

# Missouri Department of Mental Health

## DD Medicaid Waiver Program Certification

Survey **Instrument**

January 1, 2015



**Group Home, Individualized Supported Living, Host Home, Independent Living Skills  
Development, Employment Services**

# ANNOUNCEMENT!

This presentation will assist us all in understanding the changes made to the certification survey instrument of 2015. Every effort has been made to streamline and simplify the instrument, all the while ensuring compliance with contract, state, and federal law. Providers will have the opportunity over a two-year certification cycle to move into compliance.



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**Wording in Red is division changes**  
**Wording in Blue is federal requirement language**  
**Wording in Purple is DMH contract language**

## Individual's rights-limitations

**630.110.** 1. Except as provided in subsection 5 of this section, each person admitted to a residential facility or day program and each person admitted on a voluntary basis to any mental health facility or mental health program where people are civilly detained pursuant to chapter 632, RSMo; except to the extent that the head of the residential facility or day program determines that it is inconsistent with the person's therapeutic care, treatment, habilitation, or rehabilitation and the safety of other facility or program clients and public safety, shall be entitled to the following:

- (1) To wear his own clothes and to keep use his own personal possessions;
- (2) To keep and be allowed to spend a reasonable sum of his own money for canteen expenses and small purchases;
- (3) To communicate by sealed mail or otherwise with persons including agencies inside or outside the facility;
- (4) To receive visitors of his own choosing at reasonable times;
- (5) To have reasonable access to a telephone both to make and receive confidential calls;
- (6) To have access to his mental and medical records;
- (7) To have opportunities for physical exercise and outdoor recreations;
- (8) To have reasonable, prompt access to current newspapers, magazines and radio and television programming.

2. Any limitations imposed by the head of the residential facility or day program or his designee on the exercise of the rights enumerated in the subsection 1 of this section by a patient, resident or client and the reasons for such limitations shall be documented in his clinical record.

3. Each patient, resident or client shall have an absolute right to receive visits from his attorney, physician or clergyman, in private, at reasonable times.

4. Notwithstanding any limitations authorized under this section on the right of communication, every patient, resident or client shall be entitled to communicate by sealed mail with the department, his legal counsel and with the court, if any, which has jurisdiction over the person.

5. Persons committed to a residential facility or day program operated, funded or licensed by the department pursuant to section 552.040 RSMo, shall not be entitled to the rights enumerated in subdivisions (1), (3) and (5) of subsection of 1 of this section unless the head of the residential facility or day program determines that these rights are necessary for the person's therapeutic care, treatment, habilitation, or rehabilitation. In exercising the discretion to grant any of the rights enumerated in subsection 1 of this section to a patient, resident or client, the head of the residential facility or day program shall consider the safety of the public.

## Individual's entitlements-administrative review of violations

**630.115** 1. Each patient, resident or client shall be entitled to the following without limitation:

- (1) To humane care and treatment;
- (2) To the extent that the facilities, equipment and personnel are available, to medical care and treatment in accordance with the highest standards accepted in medical practice;
- (3) To safe and sanitary housing;
- (4) To not participate in nontherapeutic care;
- (5) To attend or not attend religious services;
- (6) To receive prompt evaluation and care, treatment, habilitation or rehabilitation about which he is informed insofar as he is capable of understanding;
- (7) To be treated with dignity as a human being;
- (8) To not be the subject of experimental research without his prior written and informed consent of that of his parent, if a minor, or his guardian; except that no involuntary patient shall be subject to experimental research, except as provided within this chapter;
- (9) To decide not to participate or may withdraw from any research at any time for any reason.
- (10) To have access to consultation with a private physician at his own expense;
- (11) To be evaluated, treated or habilitated in the least restrictive environment;
- (12) To not be subject to any hazardous treatment or surgical procedure unless he, his parent, if he is a minor, or his guardian consents; or unless such treatment or surgical procedure is ordered by a court of competent jurisdiction;
- (13) In the case of hazardous treatment or irreversible surgical procedures, to have, upon request, an impartial review prior to implementation, except in the case of emergency procedures required for the preservation of his life;
- (14) To a nourishing, well-balanced and varied diet;
- (15) To be free from verbal and physical abuse.

2. Notwithstanding any other sections of this chapter, each patient, resident or client shall have the right to an impartial administrative review of alleged violations of the rights assured under this chapter. The impartial administrative review process shall be a mechanism for:

- (1) Reporting alleged violations of rights assured under this chapter;
- (2) Investigation alleged violations of these rights;
- (3) Presenting patient, resident or client grievances on the record to a neutral decision maker; and
- (4) Requiring that the neutral decision maker issue findings of fact, conclusions and recommendations.

3. The impartial administrative review process shall be completed within a timely manner after the alleged violation is reported.

4. This impartial review process shall not apply to investigations of alleged patient, resident or client abuse or neglect conducted pursuant to section 630.167.

**SECTION (C) RIGHTS  
2. ASSURING LEGAL RIGHTS**

**OUTCOME: Individuals exercise or are assisted in exercising all rights under the Constitution of the United States and those stated in statute.**

**9 CSR 45-5.010 (3) (C) 2. A. Individuals have information on the rights and responsibilities of citizenship.**

Survey Instrument 2004

**Criteria**

- There is a signed document to show that the individual has been informed annually of his or her rights.
- Staff report that they have talked with the person about rights and responsibilities.
- People talk about or demonstrate their rights and responsibilities.

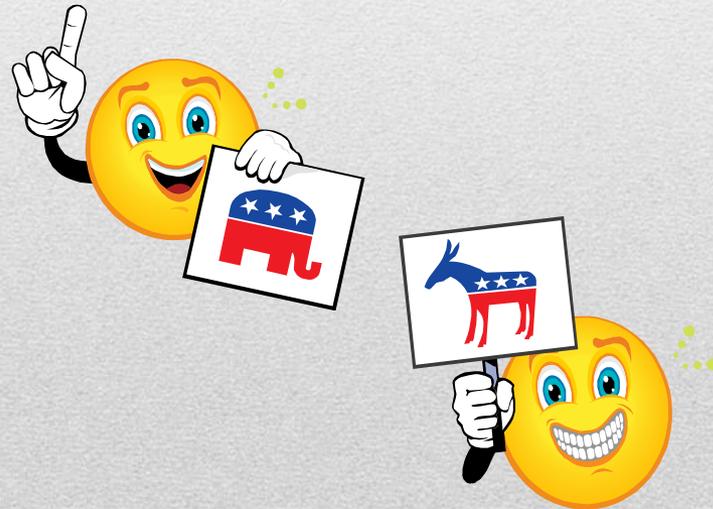
**Guidelines**

- Documentation may include, but is not limited to: a signed statement that rights were reviewed; or a signed rights brochure.
- Documentation should include the date rights were reviewed.
- Staff may be observed talking about rights and responsibilities with people they support.

Survey Instrument and Citations 2015

**Criteria**

- Provider has a document signed and dated by the individual and/or guardian showing that the individual has been informed annually of his or her rights. Sections **630.110 and 630.115 RSMo**



**SECTION (C) RIGHTS  
2. ASSURING LEGAL RIGHTS**

**OUTCOME: Individuals exercise or are assisted in exercising all rights under the Constitution of the United States and those stated in statute.**

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**9 CSR 45-5.010 (3) (C) 2. B. Individuals are involved in any process to limit their rights and are assisted through external advocacy efforts.**

Survey Instrument 2004

**Criteria**

- Signed documentation is present that the individual was involved with the decision to limit rights.
- This has been reviewed with the person.
- If rights have been limited, there must be documentation that the individual was given information about possible external advocates that may be contacted.

Survey Instrument and Citations 2015

**Criteria**

- Provider has available for review, a signed and dated document that the individual and/or guardian has been involved with the decision to limit his or her rights.
- If rights have been limited, there is documentation that the individual was supported in securing information about possible external advocates. **There is documentation that a limitation or restriction was reviewed by a Human Rights Committee. Section 630.115 RSMo**

**SECTION (C) RIGHTS  
2. ASSURING LEGAL RIGHTS**

**OUTCOME: Individuals exercise or are assisted in exercising all rights under the Constitution of the United States and those stated in statute.**

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**9 CSR 45-5.010 (3) (C) 2. C. Individuals are entitled to due process when limitations are imposed.**

Survey Instrument 2004

**Criteria**

- Agency has a policy regarding due process when there are limitations of rights of the individuals who are supported by the agency.
- Agency policy identifies external advocacy contacts for individuals supported by the agency.
- Each individual has a signed plan of action that details, with timelines, how the person's rights may be restored.

**Guidelines**

- Policy includes the person's right to an appeal and the appeal process.
- Ask the agency to identify people who have had rights limited. Review documentation.

Survey Instrument and Citations 2015

**Criteria**

- There is an agency policy regarding due process when there are limitations of rights.
- This policy includes the right to an appeal, the appeal process and external advocates.
- **Each individual has a signed plan of action in or as an addendum to the Individual Support Plan (ISP)** that details, with timelines, how the individual's rights may be restored.
- **The contractor may limit consumer rights as specified in RSMo 630.110 only if exercising these rights would be inconsistent with the persons therapeutic care, treatment, habilitation or rehabilitation. The determination of inconsistency shall be made only when the consumer is a clear danger to themselves, others or community property and shall only be made jointly by the contractor and the Regional Office (RO). Contract for Services 3.9.3**

**SECTION (C) RIGHTS**  
**2. ASSURING LEGAL RIGHTS**

**OUTCOME: Individuals exercise or are assisted in exercising all rights under the Constitution of the United States and those stated in statute.**

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**9 CSR 45-5.010 (3) (C) 2. D. Individuals are free to communicate privately.**

Survey Instrument 2004

**Criteria**

- People conduct conversations with others outside of the hearing of staff, including phone, visitor and housemates.
- People can receive and send mail.
- People communicate without fear of retribution.

**Guidelines**

- Talk with individuals who are supported. Ask about phone calls, mail, visitors, etc.
- Observe the use of the phone, people's interactions and mail.

Survey Instrument and Citations 2015

**Criteria**

- An individual's essential personal right of privacy, dignity and respect, and freedom from coercion are protected. Centers for Medicare and Medicaid Services 42 CFR Part 441.710
- Individuals are free to have private communication, without fear of retribution; this includes phone calls, mail, social media/e-mail, texting, text telephone (TTY), visitors and housemates.



**SECTION (C) RIGHTS  
2. ASSURING LEGAL RIGHTS**

**OUTCOME: Individuals exercise or are assisted in exercising all rights under the Constitution of the United States and those stated in statute.**

**9 CSR 45-5.010 (3) (C) 2. E. Individuals have freedom of movement.**

Survey Instrument 2004

**Criteria**

- People report and are observed to access all areas in the home as typical of any adult or child, as well as other environments.
- Individual freedom of movement limitations are specified in personal plans.

**Guidelines**

- If there is a room used as an office in a group home, residents have access and it is not locked. Confidential documents can be locked. ISLs must not have a staff office.
- There should be no differences between staff and individuals, e.g. no staff bathrooms.
- Adults wouldn't have access to other housemates bedrooms without an invitation.

Survey Instrument and Citations 2015

**Criteria**

- The individual is integrated in and supports access to the greater community.
- The setting is selected by the individual from among setting options including non-disability specific settings and an option for a private unit in a residential setting.
- Setting Characteristics:
  - Each individual has privacy in their sleeping or living unit and choice of roommates in that setting.
  - Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.
  - Setting is physically accessible to the individual.
  - The setting ensures freedom from restraint.

Centers for Medicare and Medicaid Services 42 CFR Part 441.710



**SECTION (C) RIGHTS  
2. ASSURING LEGAL RIGHTS**

**OUTCOME: Individuals exercise or are assisted in exercising all rights under the Constitution of the United States and those stated in statute.**

**9 CSR 45-5.010 (3) (C) 2. F. Staff are trained in preventing, detecting, and reporting abuse and neglect.**

Survey Instrument 2004

**Criteria**

- Document that staff has received training on preventing, detecting, and reporting abuse/neglect, at ***least every 2 years.***
- Staff report and can discuss preventing, detecting and how to report abuse/neglect.

**Guidelines**

- The Waiver contract (Part II) requires any “contractor employee who has reasonable cause to believe that a resident or client of a community residential facility or day program has been subjected to physical abuse, sexual abuse, Class I neglect, Class II neglect or verbal abuse while under the care of a community residential facility or day program shall immediately make a verbal or written complaint.”
- 9 CSR 10-5.200 Report of Complaints of Abuse and Neglect prescribes procedures for reporting and investigating complaints of abuse and neglect in a residential facility, day program or specialized service.

Survey Instrument and Citations 2015

**Criteria**

- All employees (including contracted), adult household members, relief/respite providers and volunteers receive training on preventing, detecting, and reporting abuse/neglect, prior to service delivery and ***at least biennially.***
- Documentation of this training must be available for review.
- All staff providing residential or day habilitation services...shall have completed training in preventing, detecting, and reporting of abuse/neglect, prior to providing direct care, and shall repeat the training every two (2) years... Contract for Services 3.3.5

**SECTION (C) RIGHTS  
2. ASSURING LEGAL RIGHTS**

**OUTCOME: Individuals exercise or are assisted in exercising all rights under the Constitution of the United States and those stated in statute.**

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**9 CSR 45-5.010 (3) (C) 2. G. Abuse and neglect are prohibited by policy.**

Survey Instrument 2004

**Criteria**

- The agency has a written policy that clearly states abuse/neglect is prohibited.

**Guidelines**

- Agency policy must include definitions of abuse and neglect consistent with 9 CSR 10-5.200.

Survey Instrument and Citations 2015

**Criteria**

- The agency has a written policy that clearly states abuse/neglect is prohibited and must include definitions of abuse and neglect consistent with 9 CSR 10-5.200.

**SECTION (C) RIGHTS  
2. ASSURING LEGAL RIGHTS**

**OUTCOME: Individuals exercise or are assisted in exercising all rights under the Constitution of the United States and those stated in statute.**

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**9 CSR 45-5.010 (3) (C) 2. H. Research must comply with state and federal regulations.**

Survey Instrument 2004

**Criteria**

- The agency has a written policy that clearly states any research must comply with state and federal regulations.

Survey Instrument and Citations 2015

**Criteria**

- The agency has a written policy that clearly states any research must comply with state regulations.  
**Section 630.192 RSMo**

## SECTION (C) RIGHTS 2. ASSURING LEGAL RIGHTS

**OUTCOME: Individuals exercise or are assisted in exercising all rights under the Constitution of the United States and those stated in statute.**

### **9 CSR 45-5.010 (3) (C) 2. I. Guardians and advocates, chosen by the individual, participate in planning and decision making.**

#### Survey Instrument 2004

##### Criteria

- There is clear evidence that the guardian and advocates chosen by the individual participate in the personal planning meeting and other decision making as needed.
- The person's plan must contain a signed consent for treatment by:
  - a person who is their own guardian;
  - by an appointed guardian;
  - or by a parent, if the person is a minor child.
- Plan must have a legal signature for consent to treatment dated before treatment begins.

##### Guidelines

- Personal plans are signed and updated at least yearly.
- Signature is effective for the current year.
- Look at signature page of participants that is part of the individual's plan. This will indicate who was invited, attended and had input into the plan.

#### Survey Instrument and Citations 2015

##### Criteria

- The person centered planning process is driven by the individual and includes people chosen by the individual.
- The planning reflects cultural considerations and uses plain language.
- The planning includes strategies for solving disagreements.
- The planning offers choices to the individual regarding services and supports the individual receives in the home and from whom they receive those services.
- The planning provides a method to request updates.
- The plan is developed annually and occurs at times/locations of convenience to the individual; it is signed and dated by the individual and/or guardian, prior to the implementation of services.
- A copy of the plan must be provided to the individual, his/her representative, and provider. Centers for Medicare and Medicaid Services 42 CFR Part 441.725
- The contractor shall provide services in support of each individual's individualized service plan based on a person-centered planning process and approved by the RO. Contract for Services 2.1.2



**SECTION (C) RIGHTS  
2. ASSURING LEGAL RIGHTS**

**OUTCOME: Individuals exercise or are assisted in exercising all rights under the Constitution of the United States and those stated in statute.**

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**9 CSR 45-5.010 (3) (C) 2. J. Individuals are informed of, or are assisted in the process of obtaining a guardian or conservator, or are referred to advocacy services, or both.**

Survey Instrument 2004

**Criteria**

- If the individual or consumer is interested in having a guardian or if the consumer's team determines the consumer is in need of a guardian, the agency provides the consumer with information about guardianship and advocacy.
- If a person is interested in obtaining a legal guardian, the person must be provided information regarding the limitations of rights and has the option to have an advocate.

**Guidelines**

- Agency support can include contacting the regional center service coordinator.
- This standard may be non-applicable to many individuals.

Survey Instrument and Citations 2015

**Criteria**

- If the individual is interested in having a guardian **or conservator** or if it is determined the individual is in need of a guardian, the provider will assist the individual with obtaining information about guardianship and advocacy.

**SECTION (C) RIGHTS  
2. ASSURING LEGAL RIGHTS**

**OUTCOME: Individuals exercise or are assisted in exercising all rights under the Constitution of the United States and those stated in statute.**

**9 CSR 45-5.010 (3) (C) 2. K. Staff maintain all information about individuals in confidence.**

Survey Instrument 2004

**Criteria**

- The agency has a policy regarding confidentiality of information.
- Staff knows of the policy and can report its content.
- Confidentiality policy is reviewed with staff annually and the review is documented.
- Staff is observed to maintain confidentiality of person's information.

**Guidelines**

- "Formal" training is not required; however, if the agency's policy includes formal training, this should be documented in the employee's personnel file.
- Assess if staff can verbalize the contents of the policy and if staff acts in a way that maintains confidentiality.

Survey Instrument and Citations 2015

**Criteria**

- The provider has a policy regarding confidentiality of information.
- **The provider has a policy and procedure regarding the Rule of Health Insurance Portability and Accountability Act of 1996 (HIPAA). 9 CSR 10-5.220.**
- Both policies and procedures are reviewed annually. They must be signed and dated by all employees (including contracted), adult household members, relief/respice providers and volunteers.
- **The individual's confidential documents, mail, email, and text telephone (TTY), must be secured.**



**SECTION (C) RIGHTS**  
**2. ASSURING LEGAL RIGHTS**

**OUTCOME: Individuals exercise or are assisted in exercising all rights under the Constitution of the United States and those stated in statute.**

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**9 CSR 45-5.010 (3) (C) 2. L. Individuals have access to their records and staff are available to answer their questions.**

Survey Instrument 2004

**Criteria**

- The person's record is maintained on site.
- Staff give the person access to his/her record.
- The staff is knowledgeable about the information maintained in the record and can answer questions.

**Guidelines**

- Records are accessible to staff and the consumer.

Survey Instrument and Citations 2015

**Criteria**

- The individual's record is maintained in the service setting site and is accessible to the individual; **this record must contain documentation for at least the previous year. 13 CSR 70-3.210 (4)**
- Staff is knowledgeable about information maintained in the record.
- **The provider will retain individuals' records for at least six years. 13 CSR 70-3.220 (2) (E)**
- **All entries in the individual's record will be signed, titled and dated by the person making the entry. 13 CSR 70-3.030 (2) (A)**

**SECTION (C) RIGHTS  
2. ASSURING LEGAL RIGHTS**

**OUTCOME: Individuals exercise or are assisted in exercising all rights under the Constitution of the United States and those stated in statute.**

**9 CSR 45-5.010 (3) (C) 2. M. Individuals do not perform unpaid work for which others receive pay.**

Survey Instrument 2004

**Criteria**

- People are not required to perform for free any activities for which other people would receive pay.

**Guidelines**

- The intent of this standard is to prevent exploitation of individuals. Examples of this type of work may be washing windows at a business, performing errands/favors for staff, etc.
- Ask the person about what they do and ask if they are paid.

Survey Instrument and Citations 2015

**Criteria**

- Individuals are provided opportunities to seek employment and work in competitive integrated settings. Centers for Medicare and Medicaid Services 42 CFR Part 441.725
- Individuals are not required to work for free or perform activities for which other people would receive pay.
- Individuals participating in Medicaid Waiver employment services, are supported by staff who have received 14 hours of Division approved classroom training and an additional six hours of on the job training. Contract for Service 3.3.6



**SECTION (C) RIGHTS  
2. ASSURING LEGAL RIGHTS**

**OUTCOME: Individuals exercise or are assisted in exercising all rights under the Constitution of the United States and those stated in statute.**

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**9 CSR 45-5.010 (3) (C) 2. N. Individuals' rights to a free, appropriate public education are supported.**

Survey Instrument 2004

**Criteria**

- People are provided educational opportunities per Individuals with Disabilities Education Act (IDEA), PL94-142.

**Guidelines**

- Children of school age are receiving educational opportunities/attending school.

Survey Instrument and Citations 2015

**Criteria**

- Individuals are provided educational opportunities per Individuals with Disabilities Education Act. (IDEA) PL94-142.
- Children of school age are receiving educational opportunities.

**SECTION (C) RIGHTS  
2. ASSURING LEGAL RIGHTS**

**OUTCOME: Individuals exercise or are assisted in exercising all rights under the Constitution of the United States and those stated in statute.**

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**9 CSR 45-5.010 (3) (C) 2. 0. Individuals have information on the rights and responsibilities of living in the community.**

Survey Instrument 2004

**Criteria**

- This Principle was omitted from the Survey Instrument of 2004.

Survey Instrument and Citations 2015

**Criteria**

- Individuals are provided opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources.
- The setting options are identified and documented in the person-centered service plans based on the individuals needs and preferences. Centers for Medicare and Medicaid Services 42 CFR Part 441.725.
- Participation may be documented in the calendar of events, daily logs and/or other agency maintained documentation.

**SECTION (D) MEETING BASIC NEEDS**  
**1. ASSURING AND PROMOTING GOOD HEALTH**  
**OUTCOME: Individuals maintain good health.**

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**9 CSR 45-5.010 (3) (D) 1. A. Individuals have a primary health care provider to meet health care needs.**

Survey Instrument 2004

**Criteria**

- The individual has a physician who:
  - Is responsible for coordination of medical needs for the individual.
  - Provide recommendations and follow up as necessary.
  - Provide documentation as to the health and health care needs of the individual.

**Guidelines**

- The primary provider may be an Advanced Practice Nurse (APN) practicing in accordance with the regulations outlined in the APN section of the Nurse Practice Act.

Survey Instrument and Citations 2015

**Criteria**

- The individual has a physician who is responsible for coordination of medical needs for the individual; provide recommendations and follow up as necessary; and provide documentation regarding the health and health care needs of the individual.
- The primary provider may be an Advanced Practice Nurse (APN) Section 335.011 RSMo and/or a Physician Assistant (PA) Section. 334.735 RSMo



**SECTION (D) MEETING BASIC NEEDS**  
**1. ASSURING AND PROMOTING GOOD HEALTH**  
**OUTCOME: Individuals maintain good health.**

---

**9 CSR 45-5.010 (3) (D) 1. B. Individuals obtain medical care at intervals recommended for other persons of similar health status.**

Survey Instrument 2004

**Criteria**

- Individuals in residential habilitation and ISL must have an annual physical exam.
- Day habilitation programs must have health information for the individual which would be pertinent to safely provide services/supports. Documentation is not necessary if there are no unusual health issues.
- Obtain routine medical and preventive medical care at intervals typical for the person's gender and age.
- Due to medications the physician prescribed, the physician may need to see the person more frequently for follow-up lab work and treatment.
- There may be ongoing daily, weekly, monthly, quarterly health needs that require regular monitoring by a physician.
- Emergency health care needs receive immediate attention and follow-up.
- The individual's record contains documentation that follow-up is completed for recommended appointments and lab work.
- When health care problems are identified by staff or consumer, there should be documentation that follow-through occurred.

**Guidelines**

- Requirement for annual physical does not apply to people supported in off-site day habilitation living in their natural homes. However, staff need pertinent health information to insure safety, e.g. some medications require that the person stay out of the sun, possible seizures, etc. This information should be updated as needed.
- Examples of documentation may be: information in the person's plan; a summary of the pertinent health issues (for example, if the individual is diabetic; has a seizure disorder; meds may cause skin photosensitivity; person is lactose intolerant and should not have milk; etc.); a statement from the primary health care provider regarding ability to participate in the program; or a copy of the physical exam.
- Examples include pelvic exams for adult women, mammograms after 40, Prostrate Specific Antigen (PSA) for adult men, etc. The Health Care Protocols: A Handbook for DD Nurses, 1998, has information related to screening and routine tests.
- Residential habilitation programs (group homes) and ISLs must have reports from ordered lab tests on file.

Survey Instrument and Citations 2015

**Criteria**

- In the event the contractor is providing residential services, the contractor shall obtain an annual physical examination for each department consumer receiving services. Contract for Service 3.5.3
- Obtain routine medical and preventive medical care at intervals typical for the individual's gender and age.
- The physician, **APN or PA** may need to examine the individual more frequently due to acute/chronic conditions or prescribe medications for follow-up lab work and treatment.
- There may be ongoing daily, weekly, monthly, quarterly health needs that require regular monitoring by a physician, **APN or PA**.
- Emergency health care needs receive immediate attention and follow-up.
- The individual's record contains documentation that follow-up is completed for recommended appointments, lab work, **and identified health concerns**.
- **A physician, APN or PA may send a letter to the individual indicating test results are within normal range.**
- **\*\* / \*\*\* Must have health information for the individual which would be pertinent to safely provide services/supports.**

\*\*Independent Living Skills Development (ILSD)

\*\*\*Employment Services

**SECTION (D) MEETING BASIC NEEDS**  
**1. ASSURING AND PROMOTING GOOD HEALTH**  
**OUTCOME: Individuals maintain good health.**

**9 CSR 45-5.010 (3) (D) 1. C. Individuals obtain dental examinations at intervals recommended for other persons of similar health status and receive follow-up dental treatment as needed.**

Survey Instrument 2004

**Criteria**

- There is evidence of regular check ups and cleaning, at least on an annual basis.
- There is evidence of follow-up visits as determined by the dentist.
- Dental recommendations are followed.
- When dental problems are identified by staff or consumer, there should be documentation that follow-through occurred.

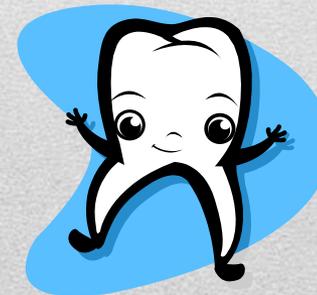
**Guidelines**

- Day habilitation programs must have dental information for the individual only when pertinent to safely providing services/supports. Examples may include such things as the individual wears dentures; food must be mechanically altered; the individual has an alteration in chewing or swallowing ability; adaptations in oral hygiene are needed; etc.
- Day habilitation programs do not have to maintain records of dental visits.

Survey Instrument and Citations 2015

**Criteria**

- The individual receiving residential services shall have an annual dental examination by a dentist and follow-up, unless otherwise recommended by the dentist.
- “Dental services” means diagnostic, preventative, or corrective procedures provided by or under the supervision of a dentist in the practice of his profession. Centers for Medicare and Medicaid Services 42 CFR Part 440.100



**SECTION (D) MEETING BASIC NEEDS**  
**1. ASSURING AND PROMOTING GOOD HEALTH**  
**OUTCOME: Individuals maintain good health.**

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**9 CSR 45-5.010 (3) (D) 1. D. Individuals requiring specialized medical services have access to specialists.**

Survey Instrument 2004

**Criteria**

- The agency obtains services with specialists if needed and/or recommended; and follows through with any recommendations.

Survey Instrument and Citations 2015

**Criteria**

- Services and any follow-up are obtained with specialists if needed and/or recommended.

**SECTION (D) MEETING BASIC NEEDS**  
**1. ASSURING AND PROMOTING GOOD HEALTH**  
**OUTCOME: Individuals maintain good health.**

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**9 CSR 45-5.010 (3) (D) 1. E. Individuals are offered support in preparation for medical and dental care.**

Survey Instrument 2004

**Criteria**

- Staff assist the person to use some means of relieving stress when this is an issue for the person.

**Guidelines**

- Preparations for medical and dental visits are individualized.

Survey Instrument and Citations 2015

**Criteria**

- The individual is supported in their choices regarding services and supports and who provides them. It will optimize individual initiative, autonomy and independence in making life choices. Centers for Medicare and Medicaid Services 42 CFR Part 441.710



**SECTION (D) MEETING BASIC NEEDS**  
**1. ASSURING AND PROMOTING GOOD HEALTH**  
**OUTCOME: Individuals maintain good health.**

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**9 CSR 45-5.010 (3) (D) 1. F. Individuals eat well balanced diets appropriate to nutritional needs.**

Survey Instrument 2004

**Criteria**

- A balanced variety of healthy foods are available to the person each day.
- Persons have access to food and drink unless restricted by medical order.
- Substitutions should be available and offered if food is refused.
- At no time should food be used as punishment.
- Staff are aware of any dietary restrictions. **(This criteria has been included in the next Principle).**

Survey Instrument and Citations 2015

**Criteria**

- A balanced variety of healthful foods are available to the individual each day.
- Individuals have access to **food and drink at any time** unless restricted by medical order. **Centers for Medicare and Medicaid Services 42 CFR Part 441.710, 430, 431, et. al.**



**SECTION (D) MEETING BASIC NEEDS**  
**1. ASSURING AND PROMOTING GOOD HEALTH**  
**OUTCOME: Individuals maintain good health.**

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**9 CSR 45-5.010 (3) (D) 1. G. Individuals who have special dietary needs have those needs reviewed by a dietary consultant.**

Survey Instrument 2004

**Criteria**

- A physician orders special diets.
- If a dietary consult is ordered by the physician, the special diet is reviewed to determine if the diet is positively affecting the person's overall health status. Recommendations of the dietary consult should be followed.
- There must be documentation and progress notes regarding whether the diet is followed and any observations of physical or behavioral responses.

**Guidelines**

- Ask provider if there is anyone who is on a specially ordered diet.
- The dietary consultant may be a Registered Dietician or nurse. This is required for physician-ordered special diets.
- Examples may be signs of high or low blood sugar for someone on a diabetic diet; documented weight loss for someone on a calorie-restricted diet; etc.

Survey Instrument and Citations 2015

**Criteria**

- A physician, **APN or PA** orders a special diet; **it is reviewed by a dietary consultant as specified.**
- **The provider is knowledgeable of any restrictive, mechanical, and/or specialized dietary needs of the individual(s).**
- **There is documentation available for review of staff training specific to an individual's needs.**
- **In the absence of a medical order, if an individuals' access is restricted, or if the individual disagrees, there must be evidence of due process. Section 630.115 RSMo**

**SECTION (D) MEETING BASIC NEEDS**  
**1. ASSURING AND PROMOTING GOOD HEALTH**  
**OUTCOME: Individuals maintain good health.**

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**9 CSR 45-5.010 (3) (D) 1. H. Individuals have options to participate in fitness programs.**

Survey Instrument 2004

**Criteria**

- Individuals know and can describe the program.

**Guidelines**

- This only applies if an exercise program has been ordered by the physician to address a specific health need and is not followed.

Survey Instrument and Citations 2015

**Criteria**

- Individuals may have access to health and fitness club memberships, fitness equipment and/or accessories. The fitness routine and schedule is determined by the individual.



**SECTION (D) MEETING BASIC NEEDS**  
**1. ASSURING AND PROMOTING GOOD HEALTH**  
**OUTCOME: Individuals maintain good health.**

---

**9 CSR 45-5.010 (3) (D) 1. I. Individuals' health is protected through measures typically taken to prevent communicable diseases for persons with similar health status.**

Survey Instrument 2004

**Criteria**

- There are infection control and prevention policies that are in accordance with current CDC and Missouri Department of Health and Senior Services recommendations.
- Staff must be trained in body substance precautions.
- Staff are observed to use body substance precautions.
- Soap, towels, and disinfectant are available.
- When a communicable disease has been diagnosed, provider must have documentation that:
  - appropriate measures have been taken to prevent transmission;
  - there has been adequate training for staff; and
  - there is appropriate treatment/care.
- Persons receiving residential habilitation or ISL services must have an annual TB test, unless otherwise contraindicated or ordered.
  - If a TB test is positive, there must be documentation of follow-up of the ongoing treatment plan by the primary health care provider.
- Persons receiving residential or ISL services must have a Hepatitis B vaccination. Documentation must be maintained that the Hep B vaccination was offered; whether or not vaccination was taken; or, if not taken, there must be a signed declination form that includes explanation of risk.
- Immunizations are kept current with guidelines of the Missouri Department of Health and Senior Services.

**Guidelines**

- These should address, at a minimum, use of body substance precautions and reporting of communicable diseases.
- If a person who attends day habilitation has a communicable disease, the day program staff must have information on the disease; how to prevent transmission; and how to care for the person.
- Staff is not currently required to be tested for TB. Day habilitation programs (both on and off-site) are not required to have evidence of TB testing for the individual maintained in the file.
- Day habilitation programs (both on and off-site) are not required to have HEP B immunization information on file.
- For residential habilitation and ISL, information regarding immunizations appropriate for the age group should be found in the record, to include any refusal of individual/guardian to obtain the immunizations.

Survey Instrument and Citations 2015

**Criteria**

- Infection control and prevention policies are in accord with current Center for Disease Control (CDC) recommendations.
  - These will address, at a minimum, use of body substance precautions and reporting of communicable diseases.
- When a communicable disease has been diagnosed, the provider has documentation that appropriate measures have been taken to prevent transmission and that there has been adequate training.
- **During orientation**, staff is trained in body substance precautions and agency procedures. The documentation is available for review.
- Individuals receiving Group Home or Individualized Supported Living (ISL) services must have an annual tuberculin test, unless otherwise ordered by a physician. If a tuberculin test is positive, there must be documentation of ongoing treatment by the physician.
- Individuals receiving Group Home or ISL services must have a hepatitis B vaccination. Documentation must be maintained that the hepatitis B vaccination was offered and whether the vaccination was taken. If not received, there must be a signed declination.

\* / \*\* / \*\*\* **Individuals are not required to have a tuberculin test or hepatitis B vaccination.**

\***Host Home**

\*\***Independent Living Skills Development (ILSD)**

\*\*\***Employment Services**

**SECTION (D) MEETING BASIC NEEDS**  
**1. ASSURING AND PROMOTING GOOD HEALTH**  
**OUTCOME: Individuals maintain good health.**

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**9 CSR 45-5.010 (3) (D) 1. J. Individuals participate in making decisions about their health care to the maximum extent of their capacities, and their decisions about their health care are recognized and supported.**

Survey Instrument 2004

**Criteria**

- This Principle was omitted from the Survey Instrument of 2004.

Survey Instrument and Citations 2015

**Criteria**

- Individuals report and/or documentation supports that benefits and potential consequences have been shared with the individual prior to medical/dental treatment or intervention.



**SECTION (D) MEETING BASIC NEEDS**  
**1. ASSURING AND PROMOTING GOOD HEALTH**  
**OUTCOME: Individuals maintain good health.**

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**9 CSR 45-5.010 (3) (D) 1. K. Individuals make informed choices about taking prescribed medications.**

Survey Instrument 2004

**Criteria**

- Individuals should have access to the following information:
  - Type of medications;
  - Purpose of medications;
  - Time to take medications;
  - Side effects of medications;
  - How the medication is to be taken;
  - What supports, if any, will be necessary; and
  - How long the medication is to be taken.
- A consumer has a right to refuse medications. If a person refuses medication, documentation shows that the agency has provided supports so that the person is making an informed choice and has been given information of the consequences of not taking the medication.
- If the person has consistently refused to take medications, there should be documentation that the person's team has evaluated the person's ability to make an informed choice.

**Guidelines**

- Information is to be documented in the individual's record.
- Access means that a person receiving supports or a guardian must have access upon request.

Survey Instrument and Citations 2015

**Criteria**

- **Individuals and/or guardians have received the necessary information to make informed decisions regarding prescribed medication.**
- An individual has a right to refuse medications. If an individual refuses medication, documentation shows that the agency has provided supports so that the individual is making an informed choice.
- Individual and staff have the following information available for review: type of medications; purpose of medications; time to take medications; side effects of medications; how the medication is to be taken; what supports, if any, will be necessary; and how long the medication is to be taken.



**SECTION (D) MEETING BASIC NEEDS**  
**1. ASSURING AND PROMOTING GOOD HEALTH**  
**OUTCOME: Individuals maintain good health.**

**9 CSR 45-5.010 (3) (D) 1. L. Individuals take medications as prescribed.**

Survey Instrument 2004

**Criteria**

- A licensed physician or APN prescribes all medications, except first aid topicals.
- All medications should have a prescribed dosage and time.
- There must be a method of recording all prescribed medications.
- All prescribed medications should have a side effect sheet available to the person and/or support staff.
- Regarding self-administration of medications, the contract states: "The contractor may allow the resident or client self-administer medication if pre-approved on the client's services/support plan. The contractor shall ensure that the resident of client understands the purpose and side effects of their medication. The contractor shall monitor the resident's or client's self-administration of medication so as to ensure their safety and health. Contractor personnel working with residents or clients who self-administer medication do not require training in medication administration but shall be knowledgeable about the resident's or client's medication regime and their possible side effects." Part II, 15.2.
- If the individual self-administers medications, then it must be indicated in the plan. It is not required that there be any reference to self-administration of medications if the person does not self-administer medications.

**Guidelines**

- Physicians orders must be present in the record, including in day habilitation. Copies of the orders are acceptable for day habilitation.
- If a consumer never takes medication during off site day habilitation service, the agency is not responsible for medications. If a consumer lives in their own home (not ISL placement) and receives a few hours of OSDH, takes meds on own and medication supports are not in the person's plan, the agency is not responsible for recording.
- If a person self-administers medications that means that the staff are released from keeping the MAR documentation.
- If a person self-administers medications:
  - The person's interdisciplinary team has pre-approved the self-administration of medication and this is documented in the person's plan.
  - The individual has been provided training in administering his or her own medications and recording the medications administered and demonstrates responsibility in taking prescribed medications and recording them appropriately. Ask the person.
  - The individual knows how to call or get support if a dosage is missed, extra medication is taken or an adverse reaction is experienced. Ask the person.
  - The individual has been educated and knows how to utilize the pharmacy and/or physician, or knows how to get supports to access their medical records, report problems with prescriptions, etc. Ask the person.
  - The agency must have a system for monitoring self-administration. Ask about the agency's system and review the procedures.
  - Ongoing documentation may not be necessary if the individual has been provided with the necessary information and can manage his/her own medication administration without difficulty. The agency may not be keeping an MAR.

Survey Instrument and Citations 2015

**Criteria**

- A licensed physician, **APN or PA** prescribes all medications and herbal supplements, except for nonprescription topical medications.
- All medications have a prescribed dosage and time.
- **There are policies and procedures** regarding the medication system for documentation of all medication administered to the individual.
- **All prescribed medications have a side effect profile available for review.**
- **When an individual is under the care of several physicians at the same time, all physicians' orders should be kept together and available for review. A list of medication should accompany an individual when being seen by a consulting physician.**
- **9 CSR 45-3.070 CERTIFICATION of LEVEL I MEDICATION AIDES SERVING PERSON WITH DEVELOPMENTAL DISABILITIES.**
  - \* The agency will provide a copy of the individual's physician order(s) to the respite or relief provider.

**\*\*/\*\* If an individual is not administered medication at these sites, this is not applicable.**

**\*Host Home**

**\*\*Independent Living Skills Development (ILSD)**

**\*\*\*Employment Services**

**SECTION (D) MEETING BASIC NEEDS**  
**1. ASSURING AND PROMOTING GOOD HEALTH**  
**OUTCOME: Individuals maintain good health.**

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**9 CSR 45-5.010 (3) (D) 1. M. Individuals are supported in safely managing their medications.**

Survey Instrument 2004

**Criteria**

- If a person is learning to take their own medications, this is considered partial participation. Staff must have oversight of documentation on the MAR.

**Guidelines**

- Staff are responsible for following or supporting the person to follow all requirements of medication administration including documentation on the MAR, labeling, storage, etc.
- Progress notes about learning to self-administer medications should address the goals in the person's plan.

Survey Instrument and Citations 2015

**Criteria**

- If an individual is learning to take their own medications, this is considered partial participation, but not self-administration. Staff must have oversight of the process.
- If individuals self-administer medications, authorization to do so must be approved by the team participating in the development of the ISP and documented in the ISP.
- Self-administration is the act of taking one's own medication. It is demonstrated by the ability to manage ALL aspects of medication administration; this means the medication is in the complete control of the individual receiving the medication.

**SECTION (D) MEETING BASIC NEEDS**  
**1. ASSURING AND PROMOTING GOOD HEALTH**  
**OUTCOME: Individuals maintain good health.**

---

**9 CSR 45-5.010 (3) (D) 1. N. Individuals' medications are regularly evaluated to determine their continued effectiveness.**

Survey Instrument 2004

**Criteria**

- Medications must be regularly evaluated as determined by the physician and/or as effects of medications are noticed.
- Medications must be evaluated at least annually or as recommended by the physician.
- Prescribed medications should have prescription renewal determined by the physician.
- The support staff knows the prescription renewal process.
- The person should be supported in accessing his/her physician for regular medication reviews as determined by the physician.
- There should be evidence that if medications are not being effective based on the intent of the prescription the person should be supported in having the physician review the need for continuation of the medication.

**Guidelines**

- Ask staff if they know what a person's medications are for; where staff would look to find out; if the person has shown any side effects; and where they would look to find out what the medications side effects are.
- Examples could include: some medications need more frequent evaluation and monitoring such as lithium, closaril, dilantin, etc.; if person is receiving medications for blood pressure, then vital signs should be monitored on routine basis for effectiveness of med to keep BP within normal limits; effectiveness of seizures med. through seizure record documentation.
- This requirement doesn't pertain to how often medication orders are signed.
- There should be signed doctor's orders in the person's record. There should be documentation that staff are following doctor's orders for review of medications.

Survey Instrument and Citations 2015

**Criteria**

- Medications must be evaluated by the physician, **APN or PA** at least annually or as needed and orders shall not exceed one year.
- There must be a signed physician's order in the individual's record.
- The support staff knows the prescription renewal process.
- There should be evidence that if medications are not being effective based on the intent of the prescription the individual should be supported in having the physician review the need for continuation of the medication.

**\*\*/\*\* If an individual is not administered medication at these sites, this is not applicable.**

**\*\*Independent Living Skills Development (ILSD)**  
**\*\*\*Employment Services**

**SECTION (D) MEETING BASIC NEEDS**  
**1. ASSURING AND PROMOTING GOOD HEALTH**  
**OUTCOME: Individuals maintain good health.**

---

**9 CSR 45-5.010 (3) (D) 1. 0. Individuals who take medications are supported by people who have received information about the individuals' medical conditions, know how the medications should be taken, and are aware of possible side effects.**

Survey Instrument 2004

**Criteria**

- Staff who pass medications have passed a medication administration course as required in the 9 CSR 45-3.070 Certification of Medication Aides Serving Persons with Developmental Disabilities.
- Staff who pass medications must follow the practices taught in the Level I Medication Aide course or Medication Aides Serving Persons with Developmental Disabilities.
- All staff training related to medications is documented in the personnel file.
- Medication administration training is updated every 2 years and documented in the personnel record.
- Staff recognizes medication errors and knows how to report them.
- Medications are stored, administered, and disposed of in accordance with generally accepted standards.

**Guidelines**

- The following must be in personnel record: a copy of a certificate for Level I Medication Aide or certificate for Medication Aide Serving People with Developmental Disabilities.
- The Level I Med Aide and MRDD Med Aide curriculum outlines generally accepted standards.

Survey Instrument and Citations 2015

**Criteria**

- All staff who administer medication must provide documentation of **initial** and current **medication administration training as required by 9 CSR 45-3.070.**
- Medication errors are **reported according to 9 CSR 10-5.206 REPORT OF EVENTS.**
- Medications are stored, administered, and disposed of in accordance with generally accepted standards.
- **Registered Nurses who oversee the practice of medication administration and Licensed Practical Nurses who administer medications must maintain a current active license to practice nursing in the State of Missouri. It is the agency's responsibility for ensuring that these staff remain in such status.**
- **Nursing oversight shall be provided by Registered Nurses (RNs) licensed and in good standing in the state of Missouri. Contract for Services 3.6.1**

**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

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**9 CSR 45-5.010 (3) (D) 2. A. Individuals receive the degree of supervision consistent with personal ability and the nature of the environment.**

Survey Instrument 2004

**Criteria**

- Staffing patterns that have been developed and approved by the regional center should be implemented.

**Guidelines**

- Required staffing patterns are determined by the Regional Center during the contract process for Day Habilitation and Residential Habilitation and in the budget for ISL. Staffing patterns are not found in the person's plan.
- Observe number of staff supporting individuals and discuss staffing pattern with agency director and staff.

Survey Instrument and Citations 2015

**Criteria**

- Staffing ratios and levels of supervision are identified in the individual's ISP.

**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

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**9 CSR 45-5.010 (3) (D) 2. B. Individuals' homes and other environments are clean, safe, and well maintained.**

Survey Instrument 2004

**Criteria**

- Person's homes and other environments are maintained in a way that ensures their safety and well being.
- Water temperature should be at a safe level.

**Guidelines**

- Clean means different things to different people. At the minimum, it would mean that persons are not living or receiving supports where there is visible filth, insects/pests, or obnoxious smells, such as urine, etc.
- Safe would mean that individuals' environments are conducive to their safety and well-being, and that no harm can come to them by virtue of being in the environment. This would include that regular maintenance is performed to keep all appliances, equipment, fire safety supplies, stairs, etc. in good working order.
- An individual should be able to hold a hand under the tap without the temperature feeling so hot the hand needs to be removed.

Survey Instrument and Citations 2015

**Criteria**

- Individuals' homes and other environments are maintained in a way that ensures their safety and well being; individuals are not living where there is visible filth, insects/pests, or noxious smells, such as urine, etc.
- **The agency is responsible for documentation of home maintenance and water temperatures. Water temperatures are maintained at a safe level.**

**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

**9 CSR 45-5.010 (3) (D) 2. C. Individuals' homes and other environments have modifications or adaptations to ensure safety.**

Survey Instrument 2004

**Criteria**

- Modifications and/or adaptations for safety may include if needed, but are not limited to:
  - Grab bars.
  - Non-slip surfaces for independent bathing.
  - Clamps and jigs in the work place or living environment.
  - Clothing adaptations.
  - Vehicles with lifts and/or automatic seat belts.
  - Phones to meet person's needs, i.e., automatic dials, larger numbers, TTY.
  - Accessibility codes met for person who are non-ambulatory.

**Guidelines**

- Modifications and/or adaptations refer to those characteristics of the environment that make it possible for people to participate in daily life activities to the best of their capabilities and to maintain a safe lifestyle.
- Adaptations should be minimally conspicuous and non-stigmatizing.

Survey Instrument and Citations 2015

**Criteria**

- Individuals' homes have modifications and/or adaptations for safety. Modifications and/or adaptations refer to those characteristics of the environment that make it possible for individuals to safely participate in daily life activities to the best of their capabilities.



**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

**9 CSR 45-5.010 (3) (D) 2. D. Individuals' homes and other environments have passed externally conducted health, safety, and mechanical inspections.**

Survey Instrument 2004

**Criteria**

- If not on a public water supply, the water should be inspected annually by a health agency.

**Guidelines**

- Requirements for fire/safety inspections are included in 9 CSR 45-5.110 for On-site Day Habilitation; and 9 CSR 45-5.130, 5.140 and 5.150 for Residential Habilitation. ISLs do not require an external fire safety inspection.



Survey Instrument and Citations 2015

**Criteria**

- A site not located on a public water supply, shall have the water inspected annually by a **public health agency** or **state certified laboratory**.
- **Any site served by a volunteer fire association or subscription fire department must provide documentation of current contract or proof of membership.**
- Requirements for fire/safety inspections are included in 9 CSR 45-5.110 for ILSD and employment programs; 9 CSR 45-5.130, 5.140 and 5.150 for Group Homes.
- ISL's **and Host Homes** do not require an external fire safety inspection.

**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

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**9 CSR 45-5.010 (3) (D) 2. E. Individuals' safety is assured through preventive maintenance of vehicles, equipment, and buildings.**

Survey Instrument 2004

**Criteria**

- There are systems in place, performed on a regular basis and in a timely manner, to ensure the preventive maintenance of vehicles, equipment and buildings.
- There is documentation of regular and preventative maintenance performed on agency-owned vehicles, agency-owned equipment and agency-owned buildings.

Survey Instrument and Citations 2015

**Criteria**

- There is documentation of regular and preventative maintenance performed on agency-owned vehicles, agency-owned equipment and agency-owned buildings.
- Individualized Supported Living and Host Home sites will have carbon monoxide detectors on each level (with the exception of all-electric buildings without attached garage).
- Additional requirements related to fire/safety are contained in 9 CSR 45-5.110 and in 9 CSR 45-3.130, 5.140 and 5.150.



## SECTION (D) MEETING BASIC NEEDS 2. ASSURING INDIVIDUAL SAFETY

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

### **9 CSR 45-5.010 (3) (D) 2. F. Individuals are transported safely.**

#### Survey Instrument 2004

##### **Criteria**

- If the agency owns the vehicles or provides transportation to persons the following conditions should be met:
  - All drivers should have valid driver's license.
  - All vehicles must be properly insured, licensed, and inspected - both personal vehicles and agency-owned.
  - The vehicles should have working seat belts for the number of passengers and use them.
  - Insurance and emergency information should be contained in the vehicle in case of emergency situation.
  - Vehicles that transport persons with physical disabilities are adapted to meet their needs.

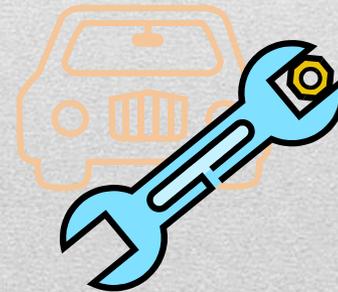
##### **Guidelines**

- Verification of current drivers license should be maintained in files.
- Vehicles must have current inspection sticker and current license plates. Personnel records should contain verification of insurance for staff who use their own vehicles to transport individuals. The agency maintains insurance verification for agency-owned vehicles.
- The agency has a plan for staff to follow in case of emergency which includes such information as who to call, what to do in inclement weather, etc. At a minimum it must have the 911 and/or local EMS number, agency emergency call number and insurance information. This should be in an accessible place in the care, such as glove compartment, sun visor, etc.

#### Survey Instrument and Citations 2015

##### **Criteria**

- There is a plan for staff to follow in case of emergency. **The plan shall be accessible and must include 911** and/or local EMS number and the agency's emergency call number.
- Provider owned vehicles are properly registered, inspected, insured and maintained.
- Vehicles shall have working seat belts.
- Vehicles that transport individuals with physical disabilities shall be accessible.
- Verification of current drivers license must be maintained in personnel files.



**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

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**9 CSR 45-5.010 (3) (D) 2. G. Individuals have the option to participate in home repair and maintenance training.**

Survey Instrument 2004

**Criteria**

- The agency has provided opportunities for individuals to participate or have partial participation in home repair or maintenance training.

**Guidelines**

- Ask the provider and the person if there have been these types of opportunities which can include things such as changing light bulbs, smoke alarm batteries, learning how to do simple repairs, etc.

Survey Instrument and Citations 2015

**Criteria**

- There are opportunities for individuals to participate or have partial participation in home repair or maintenance training.



**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

**9 CSR 45-5.010 (3) (D) 2. H. The temperature of individuals' homes is within an accepted comfort range of sixty-eight (68°) to seventy-eight (78°) degrees Fahrenheit.**

Survey Instrument 2004

**Criteria**

- The temperature of individual homes is within the accepted comfort range.

**Guidelines**

- Talk with the individual(s) supported to determine if the temperature meets their comfort level. Check the thermostat.

Survey Instrument and Citations 2015

**Criteria**

- The temperature of an individual's home is within the accepted comfort range.



**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

---

**9 CSR 45-5.010 (3) (D) 2. I. Individuals are supported in responding to emergencies in a safe manner.**

Survey Instrument 2004

**Criteria**

- Individuals and support staff are trained in emergency procedures for fire, medical emergency, tornado, earthquake, flood (if appropriate to area) and others if appropriate to the person's safety.
- Individuals have access to the necessary adaptations to respond to emergency situations, i.e., if a person uses a wheelchair this should be accessible to the person at all times.
- Emergency information and phone numbers are maintained and are accessible to the person and support staff at all times.

**Guidelines**

- Staff verbalizes what to do in emergencies. Individuals can tell or show how to respond, if able.
- Emergency information should be in a place that is readily available such as in a drawer by the phone, inside a cabinet door, etc. It is not required to be posted.

Survey Instrument and Citations 2015

**Criteria**

- Individuals have the opportunity to participate in the implementation of the agency's emergency planning and procedures for fire, medical emergency, missing person, tornado, earthquake, flood (if appropriate to area) and others if appropriate to the individual's safety.
- Staff is knowledgeable about what to do in case of emergencies. Individuals can tell or show how to respond.
- Individuals have the necessary adaptations to respond to emergency situations.
- Emergency information and phone numbers are maintained and are accessible.

**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

**9 CSR 45-5.010 (3) (D) 2. J. Individuals participate in emergency drills occurring during daytime, evening, and nighttime hours at least four (4) times annually.**

Survey Instrument 2004

**Criteria**

- The following information must be maintained for ISLs :
  - 3 fire drills; and
  - 1 natural disaster drill.

**Guidelines**

- Drills should take place on all shifts on which the individuals supported are present. Drills are not required in ISL if the individual is able to self-evacuate and does not have 24-hour staff supervision. Additional requirements related to fire/safety are contained in 9 CSR 45-5.110 for On-site Day Habilitation; and in 9 CSR.45-5.130, 5.140 and 5.150 for Residential Habilitation.
- If individuals need to be carried out or if individuals are considered medically fragile and participation in drills would put them at risk, staff may practice drills by substituting someone else for the individual(s). Such an emergency drill must be designed to be specific to the individual(s).

Survey Instrument and Citations 2015

**Criteria**

- The following information must be maintained for ISLs **and Host Homes** :
  - 3 fire drills; and
  - 1 natural disaster drill.
- All staff shall participate in drills. Drills shall take place on all shifts. One drill shall be conducted during an individual's hours of sleep.
- Drills are not required in an ISL if the individual is able to self- evacuate and does not have 24-hour staff supervision.
- **\* Host homes must conduct fire and disaster drills within one week of the arrival of a new resident. Shared Living Manual**
- Additional requirements related to fire/safety are contained in 9 CSR 45-5.110 and in 9 CSR 45-3.130, 5.140 and 5.150.

**\*Host Home**

**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

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**9 CSR 45-5.010 (3) (D) 2. K. Individuals are supported or served by staff who are knowledgeable about emergency procedures.**

Survey Instrument 2004

**Criteria**

- There are written procedures for meeting emergencies and disasters such as fire, severe weather, missing person, vehicle breakdown, etc. available to all staff.
- Staff is considered knowledgeable about emergency procedures under these conditions:
  - Staff understand and can demonstrate and explain emergency procedures.
  - Staff is knowledgeable of emergency exits and methods to evacuate when exits could be blocked.
  - Staff knows the support needs of the person in responding to an emergency situation.

**Guidelines**

- Copies of written procedures for emergencies should be in each home for staff to review/use.
- Ask staff what to do in case of emergencies.
- Ask staff to point out exits and to describe other methods used if exits are blocked.
- Ask staff about the support needs of the individuals.

Survey Instrument and Citations 2015

**Criteria**

- There are written procedures and **documentation of staff training at orientation** for meeting emergencies and disasters such as fire, severe weather, missing person, vehicle breakdown, etc.
- **In the event of a medical emergency, the first call should be 911.**
- The agency maintains documentation that staff supporting individuals **are knowledgeable and** participate in emergency drills and can explain **all** emergency procedures.
- Staff are knowledgeable of supports **required in the individual's emergency plan** and are provided training as the individual's needs change.

**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

**9 CSR 45-5.010 (3) (D) 2. L. Individuals have access to adequate evacuation exits.**

Survey Instrument 2004

**Criteria**

- There is at least one means of exit or pathway to an exit on each floor.
- The means of exit must be accessible and safe to the person.
- The means of exit must not be blocked.
- Exit doors are easily opened.
- Fire doors are not propped open.
- All corridors/passageways required for exit have a clear path of travel.

**Guidelines**

- Adequate evacuation exits means that there are enough modes or methods by which a person could evacuate in an emergency situation. It also means that these evacuation exits are accessible to meet the person's need to evacuate as independently as possible. Exits could be doors or windows but must be easily accessible and usable by the person.
- The number of total exits depends upon the person and the design of the home.
- If the person and his/her team determines that an emergency plan should be developed, this plan reflects the unique needs of the person specific to the environment.

Survey Instrument and Citations 2015

**Criteria**

- There is at least one means of exit or pathway to an exit on each floor. **This is contingent upon the individual(s) mobility and the design of the home.**
- Exits could be doors or windows, but must be accessible and safe for the individual.
- The means of exit must not be blocked or secured.
- Exit doors are easily opened.



**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

**9 CSR 45-5.010 (3) (D) 2. M. Individuals have properly marked and easily accessible firefighting equipment in their homes.**

Survey Instrument 2004

**Criteria**

- All homes have at least 1 fire extinguisher in or near the kitchen area.
- Fire extinguisher has expiration date or preventive maintenance tag/documentation, and indicator of charge. The fire extinguisher has directions for use on the equipment.
- Fire extinguishers must be in areas where, in case of emergency, persons can locate and obtain the equipment quickly.

**Guidelines**

- Look for the fire extinguisher.
- Fire extinguishers must be charged and have a current tag.
- Ask staff and individuals to point out the fire extinguisher.

Survey Instrument and Citations 2015

**Criteria**

- All homes have at least one fire extinguisher accessible in or near the kitchen area.
- The fire extinguisher(s) has an expiration date or maintenance tag/documentation, and indicator of charge. The fire extinguisher has directions for use on the equipment **and is within the expiration date.**



**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

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**9 CSR 45-5.010 (3) (D) 2. N. Individuals' homes have operating smoke detectors.**

Survey Instrument 2004

**Criteria**

- There will be an operable smoke detector in or near each bedroom and in proximity to the area where any individual or staff sleeps.
- There is a smoke detector on each level of the home.

**Guidelines**

- Observe smoke detectors and check that they are operational. Additional requirements related to fire/safety are contained in 9 CSR 45-5.110 for On-site Day Habilitation; and in 9 CSR.45-5.130, 5.140 and 5.150 for Residential Habilitation.

Survey Instrument and Citations 2015

**Criteria**

- All homes have operable smoke detectors in or near each bedroom and in proximity to the area where an individual or staff sleeps.
- There is a smoke detector on each level of the home, **including basements.**

**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

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**9 CSR 45-5.010 (3) (D) 2. 0. Individuals have adaptive emergency alarm systems based upon need.**

Survey Instrument 2004

**Criteria**

- Persons who cannot react to emergency situations in a safe and expedient manner should have the supports necessary.
- If adaptive alarm systems are in use, they are tested and working.
- An emergency drill outlines the support needs of the individuals to safely evacuate.

**Guidelines**

- Persons may require various types of emergency alarm systems to meet their needs in getting help or reacting to emergency situations.
- Persons who are blind may need alarms or vibrating systems.
- Persons who are deaf may need alarms that use lights or vibrating systems.
- A person who has 24-hour staff is not required to have a specialized adaptive system.

Survey Instrument and Citations 2015

**Criteria**

- Individuals who cannot react to emergency situations in a safe and expedient manner will have the supports necessary **to implement their individual emergency plan.**
- If adaptive alarm systems are in use, **there is documentation** that they are tested and working.

**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

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**9 CSR 45-5.010 (3) (D) 2. P. Individuals have options to take first aid, have access to basic first-aid supplies, or are provided first aid by knowledgeable staff.**

Survey Instrument 2004

**Criteria**

- All staff must have current certification in First Aid, taught by a certified trainer.
- Documentation of training is maintained in the personnel file.
- There are first aid supplies available in each home and accessible for persons to safely administer first aid that would include but are not limited to:
  - Band-Aids.
  - Bandages.
  - Antiseptic.
  - Tape for bandages.
  - Scissors.

**Guidelines**

- This applies to residential habilitation, on- and off-site day habilitation and ISL services.
- There must be at least one person on duty in each home that is certified to administer first aid.

Survey Instrument and Citations 2015

**Criteria**

- All staff must have certification in first aid, taught by a certified trainer using curricula that is approved by or comparable to **National Safety Council, American Red Cross, or American Heart Association with demonstration of competency.**
- **All staff must maintain current certification.**
- First-aid supplies are available in each site.

**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

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**9 CSR 45-5.010 (3) (D) 2. Q. Individuals are provided cardio pulmonary resuscitation by knowledgeable staff.**

Survey Instrument 2004

**Criteria**

- All staff are trained and certified in CPR by a certified trainer.
- Documentation of training/certification is maintained in the personnel file.
- All persons certified in CPR renew their certificates as follows:
  - American Red Cross – Annually.
  - American Heart Association – Every 2 years.

**Guidelines**

- CPR training must be competency based.

Survey Instrument and Citations 2015

**Criteria**

- All staff must have certification in cardio pulmonary resuscitation (CPR) taught by a certified trainer using curricula that is approved by or comparable to **National Safety Council, American Red Cross, or American Heart Association with demonstration of competency.**
- **All staff must maintain current certification.**

**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

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**9 CSR 45-5.010 (3) (D) 2. R. Individuals incurring injuries or experiencing unusual incidents have the injuries or incidents documented in their files.**

Survey Instrument 2004

**Criteria**

- Procedures on notifying the regional center of any injuries or unusual incidents are implemented.
- Procedures for documenting injuries or unusual incidents in a person's record are implemented.

**Guidelines**

- Incident is defined as an occurrence that might have led or did lead to an undesirable outcome.
- Injury is defined as any physical harm or damage that requires medical treatment more intensive than minor first aid.
- Incident and injury forms are not kept in the individual's file but in a facility file and copies forwarded to the regional center.

Survey Instrument and Citations 2015

**Criteria**

- Incident is defined as an occurrence that might have led or did lead to an undesirable outcome.
- Injury is defined as any physical harm or damage that requires medical treatment more intensive than minor first aid.
- Incident and injury forms are not kept in the individual's file but in a facility file and copies forwarded to the regional office.

**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

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**9 CSR 45-5.010 (3) (D) 2. S. Individuals are supported or served by staff who have pertinent information to facilitate ordinary or emergency notification of family, guardians, or other interested parties.**

Survey Instrument 2004

**Criteria**

- The following information should be made available and accessible to support staff to ensure timely emergency notification:
  - Full name of the person.
  - Insurance information (Medicaid, Medicare, social security, etc.).
  - List of persons who are to be notified in emergency situations:
    - Name of person.
    - Phone number(s).
    - Address.
    - Relationship to the person.

**Guidelines**

- Pertinent information refers to those names, numbers, addresses, etc. of the persons' family members, guardians and others active in ensuring the safety and well-being of the person.
- The information may be at or near a telephone or in some other accessible place of the individual's choice.

Survey Instrument and Citations 2015

**Criteria**

- At a minimum, **pertinent health information** includes name, **healthcare** insurance, guardian and provider contact.



**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

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**9 CSR 45-5.010 (3) (D) 2. T. Individuals' safety is assured by secure storage of materials and equipment necessary for household maintenance.**

Survey Instrument 2004

**Criteria**

- Combustible supplies and equipment should be stored safely.
- The person has recorded in his/her file the amount of support needed to utilize toxic compounds. Toxic compounds are locked if the person supported cannot utilize them safely without if the person supported cannot utilize them safely without supports.

**Guidelines**

- Safely means away from any source of heat or flame such as furnace, water heater, stove, etc.
- Toxic materials are locked only if required by a person's plan.
- References to locked toxic materials are only in the plans of those individuals who have this identified as a safety issue.
- Other examples of secure storage may include, but are not limited to: compressed gas cylinders secured to prevent falling; wool blankets prohibited from use when using oxygen; sharps discarded in prescribed containers which are not overfull.

Survey Instrument and Citations 2015

**Criteria**

- Combustible supplies and equipment are stored safely at each site.
- The individual has recorded in his/her **ISP** the amount of support needed to safely access storage of materials and equipment necessary for household maintenance.

**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

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**9 CSR 45-5.010 (3) (D) 2. U. Individuals and staff use safe and sanitary practices in all phases of food preparation and clean up.**

Survey Instrument 2004

**Criteria**

- Where food is prepared and where the clean up of meals is conducted, the following is required:
  - Soap and towels are readily available to wash and dry hands in the area.
  - Working surfaces, such as countertops, stoves, dishes, etc., are clean.
  - Appliances that cook and clean are in good working condition.
  - Dishes are washed in hot soapy water and rinsed in hot water, or washed in an automatic dishwasher.
  - There are no offensive odors present.
  - There are no rodents or insects in the area.

**Guidelines**

- Safe means that the area where persons will be preparing food and cleaning up after meals or cooking have the appropriate appliances and supports to do this without fear of injuring themselves.
- If food is being prepared during a survey visit, observe safe and sanitary practices.

Survey Instrument and Citations 2015

**Criteria**

- Food preparation and storage areas are sanitary and safe food handling procedures are followed.



**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

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**9 CSR 45-5.010 (3) (D) 2. V. Individuals who need assistance to eat in an upright position are provided needed supports and adaptations.**

Survey Instrument 2004

**Criteria**

- Persons who do not eat in an upright position should have the following documentation in the individuals record:
  - The reason the person cannot eat in an upright position.
  - The position to be utilized when eating.

**Guidelines**

- Individuals are provided the specialized techniques and equipment needed for nourishment.

Survey Instrument and Citations 2015

**Criteria**

- Individuals are provided the specialized techniques and equipment **necessary for correct positioning.**
- **These practices are documented in the ISP.**
- **Documentation of staff training is available for review.**

**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

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**9 CSR 45-5.010 (3) (D) 2. W. Individuals use mechanical supports only as prescribed.**

Survey Instrument 2004

**Criteria**

- These supports must be prescribed by a physician or APN yearly.
- Mechanical supports are present and being used as prescribed.

**Guidelines**

- Mechanical supports refers to those items and/or equipment utilized to maintain or enhance a person's ability to perform daily activities more independently. They may include, but are not limited to, wheelchairs, walkers, braces, helmets, orthotics, reachers, etc.
- Determine that staff knows the supports needed and how to use them by observing and asking questions.

Survey Instrument and Citations 2015

**Criteria**

- Mechanical supports must be prescribed by a physician, **APN or PA.**
- Mechanical supports refer to those items and/or equipment utilized to maintain or enhance an individual's ability to perform daily activities more independently.
- Staff is knowledgeable about the supports needed and how to use them.
- **Documentation of staff training is available for review.**



**SECTION (D) MEETING BASIC NEEDS  
2. ASSURING INDIVIDUAL SAFETY**

**OUTCOME: Individuals' environments are safe while assuring choice and freedoms.**

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**9 CSR 45-5.010 (3) (D) 2. X. Individuals use adaptive, corrective, mobility, orthotic and prosthetic equipment that is in good repair.**

Survey Instrument 2004

**Criteria**

- Documentation of repairs and ongoing preventive maintenance based on the manufacturer recommendations is maintained.
- If the equipment is broken, the person has use of replacement equipment that is of equal quality until his/her equipment is repaired.
- Documentation of staff training on the use and maintenance procedures for any equipment and/or device is maintained.

Survey Instrument and Citations 2015

**Criteria**

- Documentation of staff training on the use and maintenance procedures for any equipment and/or device is maintained.
- Documentation of repairs and ongoing preventive maintenance of equipment is maintained and available for review.

# GENERAL PROGRAM PROCEDURES

## Section 630.170 RSMo, 9 CSR 10-5.190, Criminal Record Review (Revision Pending)

### Survey Instrument 2004

#### Criteria

- In addition to the above requirements, all agencies must comply with 9 CSR 10-5.190 Criminal Record Review.



### Survey Instrument and Citations 2015

#### Criteria

- All personnel provided by the contractor must have background checks conducted in accordance with Section 630.170 RSMo; 9 CSR 10-5.190 and Contract for Services 2.5.2 .
- The provider shall initiate the criminal background check and inquiries prior to contact with individuals supported.
- Thereafter, the provider is responsible for ensuring that staff are free of disqualifying felonies or adverse actions by the Department of Health and Senior Services and DMH.

# GENERAL PROGRAM PROCEDURES

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## 9 CSR 10-5.200 Report of Complaints of Abuse, Neglect and Misuse of Funds/Property

### Survey Instrument 2004

#### Criteria

- This was not included in the Survey Instrument of 2004.

### Survey Instrument and Citations 2015

#### Criteria

- Providers must maintain written policies requiring their employees to report events under this regulation and those events identified in 9 CSR 10-5.200.

# GENERAL PROGRAM PROCEDURES

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## 9 CSR 10-5.206 Report of Events

### Survey Instrument 2004

#### Criteria

- This was not included in the Survey Instrument of 2004.

### Survey Instrument and Citations 2015

#### Criteria

- The policies must make clear that administrative or disciplinary sanction may result from failure to report. Providers must ensure that their employees and those that support the agency are educated about the department's notification and reporting requirements. 9 CSR 10-5.206 (2)(A)
- It is the responsibility of the provider to notify the department with a written or verbal report of all events reportable under this regulation involving the consumers as identified on the report form. 9 CSR 10-5.206 (2) (B)

# GENERAL PROGRAM PROCEDURES

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## 9 CSR 10-5.210 Exceptions Committee Procedures

### Survey Instrument 2004

#### Criteria

- This was not included in the Survey Instrument of 2004.

### Survey Instrument and Citations 2015

#### Criteria

- Request for exceptions should be sent to Exceptions Committee Coordinator, Office of Legal Counsel, Department of Mental Health, PO Box 687, Jefferson City, MO 65102.

## Instrument Addendums-Links

**9 CSR 45-5.010** Certification of Medicaid Agencies Serving Persons with Developmental Disabilities

**9 CSR 45-5.060** Procedures to Obtain Certification

**9 CSR 45-5.105** Definitions for Fire Safety Rules

**9 CSR 45-5.110** Fire Safety for On-Site Day Habilitation

**9 CSR 45-5.130** Fire Safety for Residential Habilitation for 4-9 People

**9 CSR 45-5.140** Fire Safety for Residential Habilitation for 10-16 People

**9 CSR 45-5.150** Fire Safety for Residential Habilitation for 17 or More People

Link below:

<http://www.sos.mo.gov/adrules/csr/current/9csr/9c45-5.pdf>

**9 CSR 45-3.070** Certification of Medication Aides Serving People with Developmental Disabilities

Link below:

<http://www.sos.mo.gov/adrules/csr/current/9csr/9c45-3.pdf>

**9 CSR 45-3.070** Certification of Medication Aides Serving People with Developmental Disabilities

Link below:

<http://www.sos.mo.gov/adrules/csr/current/9csr/9c45-3.pdf>

## **Instrument Addendums-Links**

**9 CSR 10-5.190** Background Screening for Employees and Volunteers

**9 CSR 10-5.200** Report of Abuse, Neglect and Misuse of Funds/Property

**9 CSR 10-5.206** Report of Events

**9 CSR 10-5.220** Privacy Rule of Health Insurance Portability and Accountability Act of 1996 (HIPAA)

Link Below:

<http://www.sos.mo.gov/adrules/csr/current/9csr/9c10-5.pdf>

**Section 334.735.1 RSMo-** Physicians and Surgeons--Therapists--Athletic Trainers--Health Care Providers

Link Below:

<http://www.moga.mo.gov/mostatutes/stathtml/33400007351.html?&me=334.735>

**Nurse License Verification**

Link Below

<https://www.nursys.com>

**Nurse Licensure Compact**

Link Below:

<https://www.ncsbn.org/nurse-licensure-compact.htm>

## Instrument Addendums-Links

### **Section 630.110 RSMo-Patients rights - limitations**

Link Below:

<http://www.moga.mo.gov/mostatutes/stathtml/63000001101.html?&me=630.110>

### **Section 630.115 RSMo - Patient's entitlements--administrative review of violations**

Link Below:

<http://www.moga.mo.gov/mostatutes/stathtml/63000001151.html?&me=630.115>

### **Section 630.170 RSMo -Disqualification for employment because of conviction--appeal process--criminal record review, procedure--registry maintained, when--appeals procedure**

Link Below:

<http://www.moga.mo.gov/mostatutes/stathtml/63000001701.html?&me=630.170>

### **Section 630.192 RSMo - Limitations on research activities in mental health facilities and programs**

Link Below:

<http://www.moga.mo.gov/mostatutes/stathtml/63000001921.html?&me=630.192>

## **Instrument Addendums-Links**

### **Shared Living Manual**

Link Below:

<http://dmh.mo.gov/docs/dd/SharedLivingManual.pdf>

### **Federal Register-Code Federal Regulation**

Link Below:

<http://www.ecfr.gov/cgi-bin/ECFR?page=browse>

### **DMH Certification Application**

Link Below:

<http://dmh.mo.gov/docs/dd/CertificationApp.pdf>

### **MO Quality Outcomes**

Link Below:

<http://dmh.mo.gov/docs/dd/QualityoutMan.pdf>

### **Center for Disease Control**

Link Below:

<http://www.cdc.gov/>

## **Instrument Addendums-Links**

### **DD Waiver Manual**

Link Below:

<http://dmh.mo.gov/dd/manuals/waivermanuals.html>