, and products delivered to an individual.

(b) The documentation required under this section shall include an assessment of the following:

- (1) The appropriateness of the goals in the individual's ISP.**
- (2) An individual's progress toward the goals in the individual's ISP.**

(c) The documentation required by this section shall include the following:

- (1) Any medication administration system for the individual.**
- (2) An individual's behavioral support plan.**
- (3) Any health-related incident management system for the individual.**
- (4) Any side effect monitoring system for the individual.**
- (5) Any seizure management system for the individual.**
- (6) Any other system for the individual implemented by more than one (1) provider.**

(d) A provider of case management services shall continuously monitor the services and outcomes established for the individual in the individual's ISP, including the following:

- (1) A provider of case management services shall timely follow-up on identified problems.**
- (2) A provider of case management services shall act immediately to resolve critical issues and crises in**

accordance with this article.

(3) If concerns with services or outcomes are identified, a provider of case management services shall:

(A) address the concerns in a timely manner; and

(B) involve all necessary providers and the individual's support team if necessary.

(e) A provider of case management services who is attempting to resolve a dispute shall follow the dispute resolution procedure described in 460 IAC 6-10-8.

(f) No later than thirty (30) days after the implementation of an individual's ISP, unless otherwise specified in the ISP, a provider of case management shall make the first monitoring contact with the individual.

(g) A provider of case management services shall have regular in-person contact with the individual as required by the ISP and this section. The provider of case management services shall make at least:

(1) one (1) in-person contact with the individual every ninety (90) days to assess the quality and effectiveness of the ISP;

(2) two (2) in-person contacts each year in the individual's residence; and

(3) one (1) in-person contact each year unannounced.

(h) If an individual's ISP requires more contact than required by subsection (g), the individual's ISP shall control the amount of contact a provider of case management services must make with an individual receiving case management services.

(i) A provider of case management services shall coordinate the provision of family and caregiver training services. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-19-6*)

460 IAC 6-19-7 Documentation of services provided

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 7. (a) A provider of case management services shall maintain documentation of each contact with an:

(1) individual; and

(2) individual's providers.

(b) The documentation shall be updated and revised whenever case management services are provided for the individual.

(c) If a provider of case management services visits an individual at the individual's residence, the provider must sign in with the provider of environmental and living arrangement supports. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-19-7*)

460 IAC 6-19-8 Documentation; problem resolution

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 8. (a) A provider of case management services shall document the following:

(1) The provider's follow-up on problems.

(2) The resolution of problems.

(b) A provider of case management services shall keep the documentation required in this section in an individual's personal record maintained by the case manager. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-19-8*)

460 IAC 6-19-9 Conflict of interest

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 9. If a person provides case management services to an individual, then that person shall not provide any other service under this article to that particular individual. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-19-9)*

Rule 20. Community-Based Sheltered Employment Services

460 IAC 6-20-1 Staffing requirements

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. Community-based sheltered employment services shall be provided with a staff ratio that does not exceed eight (8) individuals to one (1) staff member. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-20-1)*

460 IAC 6-20-2 Integrated setting required

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. Community-based employment services shall be provided in an integrated setting. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-20-2)*

Rule 21. Environmental Modification Supports

460 IAC 6-21-1 Warranty required

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. All environmental modification supports provided to an individual under this rule shall be warranted for at least ninety (90) days. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-21-1)*

460 IAC 6-21-2 Documentation required

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. A provider of environmental modification supports shall maintain the following documentation regarding support provided to an individual:

- (1) The installation date of any adaptive aid or device, assistive technology, or other equipment.**
- (2) The maintenance date of any adaptive aid or device, assistive technology, or other equipment.**
- (3) A change made to any adaptive aid or device, assistive technology, or other equipment, including any:**
 - (A) alteration;**
 - (B) correction; or**
 - (C) replacement.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-21-2)

Rule 22. Facility-Based Sheltered Employment Services

460 IAC 6-22-1 Staffing requirement

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. All facility-based sheltered employment services shall be provided with a staff ratio that does not exceed twenty (20) individuals to one (1) staff member. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-22-1)*

Rule 23. Family and Caregiver Training Services

460 IAC 6-23-1 Requirements for provision of services

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. A person providing family and caregiver training services shall have:

- (1) education;**
- (2) training; or**
- (3) experience;**

directly related to the training the person will be providing. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-23-1*)

460 IAC 6-23-2 Supervision of providers

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. Any person providing family and caregiver training services shall be supervised by the:

- (1) individual whose family members or caregiver is receiving training; and**
- (2) provider of case management services to the individual.**

(*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-23-2*)

Rule 24. Training Services

460 IAC 6-24-1 Coordination of training services and training plan

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. (a) A provider designated in an individual's ISP as responsible for providing training to an individual shall create a training plan for the individual.

(b) A training plan shall:

- (1) consist of a formal description of goals, objectives, and strategies, including:**
 - (A) desired outcomes; and**
 - (B) persons responsible for implementation; and**
- (2) be designed to enhance skill acquisition and increase independence.**

(c) The provider shall assess the appropriateness of an individual's goals at least once every ninety (90) days.

(d) All providers responsible for providing training to an individual shall:

- (1) coordinate the training services provided to an individual; and**
- (2) share documentation regarding the individual's training;**

as required by the individual's ISP. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-24-1*)

460 IAC 6-24-2 Required documentation

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. (a) The provider identified in section 1 of this rule shall maintain a personal file for each individual served.

(b) The individual's file shall:

- (1) be kept chronologically; and**
- (2) include the following information:**
 - (A) Measurement of the individual's progress toward each training goal identified in the individual's ISP.**
 - (B) Dates, times, and duration of training services provided to the individual.**
 - (C) A description of training activities conducted on each date.**
 - (D) The signature of the person providing the service each time training is provided.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-24-2)

460 IAC 6-24-3 Management of individual's financial resources

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 3. (a) This section applies to:

- (1) an individual's residential living allowance management services provider; or**
- (2) the provider identified in an individual's individualized support plan as being responsible for an individual's property or financial resources.**

(b) The provider shall assist an individual to:

- (1) obtain, possess, and maintain financial assets, property, and economic resources; and**
- (2) obtain insurance at the individual's expense to protect the individual's assets and property.**

(c) If the provider is responsible for management of an individual's funds, the provider shall do the following:

- (1) Maintain separate accounts for each individual.**
- (2) Provide monthly account balances and records of transactions to the individual and, if applicable, the individual's legal representative.**
- (3) Inform the individual or the individual's legal representative, if applicable, that the payee is required by law to spend the individual's funds only for the needs of the individual.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-24-3)

Rule 25. Health Care Coordination Services

460 IAC 6-25-1 Provider of health care coordination services

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. Coordination of the health care for an individual shall be the responsibility of either of the following:

- (1) A provider of health care coordination services.**
- (2) The provider identified in an individual's ISP as responsible for the health care of the individual.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-25-1)

460 IAC 6-25-2 Coordination of health care

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. The provider identified in section 1 of this rule shall coordinate the health care received by the individual, including:

- (1) annual physical, dental, and vision examinations;**
- (2) routine examinations;**
- (3) routine screenings; and**
- (4) identification and treatment of allergies;**

as ordered by the individual's physician. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-25-2)*

460 IAC 6-25-3 Documentation of health care services received by an individual

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 3. (a) The provider identified in section 1 of this rule shall maintain a personal file for each individual served.

(b) The individual's personal file shall contain the following information:

- (1) The date of health and medical services provided to the individual.**
- (2) A description of the health care or medical services provided to the individual.**

- (3) The signature of the person providing the health care or medical service for each date a service is provided.
- (4) Additional information and documentation required in this rule, including documentation of the following:
 - (A) An organized system for medication administration.
 - (B) An individual's refusal to take medication.
 - (C) Monitoring of medication side effects.
 - (D) Seizure tracking.
 - (E) Changes in an individual's status.
 - (F) An organized system of health-related incident management.
 - (G) If applicable to this provider, an investigation of the death of an individual.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-25-3)

460 IAC 6-25-4 Organized system for medication administration required

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 4. (a) The provider identified in section 1 of this rule shall design an organized system of medication administration for the individual.

(b) The provider shall:

- (1) document the system in writing; and
- (2) distribute the document to all providers administering medication to the individual.

(c) The document shall be placed in the individual's file maintained by all providers administering medication to the individual.

(d) The system required in subsection (a) shall contain at least the following elements:

- (1) Identification and description of each medication required for the individual.
- (2) Documentation that the individual's medication is administered only by trained and authorized personnel unless the individual is capable of self-administration of medication as provided for in the individual's ISP.
- (3) Documentation of the administration of medication, including the following:
 - (A) Administration of medication from original labeled prescription containers.
 - (B) Name of medication administered.
 - (C) Amount of medication administered.
 - (D) The date and time of administration.
 - (E) The initials of the person administering the medication.
- (4) Procedures for the destruction of unused medication.
- (5) Documentation of medication administration errors.
- (6) A system for the prevention or minimization of medication administration errors.
- (7) When indicated as necessary by an individual's ISP, procedures for the storage of medication:
 - (A) in the original labeled prescription container;
 - (B) in a locked area when stored at room temperature;
 - (C) in a locked container in the refrigerator if refrigeration is required;
 - (D) separately from nonmedical items; and
 - (E) under prescribed conditions of temperature, light, humidity, and ventilation.
- (8) Documentation of an individual's refusal to take medication as required in section 5 of this rule.
- (9) A system for communication among all providers that administer medication to an individual.
- (10) All providers administering medication to the individual shall:
 - (A) implement; and
 - (B) comply with;the organized system of medication administration designed by the provider designated in section 1 of this rule.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-25-4)

460 IAC 6-25-5 Individual's refusal to take medication

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 5. (a) If an individual refuses to take medication, the provider attempting to administer the medication shall do the following:

- (1) Document the following information:**
 - (A) The name of the medication refused by the individual.**
 - (B) The date, time, and duration of the refusal.**
 - (C) A description of the provider's response to the refusal.**
 - (D) The signature of the person or persons observing the refusal.**
- (2) Supply the documentation to the provider identified in section 1 of this rule.**

(b) The provider identified in section 1 of this rule shall review the individual's refusal to take medication with:

- (1) the individual's physician; and**
- (2) the individual's support team;**

to ensure the health and safety of the individual. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-25-5*)

460 IAC 6-25-6 Monitoring of medication side effects

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 6. (a) The provider designated in section 1 of this rule shall design a system to monitor side effects an individual may experience as a result of medication the individual takes.

(b) The provider shall:

- (1) document the system in writing; and**
- (2) distribute the document to all providers working with the individual.**

(c) The system required in subsection (a) shall contain at least the following elements:

- (1) Training of direct care staff, employees, and agents concerning:**
 - (A) the identification of:**
 - (i) side effects; and**
 - (ii) interactions;**
 - of all medication administered to an individual; and**
 - (B) instruction on medication side effects and interactions.**
- (2) A side effect tracking record that includes:**
 - (A) how often the individual should be monitored for side effects of each medication administered to the individual;**
 - (B) who shall perform the monitoring; and**
 - (C) when monitoring shall be performed.**
- (3) A system for communication among all providers working with an individual regarding the monitoring of medication side effects.**

(d) All providers working with an individual shall:

- (1) implement; and**
- (2) comply with;**

the medication side effect monitoring system designed by the provider designated in section 1 of this rule. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-25-6*)

460 IAC 6-25-7 Seizure management

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 7. (a) The provider designated in section 1 of this rule shall design a system of seizure management for the

individual.

(b) The provider shall communicate the system in writing to all providers working with the individual.

(c) The system of seizure management prescribed by subsection (a) shall include at least the following elements:

- (1) Training of direct care staff, employees, or agents concerning the administration of medication.
- (2) A seizure tracking record for documenting events:
 - (A) immediately preceding a seizure;
 - (B) during a seizure; and
 - (C) following a seizure.
- (3) Documentation of any necessary physician follow-up and follow along services.
- (4) A system for checking the individual's levels of seizure medication:
 - (A) at least annually; or
 - (B) as ordered by the individual's physician.
- (5) A system for communication among all providers working with the individual concerning the individual's seizures.

(d) All providers working with the individual shall:

- (1) implement; and
- (2) comply with;

the seizure management system developed by the provider designated in section 1 of this rule. (*Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-25-7*)

460 IAC 6-25-8 Changes in an individual's status

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 8. (a) The provider identified in section 1 of this rule shall maintain a personal file for an individual at the provider's office. The file shall contain documentation of any change in an individual's physical condition, mental status, or any unusual event, including the following:

- (1) Vomiting.
- (2) Choking.
- (3) Falling.
- (4) Disorientation or confusion.
- (5) Patterns of behavior.
- (6) Seizures.

(b) The documentation of a change or event required by subsection (a) shall include:

- (1) dates, times, and duration of the change or event;
- (2) a description of the response of the provider, or the provider's employees or agents to the change or event; and
- (3) the signature of the person or persons observing the change or event.

(c) A provider or providers working with an individual shall supply to the provider identified in section 1 of this rule any information regarding any change or event listed in subsection (a) that is observed while the provider is providing services to the individual.

(d) Except as provided in subsection (e), a provider observing a change in an individual's physical condition or mental status, or any unusual event, shall supply the information required in subsection (c) to the provider identified in section 1 of this rule as follows:

- (1) within twenty-four (24) hours of the change or event; or
- (2) by noon on the next business day;

whichever is later.

(e) If the change in an individual's physical condition or mental status or the unusual event is also a reportable incident under 460 IAC 6-9-5, the information shall be provided within twenty-four (24) hours. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-25-8)*

460 IAC 6-25-9 Health-related incident management

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 9. (a) The provider identified in section 1 of this rule shall design a system of management for health-related incidents involving an individual.

(b) The health-related incident management system prescribed by subsection (a) shall provide an internal review process for any health-related reportable incident. The provider's internal review process shall include at least the following:

(1) A trend analysis of incidents for an individual.

(2) Documentation:

(A) that summarizes the findings of the analysis conducted under subdivision (1); and

(B) of the steps taken to prevent or minimize the occurrence of incidents in the future.

(3) A system for communication among all providers working with an individual regarding health-related incidents involving the individual.

(c) All providers working with an individual shall implement the health-related incident management system designed by the provider identified in section 1 of this rule. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-25-9)*

460 IAC 6-25-10 Investigation of death

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 10. (a) If an individual dies, an investigation into the death shall be conducted by the provider identified in section 1 of this rule, except as provided in subsection (b).

(b) If the provider identified in section 1 of this rule is a family member of the individual, then the provider of case management services to an individual shall conduct an investigation into the death of the individual.

(c) A provider conducting an investigation into the death of an individual shall meet the following requirements:

(1) Notify by telephone the BDDS's central office in Indianapolis not later than twenty-four (24) hours after the death.

(2) Notify adult protective services or child protection services, as applicable, not later than twenty-four (24) hours after the death.

(3) Collect and review documentation of all events, incidents, and occurrences in the individual's life for at least the thirty (30) day period immediately before:

(A) the death of the individual;

(B) the hospitalization in which the individual's death occurred; or

(C) the individual's transfer to a nursing home in which death occurred within ninety (90) days of that transfer.

(4) In conjunction with all providers of services to the deceased individual, review and document all the actions of all employees or agents of all providers for the thirty (30) day period immediately before:

(A) the individual's death;

(B) the hospitalization in which the individual's death occurred; or

(C) the individual's transfer to a nursing home in which death occurred within ninety (90) days of that transfer.

(5) Document conclusions and make recommendations arising from the investigation.

(6) Document implementation of any recommendations made under subdivision (5).

- (7) No later than fifteen (15) days after the individual's death, send to the BDDS:
- (A) a completed notice of an individual's death on a form prescribed by the BDDS; and
 - (B) a final report that includes all documentation required by subdivisions (1) through (6) for review by the division's mortality review committee.

(d) A provider shall respond to any additional requests for information made by the mortality review committee within seven (7) days of the provider's receipt of a request.

(e) A provider shall submit the documentation to the BDDS to support the provider's implementation of specific recommendations made by the mortality review committee. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-25-10)*

Rule. 26. Nutritional Counseling Services

460 IAC 6-26-1 Specialized diet program

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. (a) A provider of nutritional counseling services shall design and document a dining plan for an individual in accordance with the individual's ISP.

(b) An individual's dining plan shall include the following:

- (1) Any special dining needs of an individual.
- (2) Identification of swallowing difficulties.
- (3) Identification of risk of aspiration.
- (4) The need for adaptive equipment.

(c) A provider who has designed a dining plan for an individual shall provide assessment and oversight of:

- (1) the dining plan; and
- (2) the person or persons implementing the dining plan.

(d) A provider shall follow any specialized diet program designed by the provider of nutritional counseling services to an individual, including any documentation requirements contained in the individual's dining plan. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-26-1)*

Rule 27. Occupational Therapy Services

460 IAC 6-27-1 Supervision

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. Any occupational therapy assistant or occupational therapy aide assisting in the delivery of occupational therapy services to an individual shall do so under the direct supervision of an occupational therapist approved under this article. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-27-1)*

Rule 28. Personal Emergency Response System Supports

460 IAC 6-28-1 Warranty required

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. All personal emergency response system supports provided to an individual under this rule shall be warranted for at least ninety (90) days. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-28-1)*

460 IAC 6-28-2 Documentation

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. A provider of personal emergency response system supports shall maintain the following documentation regarding support provided to an individual:

- (1) The installation date of any device.
- (2) The maintenance date of any device.
- (3) Any change made to any device, including an alteration, correction or replacement.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-28-2)

Rule 29. Physical Environment

460 IAC 6-29-1 Environment shall conform to ISP

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. A provider designated in the individual's ISP as responsible for providing environmental and living arrangement support for the individual shall ensure that an individual's physical environment conforms to the requirements of:

- (1) the individual's ISP; and
- (2) this rule.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-29-1)

460 IAC 6-29-2 Safety of individual's environment

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. (a) A provider designated in the individual's ISP as responsible for providing environmental and living arrangement support shall provide services in a safe environment that is:

- (1) maintained in good repair, inside and out; and
- (2) free from:
 - (A) combustible debris;
 - (B) accumulated waste material;
 - (C) offensive odors; and
 - (D) rodent or insect infestation.

(b) The provider shall ensure that:

- (1) an assessment of the individual's environment is conducted every ninety (90) days; and
- (2) the results of the assessment are documented.

(c) If an environmental assessment determines that an environment is unsafe for an individual, the provider shall take the appropriate steps to ensure that the individual is safe, including the following, when appropriate:

- (1) Filing an incident report.
- (2) Working with the individual and the support team to resolve physical environmental issues.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-29-2)

460 IAC 6-29-3 Monitoring an individual's environment

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 3. The provider designated in an individual's ISP as responsible for providing environmental and living arrangement support shall ensure that appropriate devices or home modifications, or both:

- (1) are provided to the individual in accordance with the individual's ISP; and
- (2) satisfy the federal Americans with Disabilities Act requirements and guidelines.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-29-3)

460 IAC 6-29-4 Compliance of environment with building and fire codes

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 4. (a) A provider designated in an individual's ISP as responsible for providing environmental and living arrangement support shall ensure that an individual's living areas comply with the requirements of this section.

(b) An individual's living areas shall meet Indiana Code and local building requirements for single family dwellings or multiple family dwellings as applicable.

(c) An individual's living areas shall contain a working smoke detector or smoke detectors that are:

- (1)** tested at least once a month; and
- (2)** located in areas considered appropriate by the local fire marshal.

(d) An individual's living areas shall contain a working fire extinguisher or extinguishers that are inspected annually.

(e) An individual's living areas shall:

- (1)** contain operable antiscald devices; or
- (2)** have hot water temperature no higher than one hundred ten (110) degrees Fahrenheit;

if required by an individual's ISP. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-29-4)*

460 IAC 6-29-5 Safety and security policies and procedures

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 5. (a) A provider designated in an individual's ISP as responsible for providing environmental and living arrangement support for the individual shall:

- (1)** maintain specific written safety and security policies and procedures for an individual; and
- (2)** train all employees or agents in implementing the policies and procedures.

(b) The policies and procedures prescribed by subsection (a) shall include at least the following:

- (1)** When and how to notify law enforcement agencies in an emergency or crisis.
- (2)** Scheduling and completion of evacuation drills.
- (3)** Adopting procedures that shall be followed in an emergency or crisis, such as a tornado, fire, behavioral incident, elopement, or snow.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-29-5)

460 IAC 6-29-6 Safety and security training

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 6. (a) A provider designated in an individual's ISP as responsible for providing environmental and living arrangement support shall provide training to:

- (1)** the provider's employees or agents; and
- (2)** the individual, in the individual's mode of communication;

concerning procedures to be followed in an emergency or crisis.

(b) The training prescribed by subsection (a) shall include the following:

- (1)** Evacuation procedures.
- (2)** Responsibilities during drills.
- (3)** The designated meeting place outside the site of service delivery in an emergency.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-29-6)

460 IAC 6-29-7 Individual's inability to follow safety and security procedures

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 7. If an individual is medically or functionally unable to follow procedures for dealing with an emergency or crisis, the provider of environmental and living arrangement support shall document in writing:

- (1) that the individual is unable to follow emergency or crisis procedures; and**
- (2) the provider's plan for support of the individual in an emergency or crisis.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-29-7)

460 IAC 6-29-8 Emergency telephone numbers

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 8. (a) A provider designated in an individual's ISP as responsible for providing environmental and living arrangement support shall ensure that an emergency telephone number list is located:

- (1) in an area visible from the telephone used by an individual; or**
- (2) as indicated in the individual's ISP.**

(b) The emergency telephone list shall include the following:

- (1) Information given to the individual by the individual's provider of case management services.**
- (2) The local emergency number, for example, 911.**
- (3) The telephone number of the individual's legal representative or advocate, if applicable**
- (4) Any telephone numbers specified in the individual's ISP, including telephone numbers for the following:**
 - (A) The local BDDS office.**
 - (B) The provider of case management services to the individual.**
 - (C) Adult protective services or child protection services as applicable.**
 - (D) The developmental disabilities waiver ombudsman.**
 - (E) Any other service provider identified in the individual's ISP.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-29-8)

Rule 30. Psychological Therapy Services

460 IAC 6-30-1 Supervision

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. To provide psychological therapy services under this article, the following persons shall be supervised by a licensed psychologist:

- (1) A marriage and family therapist.**
- (2) A mental health counselor.**
- (3) A clinical social worker.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-30-1)

Rule 31. Residential Living Allowance and Management Services

460 IAC 6-31-1 Documentation required

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. A provider of residential living allowance and management services shall maintain the following documentation:

- (1) Documentation that an individual's residential living allowance was deposited in the individual's personal account.**
- (2) Receipts for all expenditures made from the individual's financial resources and food stamps, including receipts for rent, utilities, groceries, clothing, household goods, and other expenditures.**
- (3) If applicable, an individual's ICLB.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-31-1)

Rule 32. Respite Care Services

460 IAC 6-32-1 Documentation required

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. (a) A provider of respite care services shall maintain chronological documentation of the services provided for an individual.

(b) The documentation shall include the following:

- (1) The date and duration of respite care services provided.**
- (2) The signature of the person providing respite care services.**
- (3) The location and setting where the respite care service was provided.**

(c) Documentation shall be updated, reviewed and analyzed whenever respite care services are provided.
(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-32-1)

Rule 33. Specialized Medical Equipment and Supplies Supports

460 IAC 6-33-1 Warranty required

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. All specialized medical equipment and supplies supports provided to an individual under this rule shall be warranted for at least ninety (90) days. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-33-1)*

460 IAC 6-33-2 Documentation required

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. A provider of specialized medical equipment and supplies supports shall maintain the following documentation regarding support provided to an individual:

- (1) The installation date of any adaptive aid or device, assistive technology, or other equipment.**
- (2) The maintenance date of any adaptive aid or device, assistive technology, or other equipment.**
- (3) Any change made to any adaptive aid or device, assistive technology, or other equipment, including an alteration, correction, or replacement.**

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-33-2)

Rule 34. Speech-Language Therapy Services

460 IAC 6-34-1 Supervision required

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. Any speech-language pathology aide providing speech-language services under this article shall provide services under the direct supervision of a speech pathologist approved under this article. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-34-1)*

Rule 35. Transportation Services

460 IAC 6-35-1 Valid driver's license required

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12
Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 1. A provider of transportation services shall ensure that an individual is transported only by a person

who has a valid Indiana:

- (1) operator's license;
- (2) chauffeur's license;
- (3) public passenger chauffeur's license; or
- (4) commercial driver's license;

issued to the person by the Indiana bureau of motor vehicles to drive the type of motor vehicle for which the license was issued. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-35-1)*

460 IAC 6-35-2 Vehicle requirements

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 2. A provider of transportation services shall ensure that an individual is transported only in a vehicle:

- (1) maintained in good repair;
- (2) properly registered with the Indiana bureau of motor vehicles; and
- (3) insured as required under Indiana law.

(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-35-2)

460 IAC 6-35-3 Vehicle liability insurance

Authority: IC 12-8-8-4; IC 12-9-2-3; IC 12-11-1.1-9; IC 12-11-2.1-12

Affected: IC 12-11-1.1; IC 12-11-2.1

Sec. 3. (a) A provider of transportation services shall secure liability insurance for all vehicles:

- (1) owned or leased by the provider; and
- (2) used for the transportation of an individual receiving services.

(b) The liability insurance required by subsection (a) shall cover:

- (1) personal injury;
- (2) loss of life; or
- (3) property damage;

to an individual, if the loss, injury, or damage occurs during the provision of transportation services to the individual by the provider. *(Division of Disability, Aging, and Rehabilitative Services; 460 IAC 6-35-3)*

Notice of Public Hearing

Under IC 4-22-2-24, notice is hereby given that on August 22, 2002 at 2:00 p.m., at the Indianapolis-Marion County Public Library, 1801 Nowland Avenue, Indianapolis, Indiana; AND on August 22, 2002 at 5:00 p.m., at the Indianapolis-Marion County Public Library, 1801 Nowland Avenue, Indianapolis, Indiana; AND on August 22, 2002 at 2:00 p.m., at the New Albany-Floyd County Public Library, 180 West Spring Street, New Albany, Indiana; AND on August 22, 2002 at 5:00 p.m., at the New Albany-Floyd County Public Library, 180 West Spring Street, New Albany, Indiana; AND on August 22, 2002 at 2:00 p.m., at the Valparaiso Public Library, 103 Jefferson Street, Valparaiso, Indiana; AND on August 22, 2002 at 5:00 p.m., at the Valparaiso Public Library, 103 Jefferson Street, Valparaiso, Indiana the Division of Disability, Aging, and Rehabilitative Services will hold a public hearing on proposed new rules concerning supported living services and supports for individuals with a developmental disability. The proposed new rules include qualifications for approved providers of supported living services and supports; the process by which providers are approved; the process for monitoring and ensuring compliance with provider standards and requirements; the rights of individuals receiving services; protection of individuals receiving services; and standards and requirements for approved providers of supported living services and supports. If an accommodation is required to allow an individual with a disability to participate in a public hearing, please contact Barbara Nardi at (317) 232-1246 at least 48 hours before the hearing. Copies of these rules are now on file at the Indiana Government Center-South, 402 West Washington Street, Room W451 and Legislative Services Agency, One North Capitol, Suite 325, Indianapolis, Indiana and are open for public inspection.

Steven C. Cook
Director

Division of Disability, Aging, and Rehabilitative Services