

**481—65.12(135C) Individual program plan (IPP).** An initial program plan shall be developed within 24 hours of admission. This plan shall be based on information gained from the resident, family, physician or referring facility. Services to be provided shall be addressed. Intervention to be provided, if and when the need arises, shall also be addressed in the IPP. The plan shall be followed until the IPP required in subrule 65.12(1) is complete. The initial plan shall be completed by a registered nurse, a qualified social worker or a QMHP. (II, III)

**65.12(1)** An individual program plan for each resident shall be developed by an interdisciplinary team. The resident or the resident's legal guardian has the ultimate authority to accept or reject the plan unless otherwise determined by the court. The IPP shall be approved and have implementation monitored by the QMHP. (II, III)

*a.* The IPP shall be based on the individual service plan of the referring agency, if available, the information contained in the social history, the need for services identified in the evaluation, and any other pertinent information. (III)

*b.* The facility shall assist the resident in obtaining access to academic services, community living skills training, legal services, self-care training, support services, transportation, treatment, and vocational education as needed. These services may be provided by the facility or obtained from other providers. (III)

*c.* Services to the resident shall be provided in the least restrictive environment and shall incorporate the principle of normalization. (III)

*d.* If needed services are not available and accessible, the facility shall document the actions taken to locate and obtain those services. The documentation shall identify needs which will not be met because of the lack of available services. (III)

*e.* The IPP shall be developed within 30 days following admission to the facility and renewed at least annually. (II, III)

*f.* The IPP shall be written, dated, signed by the interdisciplinary team members, and maintained in the resident's record. (III)

*g.* Written notice of the meeting to develop an IPP shall be mailed or delivered to everyone included in the interdisciplinary team conference at least two weeks before the scheduled meeting. (III)

**65.12(2)** The IPP shall include the following:

*a.* Goals, (III)

*b.* Objectives, (III)

*c.* Specific services to be provided, (III)

*d.* People or agency responsible for providing services, (III)

*e.* Beginning date, (III) and

*f.* Anticipated duration of services. (III)

**65.12(3)** The IPP shall set out the procedure to be used to evaluate whether objectives are achieved. This procedure shall incorporate a process for ongoing review and revision. (III)

**65.12(4)** The interdisciplinary team shall review the IPP at a team meeting at least quarterly and when the resident's condition changes. (II, III)

*a.* The interdisciplinary team shall develop a written report which addresses:

(1) The resident's progress toward objectives; (II, III)

(2) The need for continued services; (II, III)

(3) Recommendations concerning alternative services or living arrangements; (II, III) and

(4) Any recommended change in guardianship, conservatorship or commitment status. (II, III)

*b.* The report shall reflect those involved in the review, the date of the review, and be maintained in the resident's record. (III)

**65.12(5)** There shall be procedures for recording the activities of each service provider and a mechanism to coordinate the activities of all service providers. Resident response to all activities shall be recorded. (III)

*a.* Staff shall create a record at the time of a service required by the IPP. If this is not possible, the record shall be written no more than seven days later. (III)

- b.* When the services are provided more than once a week, staff may make a monthly summarized entry in the resident's record. (III)
- c.* Entries shall be dated and signed by the person who provides the service. (III)
- d.* Entries shall be made when incidents occur. (III)
- e.* Entries shall be written in terms of behavioral observations and specific activities. Entries that involve subjective interpretations of a resident's behavior or progress shall be clearly identified and shall be supplemented with descriptions of behavior upon which the interpretation was based. (III)

This rule is intended to implement Iowa Code section 135C.14.