

## Indiana

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410 IAC 16.2-1.1-55 "Qualified mental retardation professional" or "QMRP" defined

Authority: IC 16-28-1-7; IC 16-28-1-12

Affected: IC 16-28; IC 25-22.5-5; IC 25-23-1-11; IC 25-27; IC 25-35.6-3

Sec. 55. "Qualified mental retardation professional" or "QMRP" means a person who has specialized training or one (1) year of experience in treating the mentally retarded and is one (1) of the following:

- (1) A psychologist with a master's degree from an accredited program.
- (2) A licensed doctor of medicine or osteopathy.
- (3) An educator with a degree in education from an accredited program.
- (4) A social worker with a bachelor's or master's degree in social work from an accredited program or a bachelor's or master's degree in a field other than social work and at least three (3) years of social work experience under the supervision of a qualified social worker.

410 IAC 16.2-7-5 Diagnostic screening

Authority: IC 16-28-1-7; IC 16-28-1-12

Affected: IC 16-28-5-1

(4) A social history and an annual social services update which provides information on services and programs the applicant has received in the past, as well as what services the applicant was receiving at the time of the diagnostic screening.

(Indiana State Department of Health; 410 IAC 16.2-7-5; filed May 2, 1984, 2:50 p.m.: 7 IR 1502; filed Jan 10, 1997, 4:00 p.m.: 20 IR 1588, eff Apr 1, 1997; errata filed Apr 10, 1997, 12:15 p.m.: 20 IR 2415; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 16.2-0.5-1 Preamble

Authority: IC 16-28-1-7; IC 16-28-1-12

Affected: IC 16-28

Sec. 1. (a) This article is intended for:

- (1) the operation of health facilities in Indiana in meeting the long term care needs of residents;
- (2) state surveyors in determining compliance with this article for the purpose of licensure; and
- (3) the state survey agency in the application of remedies.

(b) This article includes provisions dealing with the following:

- (1) Residents' rights.
- (2) The administration and management of health facilities.
- (3) Sanitation and safety standards.
- (4) Assessment of residents' needs.
- (5) Medical and nursing services.
- (6) Food and nutrition services.
- (7) Infection control.
- (8) Activities and social services programs.
- (9) Clinical records.

(Indiana State Department of Health; 410 IAC 16.2-0.5-1; filed Jan 10, 1997, 4:00 p.m.: 20 IR 1518, eff Apr 1, 1997; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 16.2-3.1-4 Notice of rights and services

Authority: IC 16-28-1-7; IC 16-28-1-12

Affected: IC 12-10-5.5; IC 16-28-5-1; IC 16-36-1-3; IC 16-36-1-7; IC 16-36-4-7; IC 16-36-4-13; IC 30-5-7-4

(3) The most recently known addresses and telephone numbers, including, but not limited to, the following:

- (A) The department.
- (B) The office of the secretary of family and social services.
- (C) The ombudsman designated by the division of disability, aging, and rehabilitative services.
- (D) The area agency on aging.
- (E) The local mental health center.
- (F) The protection and advocacy services commission.
- (G) Adult protective services.

These shall be displayed in a prominent place in the facility.

(Indiana State Department of Health; 410 IAC 16.2-3.1-4; filed Jan 10, 1997, 4:00 p.m.: 20 IR 1529, eff Apr 1, 1997; errata filed

Apr 10, 1997, 12:15 p.m.: 20 IR 2414; errata filed Jun 4, 1997, 1:47 p.m.: 20 IR 2789; readopted filed Jul 11, 2001, 2:23 p.m.:

24 IR 4234; filed Jul 22, 2004, 10:05 a.m.: 27 IR 3989)

410 IAC 16.2-3.1-34 Social services

Authority: IC 16-28-1-7; IC 16-28-1-12

Affected: IC 16-28-5-1; IC 25-23.6-5-1

Sec. 34. (a) The facility must provide medically-related social services to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident, including the following where appropriate:

- (1) Assessment of each resident's psychosocial needs and development of a plan for providing care.
  - (2) Review of the resident's needs and care plan with progress notes indicating implementation of methods to respond to identified needs.
  - (3) Assistance to residents and spouses to utilize community resources through referral when the services needed are not provided by the facility.
  - (4) Assistance to residents in adjusting to the facility, exercising rights as residents, and promoting the continuance of relationships with the family and community.
  - (5) Advice and appropriate referrals to minimize social and economic obstacles to discharge and coordination of discharge planning.
  - (6) Coordination of relocation planning, including advice and referral to community resources before and during relocation.
  - (7) Establishment of a positive and socially therapeutic environment through staff training and input on policies and procedures.
  - (8) Promotion of facility-community interaction.
- (b) At least fifteen (15) minutes of time shall be provided per resident per week by the qualified social worker or social service designee for social service duties.
- (c) In facilities of more than one hundred twenty (120) beds, the facility must employ, full time, a qualified social worker. A qualified social worker is one (1) of the following:
- (1) Indiana board certification in social work under IC 25-23.6-5-1 with at least one (1) year's experience in a health care setting working directly with individuals.
  - (2) An individual with a bachelor's or advanced degree, or both, in social work or a bachelor's or advanced degree, or both, in a human services field, including, but not limited to:

(A) sociology;  
(B) special education;  
(C) rehabilitation counseling; or  
(D) psychology; or  
(E) gerontology; and one (1) year of supervised social service experience in a health care setting working directly with individuals.

(d) In facilities of one hundred twenty (120) beds or less, a person who provides social services is an individual with one (1) of the following qualifications:

(1) Indiana board certification in social work under IC 25-23.6-5-1 with at least one (1) year's experience in a health care setting working directly with individuals.

(2) A bachelor's or advanced degree, or both, in social work or a degree in the human services fields, including, but not limited to:

(A) sociology;

(B) special education;

(C) rehabilitation counseling;

(D) psychology; and

(E) gerontology; and one (1) year of supervised social service experience under the supervision of a qualified social worker in a health care setting working directly with individuals.

(3) A high school diploma or its equivalent who has satisfactorily completed, or will complete within six (6) months, a forty-eight (48) hour social service course approved by the division.

Consultation must be provided by a person who meets the qualifications under subdivision (1) or (2). Consultation by a person who meets the qualifications under subdivision (1) or (2) must occur no less than an average of four (4) hours per month.

(4) Ordained minister, priest, rabbi, or sister or brother of religious institutes who has satisfactorily completed a forty-eight

(48) hour social service course approved by the division. A person who has not completed a course must have consultation of no less than an average of four (4) hours per month from a person who meets the qualifications of subdivision (1) or (2) until the person has satisfactorily completed the division approved course.

(e) Current employment as a social service designee who completed an approved social service course prior to the effective date of this rule shall be allowed to maintain a position as a social service designee in health care facilities. Consultation shall be provided in accordance with subsection (d).

(f) For purposes of IC 16-28-5-1, a breach of:

(1) subsection (a) is a deficiency;

(2) subsection (b), (c), or (d) is a noncompliance; and

(3) subsection (e) is a nonconformance.

(Indiana State Department of Health; 410 IAC 16.2-3.1-34; filed Jan 10, 1997, 4:00 p.m.: 20 IR 1553, eff Apr 1, 1997; errata filed Jan 10, 1997, 4:00 p.m.: 20 IR 1593; errata filed Apr 10, 1997, 12:15 p.m.: 20 IR 2414; filed May 16, 2001, 2:09 p.m.: 24 IR 3028; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234)

410 IAC 16.2-3.1-13 Administration and management

(w) In facilities that are required under IC 12-10-5.5 to submit an Alzheimer's and dementia special care unit disclosure form, the facility must designate a director for the Alzheimer's and dementia special care unit. The director shall have an earned degree from an educational institution in a health care, mental health, or social service profession or be a licensed health

facility administrator. The director shall have a minimum of one (1) year work experience with dementia or Alzheimer's residents, or both, within the past five (5) years. Persons serving as a director for an existing Alzheimer's and dementia special care unit at the time of adoption of this rule are exempt from the degree and experience requirements. The director shall have a minimum of twelve (12) hours of dementia-specific training within three (3) months of initial employment as the director of the Alzheimer's and dementia special care unit and six (6) hours annually thereafter to:

- (1) meet the needs or preferences, or both, of cognitively impaired residents; and
- (2) gain understanding of the current standards of care for residents with dementia.
- (x) The director of the Alzheimer's and dementia special care unit shall do the following:
  - (1) Oversee the operation of the unit.
  - (2) Ensure that:
    - (A) personnel assigned to the unit receive required in-service training; and
    - (B) care provided to Alzheimer's and dementia care unit residents is consistent with:
      - (i) in-service training;
      - (ii) current Alzheimer's and dementia care practices; and
      - (iii) regulatory standards.
  - (y) For purposes of IC 16-28-5-1, a breach of:
    - (1) subsection (a), (c), (g), (r), (t), (u), (v), or (x) is a deficiency;
    - (2) subsection (b), (d), (e), (f), (i), (l), (p), (q), (s), or (w) is a noncompliance; and
    - (3) subsection (h), (j), (k), (m), (n), or (o) is a nonconformance.

*(Indiana State Department of Health; 410 IAC 16.2-3.1-13; filed Jan 10, 1997, 4:00 p.m.: 20 IR 1535, eff Apr 1, 1997; errata filed Apr 10, 1997, 12:15 p.m.: 20 IR 2414; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234; filed Jul 22, 2004, 10:05 a.m.: 27 IR 3990; readopted filed May 22, 2007, 1:44 p.m.: 20070613-IR-410070141RFA; filed Jul 31, 2008, 4:24 p.m.: 20080827-IR-410070657FRA)*

410 IAC 16.2-3.1-14 Personnel

Authority: IC 16-28-1-7; IC 16-28-1-12

Affected: IC 16-28-5-1; IC 16-28-13-3

- (C) Mental health and social service needs as follows:
  - (i) Modifying aides' behavior in response to residents' behavior.
  - (ii) Awareness of developmental tasks associated with the aging process.
  - (iii) How to respond to residents' behavior.
  - (iv) Allowing the resident to make personal choices, providing and reinforcing other behavior consistent with the resident's dignity.
  - (v) Using the resident's family as a source of emotional support.