**Section 390.1010 Service Programs**

a) The facility shall provide, either directly or through arrangements with an outside resource, as needed by the individual resident, all services necessary to maintain and promote good physical health and development. These services shall consist of, at a minimum, the following: (B)

1) Medical Services as described in Section 390.1020. (B)

2) Physician Services described as in Section 390.1030. (B)

3) Nursing Services described in Section 390.1040. (B)

4) Dental Services as described in Section 390.1050. (B)

5) Physical and Occupational Therapy Services as described in Section 390.1060. (B)

6) Psychological Services as described in Section 390.1070. (B)

7) Social Services as described in Section 390.1080. (B)

8) Speech Pathology and Audiology Services as described in Section 390.1090. (B)

9) Recreational and Activity Services as described in Section 390.1100. (B)

10) Educational Services as described in Section 390.1110. (B)

11) Work Activity and Prevocational Training Services as described in Section 390.1120. (B)

b) These services shall be expressed in a written individual habilitation plan. The individual habilitation plan is a total program plan of care for each individual resident that is developed on the basis of all assessment results.

c) Each resident shall have an individual habilitation plan developed within 14 days of admission. This plan shall be reviewed and updated approximately six weeks following admission and every six months thereafter or more frequently as necessary, to assure continuing appropriateness of goals, consistency of management methods with goals and objectives, and the achievement of progress towards goals.

d) The individual habilitation plan shall be developed by an appropriately constituted interdisciplinary team and state specific objectives to reach identified goals.

e) Each goal and objective shall:

1) reflect the residents needs as identified by assessment data;

2) be stated in terms of a single outcome;

3) be expressed in terms that provide measurable indices of progress;

4) be sequenced within a developmental progression, when applicable;

5) be assigned priorities;

6) project a date for initiation of service;

7) have a targeted date of attainment;

8) specify activities for achievement of the objectives;

9) be written in terms that are understandable to all concerned;

10) identify the individual responsible for delivering the services.

f) The residents' response to programs designed to achieve the objectives shall be documented and available to staff.

g) Problems or changes that call for review of the individual habilitation plan by the interdisciplinary team shall be documented.

(Source: Amended at 13 Ill. Reg. 6301, effective April 17, 1989)