**Section 115.120 Definitions**

For the purpose of this Part, the following terms are defined:

"Abuse." See definition found in 59 Ill. Adm. Code 50.10.

"Applicant." A person, group of persons, association, organization, partnership, or corporation that applies for a license to provide community-integrated living arrangement services under this Part.

"Assigned Independent Receiver" or "Receiver." A court appointed qualified person, who assumes custodial responsibility for a CILA agency that is operating without a license or whose license has been suspended, revoked, or refused renewal. This person cannot be an owner or an affiliate of the CILA agency which is in receivership.

"Authorized CILA agency representative." The administrative head of a CILA agency, or their designee, appointed by the CILA agency's governing body with overall responsibility for fiscal and programmatic management.

"Authorized electronic monitoring." *The placement and use of an electronic monitoring device by* an individual in their *room in accordance with* the Authorized Electronic Monitoring in Community-Integrated Living Arrangements and Developmental Disability Facilities *Act*[210 ILCS 165/5].

"Aversive procedures." The application, contingent on the exhibition of a specific behavior that is not adaptive, of unpleasant or painful stimuli, or stimuli that have a potentially noxious affect. Aversive procedures have the following characteristics:

Obvious signs of physical pain experienced by the individual.

Potential or actual physical side effects, including tissue damage, physical illness, severe stress, and/or death.

Dehumanization of the individual, through means such as social degradation, social isolation, verbal abuse, techniques inappropriate for the individual's age, and treatment out of proportion to the target behavior.

"BALC." The Department's Bureau of Accreditation, Licensure and Certification.

"BQM." The Bureau of Quality Management in the Department's Division of Developmental Disabilities.

"Certification." A status granted by the Department to a specific site whose programs operate under this Part, successfully meet its standards, and provide services to promote community-integrated living.

"CILA agency" or “CILA provider.” A developmental disability services agency that is licensed by the Department to provide community-integrated living arrangement services for individuals with a developmental disability. (Section 3(b) of the Community-Integrated Living Arrangements Licensure and Certification Act)

“CILA services.” Residential supports that a CILA agency is paid to deliver to individuals with developmental disabilities that promote health, well-being, maximum independence, choice-making, access to the greater community to the same degree as individuals not receiving HCBS.

"Code." The Mental Health and Developmental Disabilities Code [405 ILCS 5].

"Coercion." Any action whereby an individual, guardian, or family member is compelled by force, intimidation, or threat to act, or refrain from action, in a manner contrary to how the individual would have acted if permitted to act in accordance with their free and informed choice.

"Community-integrated living arrangement (CILA)." A residential setting or site that is certified by the Department *where eight or fewer* individuals with a developmental disability *reside* together in an apartment, house, or one or more units in a multi-unit building *under the supervision of* an *agency* and are provided with an array of services. (Section 3(d) of the Community-Integrated Living Arrangements Licensure and Certification Act).

"Community integration" or "integration into the community. "Individualsreceiving Medicaid HCBS having opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS (42 CFR 441.301(c)(2)(i)). Examples of on-going engagement in community life for individuals with developmental disabilities include:

Time spent out of the home participating in non-disability specific activities chosen by the individual and guardian that are available to the greater community, such as spiritual and cultural interests, places of worship (e.g., church, temple, mosque, synagogue or other places of worship), recreational activities, education, library, clubs, shopping and amusements.

Participation in activities, celebrations, (e.g., holidays, birthdays, reunions) communication (wireless, electronic, and/or mail) and vacations.

"Confidentiality Act." The Mental Health and Developmental Disabilities Confidentiality Act [740 ILCS 110].

"Continuous supervision or support." Direction or assistance provided to an individual under the auspices of the licensed CILA agency (i.e., not an Intermittent CILA). An employee or any other person compensated or in a volunteer capacity, but not the guardian of the individual, with responsibility for care of individuals served from the licensed CILA agency, or another agency through which any portion of CILA services is being provided, must be physically present on-site all hours individuals are present, unless otherwise specified in an individual’s Personal Plan and provided for in their Implementation Strategy. Continuous supervision or support may range from being in immediate line of sight to the individual receiving services, to present and accessible to the individual receiving services, depending on the individual's Implementation Strategy.

"Critical Incidents." Any alleged, suspected, or actual occurrence of an incident when there is reason to believe the health or safety of an individual may be adversely affected or an individual may be placed at a reasonable risk of harm. Critical incidents for this Part shall include abuse, neglect, and financial exploitation as defined in 59 Ill. Adm. Code 50. Critical Incidents shall also include deaths not otherwise reportable pursuant to 59 Ill. Adm. Code 50, injuries of known or unknown origin, medical emergencies, unscheduled hospitalizations, missing individuals, peer-to-peer or peer-to-staff acts of aggression, and involvement of law enforcement and/or fire department.

"Day." A calendar day, unless otherwise indicated.

"Department" or "DHS." The Illinois Department of Human Services.

"Developmental disability." An intellectual disability or other severe, chronic disability, other than mental illness, found to be closely related to an intellectual disability because this condition results in impairment of general intellectual functioning or adaptive behavior similar to that of persons with ID, and requires services similar to those required for a person with an intellectual disability. In addition, a developmental disability:

is manifested before the individual reaches 22 years of age;

is likely to continue indefinitely;

results in substantial functional limitations in three or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, or economic self-sufficiency; and

reflects the individual's need for a combination and sequence of special interdisciplinary or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated (modified from the American Association on Intellectual and Developmental Disabilities, Intellectual Disability: Definition, Diagnosis, Classification, and Systems of Supports, 12th Edition (2021)).

"Diagnosis." A category of disability stated in accordance with the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-V) or the most recently published version (800 Maine Avenue, S.W., Suite 900, Washington, DC 20024 (2013).

"Direct Support Professional" or "DSP". Any person who provides habilitative care, services, or support to individuals with developmental disabilities and is listed on the Department's Health Care Worker Registry as a trained DSP or DDD Aide under its Program section. DSPs shall be trained in accordance with this Part and function under the supervision of a Qualified Intellectual Disabilities Professional (QIDP), a Licensed/Registered Nurse, or other higher-level employee authorized by the CILA agency.

"Division of Developmental Disabilities," "Division," or "DDD." The Department’s Division of Developmental Disabilities.

"Electronic monitoring device." *A surveillance instrument with a fixed position video camera or an audio recording device, or a combination thereof, that is installed in* an individual's *bedroom under the provisions of* the Authorized Electronic Monitoring in Community-Integrated Living Arrangements and Developmental Disability Facilities *Act and broadcasts or records activity or sounds occurring in the room* [210 ILCS 165/5]*.*

"Employee." For the purposes of this Part, any individual hired, employed, or retained by a CILA agency, whether paid or on an unpaid basis.

"Entitlements." Government-related financial benefits available to individuals who qualify on the basis of need, disability and/or income, such as Title XVIII (Medicare) (42 U.S.C. 1395b-1 (1996)), Title XIX (Medicaid) (42 U.S.C. 1396a (1996)) and Veteran's Administration benefits (38 U.S.C. 521, 541, 542 (1996)).

“Exploitation” or "Financial Exploitation." See definition of financial exploitation found in 59 Ill. Adm. Code 50.10.

"Governing body." The policy-making authority of a CILA agency that establishes policies concerning the CILA agency's operation and the welfare of individuals; provides for the CILA agency's administration by appointing an authorized CILA agency representative to implement its policies; and exercises general oversight of the CILA agency's operation, its fiscal affairs and programmatic content to implement the organization's mission.

"Guardian." The plenary or limited guardian or conservator of the individual appointed by the court for an individual over age 18 (when the limited guardian's duties encompass concerns related to service requirements), or the natural or adoptive parent of a minor, or a person acting as a parent of a minor. All references in this Part to an "individual and/or guardian" include the guardian only if applicable.

"Habilitation." Individually tailored supports that assist individual with developmental disabilities with the acquisition, retention, or improvement in skills related to living in the community. Services are developed in accordance with the needs of the individual and include supports to foster independence and encourage development of a full life in the community, based upon what is important to and for the individual, as documented in their Person-Centered Plan. This includes assisting and teaching individuals to attain new and maintain and improve existing skills in areas of self-care, daily living, adaptive skills, leisure, and community integration, including building and maintaining relationships. Additionally, it may include efforts to prevent regression or decelerate loss of function. *Habilitation may include, but is not limited to, diagnosis, evaluation, medical services, residential care, day care, special living arrangements, training, education, employment* related services*, protective services, counseling, and other services provided to* individuals *with a developmental disability by developmental disabilities programs*. [405 ILCS 5/1-111]

"Host family." One or more persons unrelated to the individual with developmental disabilities, employed by or contracting with the CILA agency, who reside with the individual.

“Host family living arrangement” or “Host family setting”. A 24-hour residential setting, serving as an alternative to a typical shift staff arrangement. The setting is the residence for the person with a developmental disability and the host family.

"Host family living arrangement − traditional care model." A 24-hour residential alternative to a typical shift staff arrangement. The setting is the residence for the person with a developmental disability and the full-time residence for the paid host family. It is owned, leased, or rented by the paid host family. In these settings, host families consist of one or more persons who are unrelated to the individual with a developmental disability, and who contract with the CILA agency.

"Host family living arrangement − shared living model." A 24-hour residential alternative to a typical shift staff arrangement. The setting is the residence for the person with a developmental disability and may house either full or part-time paid host family in which more than 50 percent of the residential coverage is provided by individuals other than shift staff employees. It is owned, leased, or rented by the individuals, host family, or CILA agency. In these settings, host families consist of one or more persons who are unrelated to the individual with a developmental disability, and who are employed by or contract with the CILA agency. The difference between traditional care and shared living models is shift employees routinely share supervision, care, and training responsibilities with the host family in the shared living model.

"Host family services." Residential supports, provided in a host family living arrangement, that a CILA agency is paid to deliver to individuals with developmental disabilities that promote health, well-being, maximum independence, choice-making, and access to the greater community to the same degree as individuals not receiving HCBS.

"Imminent risk." A preliminary determination of immediate, threatened, or impending risk of illness, mental injury, or physical injury to an individual as would cause a reasonably prudent person to take immediate action and that is not immediately corrected, such as environmental or safety hazards.

"Implementation Strategy." A document developed by the licensed CILA agency in conjunction with the individual or the individual’s guardian that describes and directs the activities and methods used to provide services and supports for the areas of an individual's Personal Plan for which the CILA agency has agreed to be responsible. The priorities, strengths, support needs, and risk factors identified in the Personal Plan must be addressed and accounted for in the Implementation Strategy for those areas of the CILA agency's responsibility. The document must describe how the CILA agency will support the person to pursue the outcomes included in the Personal Plan and be signed by the person, guardian, and ISC.

"Independent Monitor" or "Monitor." An individual, employee, contractor, or any other person compensated or in a volunteer capacity with a business entity who has been assigned by the Department to oversee the business affairs of a CILA when any of the following situations occur:

The CILA agency is operating without a license;

The Department has suspended, revoked, or refused to renew the existing license of the CILA agency;

The Department has issued a notice to terminate or not renew its agreement with the CILA agency;

The CILA agency is closing or has informed the Department that it intends to close and adequate arrangements for transition of individuals have not been made at least 30 days prior to closure;

The Department determines that an emergency (a threat to the health, safety, or welfare of individuals that the CILA agency is unwilling or unable to remedy) exists; or

The Department, with the Department of Healthcare and Family Services, terminates the CILA provider’s participation in the federal reimbursement program under Title XIX (Medicaid) of the Social Security Act (42 U.S.C. 7).

The monitor cannot be Department or State agency staff. The monitor shall observe operation of the facility, assist the facility by advising it on how to comply with the State regulations, and shall report periodically to the Department on the operation of the facility.

"Independent Service Coordination agency" or "ISC". A contracted entity designated by DDD to carry out certain federal and State requirements related to assessment, determination of eligibility and service coordination for individuals with a developmental disability. This entity provides conflict of interest free case management, including development and monitoring of an individual's Personal Plan, to DDD Medicaid HCBS Waiver participants. They also serve as the front line for information and assistance to help individuals and families navigate the system, ensure informed choice, link individuals to services and address problems related to outcomes and quality.

"Individual" or "individuals." A person or persons who receives or receive community-integrated living arrangement services.

"Individual representatives." Persons chosen by individuals and representing the interests of individuals served by a CILA agency such as family members, guardians, and advocates.

"Individually owned or controlled." A physical setting in which the individual resides that is owned, co-owned, leased, or rented by the individual. This setting is not provider-owned or controlled.

"Informed consent." Permission freely granted by the individual or guardian based on full disclosure to the individual or guardian of the benefits and/or liabilities of participation in specific procedures and/or services, including releases of information, as part of the individual's Personal Plan and Implementation Strategy.

"Intellectual Disability." A disorder with onset during the developmental period (before the individual reaches age 22), that includes both intellectual and adaptive deficits in conceptual, social, and practical domains. The following criteria must be met:

deficits in intellectual functions such as reasoning, problem solving, planning, abstract thinking, judgment, academic learning, and learning from experience confirmed by both clinical assessment and individualized, standardized intelligence testing (generally indicated with an IQ score of about 70 or below);

deficits in adaptive functioning that result in failure to meet developmental and sociocultural standards for personal independence and social responsibility. Without ongoing support, the adaptive deficits limit functioning in one or more activities of daily life, such as communication, social participation, and independent living, across multiple environments, such as home, school, work, and community; and

onset of intellectual and adaptive deficits during the developmental period.

(Modified from the American Psychiatric Association (2013), Diagnostic and Statistical Manual of Mental Disorders (5th ed.) and the American Association on Intellectual and Developmental Disabilities, Intellectual Disability: Definition, Diagnosis, Classification, and Systems of Supports, 12th Edition (2021)).

"Intermittent supervision or support." Supervision or support provided to an individual under the auspices of a licensed CILA agency less than 24-hours per day (i.e., not a 24 hour or host family CILA). When employees are not on-site, supervision or support shall be provided by means of 24-hour on-call availability and by a variety of alternatives or supports, such as natural and remote supports.

"Mental health professional" or "MHP." See definition of mental health professional found in 89 Ill. Adm. Code 140.453.

"Mental illness." For purposes of this Part, mental illness refers to the target population of adults with serious mental illness (SMI), as established by the Department's Division of Mental Health and defined as:

Individuals with serious mental illness are adults whose emotional or behavioral functioning is so impaired as to interfere with their capacity to remain in the community without supportive treatment. The mental impairment is severe and persistent and may result in a limitation of their capacities for primary activities of daily living, interpersonal relationships, homemaking, self-care, employment, or recreation. This impairment may limit their ability to seek or receive local, State, or federal assistance such as housing, medical and dental care, rehabilitation services, income and food assistance, or protective services.

The individual must have one of the following diagnoses that meets DSM-5 criteria and that is the focus of the treatment being provided:

Delusional Disorder (F22)

Brief Psychotic Disorder (F23)

Schizophreniform Disorder (F20.81)

Schizophrenia (F20.9)

Schizoaffective Disorder (F25.x)

Catatonia Associated with another Mental Disorder (Catatonia Specifier) (F06.1)

Other Specified Schizophrenia Spectrum and Other Psychotic Disorder (F28)

Unspecified Schizophrenia Spectrum and Other Psychotic Disorder (F29)

Bipolar I Disorder (F31.xx)

Bipolar II Disorder (F31.81)

Cyclothymic Disorder (F34.0)

Unspecified Bipolar and Related Disorder (F31.9)

Disruptive Mood Dysregulation Disorder (F34.8)

Major Depressive Disorder Single episode (F32.xx)

Major Depressive Disorder, Recurrent episode (F33.xx)

Obsessive-Compulsive Disorder (F42)

Posttraumatic Stress Disorder (F43.10)

Anorexia Nervosa (F50.0x)

Bulimia Nervosa (F50.2)

Postpartum Depression (F53.0)

Puerperal Psychosis (F53.1)

Factitious Disorder Imposed on another (F68.A)

And the individual must meet the criteria for either treatment history or functional criteria as follows:

Treatment history covers the individual's lifetime treatment and is restricted to treatment for the DSM-5 diagnosis specified in this definition. To qualify under treatment history, the individual must meet at least one of the following criteria:

Continuous treatment of six months or more, including treatment during adolescence, in one, or a combination of, the following modalities: inpatient treatment, day treatment or partial hospitalization;

Six months continuous residence in residential programming (e.g., long-term care facility or assisted, supported, or supervised residential programs);

Two or more admissions of any duration to inpatient treatment, day treatment, partial hospitalization, or residential programming within a 12-month period;

A history of using psychotropic medication management, case management, or outreach and engagement services over a one-year period, either continuously or intermittently; or

Previous treatment in an outpatient modality, and a history of at least one mental health psychiatric hospitalization.

Functional criteria have been purposely narrowed to descriptors of the most serious levels of functional impairment and are not intended to reflect the full range of possible impairment.) To qualify under functional criteria, the individual must meet at least two of the following conditions:

Has a serious impairment in social, occupational, or school functioning;

Is unemployed or working only part-time due to mental illness and not for reasons of physical disability or some other role responsibility (e.g., student or primary caregiver for dependent family member); is employed in a sheltered setting or supportive work situation; or has markedly limited work skills;

Requires help to seek public financial assistance for out-of-hospital maintenance (e.g., Medicaid, SSI, other indicators);

Does not seek appropriate supportive community services, e.g., recreational, educational, or vocational support services, without assistance;

Lacks supportive social systems in the community (e.g., no intimate or confiding relationship with anyone in their personal life, no close friends or group affiliations, is highly transient or has inability to co-exist within a family setting);

Requires assistance in basic life and survival skills (e.g., must be reminded to take medication, must have transportation to mental health clinic and other supportive services, needs assistance in self-care, household management, food preparation or money management, is homeless or at risk of becoming homeless); or

Exhibits inappropriate or dangerous social behavior that results in demand for intervention by the mental health and/or judicial/legal system.

If the individual does not currently meet the functional criteria, but is currently receiving treatment and has a history within the past five years of functional impairment meeting two of the functional criteria that persisted for at least 12 months, and there is documentation supporting the professional judgment that regression in functional impairment would occur without continuing treatment, then the individual will be determined to have met the functional criteria.

"Natural environment." A setting where an individual not receiving HCBS typically spends time, including home, work, places of worship, community centers, libraries, parks, recreation centers, educational settings, or other public buildings. These sites are not licensed, certified, accredited or identified as a provider.

"Natural supports." Unpaid assistance provided to an individual with a developmental disability typically by a person who has some type of friendship, kinship or other relationship (co-worker, member of the same social group) with the individual, whom the individual accepts into their life and with whom the individual has chosen to spend some duration of time and not just a single action done out of courtesy.

"Neglect." See definition found in 59 Ill. Adm. Code 50.10.

"Notice of deficiency." A report submitted to a CILA agency by the Department listing the CILA agency's deficiencies with this Part noted during a survey.

"Personal Plan." A written document developed by an ISC agency in conjunction with the individual and guardian as well as family members, providers of services and others (e.g., friends or individual’s representatives) as chosen by the individual and guardian that includes an assessment of the individual's strengths, preferences, needs, and desired outcomes. The document contains the outcomes that the individual requires in their life, describes what is important to the individual regarding delivery of services in a manner which ensures both personal preferences and health and welfare, including risk factors and means to minimize them. It includes the services that are to be furnished to the individual, the amount and frequency of each service, and the type of provider to furnish each service.

"Plan of correction." A written plan submitted by a CILA agency to the Department, in response to a notice of deficiency, that describes the steps the CILA agency will take in order to bring a program or services into compliance, and the time-frames for completion of each step.

"Professional." An employee, contractual worker, or any other person, compensated or in a volunteer capacity designated as a professional by virtue of license, certification, or education. For the purpose of this Part, Direct Support Professionals are not included in this definition.

"Provider." See definition of "CILA agency."

"Provider-owned or controlled." A physical setting in which the individual resides that is:

owned, co-owned, leased or rented by an agency that provides Home and Community-Based Services; or

owned, co-owned, leased or rented by a third party that has a direct or indirect financial relationship with an agency that provides Home and Community-Based Services.

"Provider Support Team." A team consisting of the QIDP and a DSP; a nurse, or other professional staff (such as occupational therapist or speech therapist) when necessary, and other staff as consistent with the individual’s Personal Plan and Implementation Strategy, all of whom directly serve the individual.

"Psychotropics." Drugs used for antipsychotic, antidepressant, antimanic and/or antianxiety purposes as listed in the American Hospital Formulary Services (AHFS) Drug Information Manual (American Society of Health-System Pharmacists, 7272 Wisconsin Avenue, Bethesda MD 20814 (2018)) (AGENCY NOTE: This document is published annually and updated quarterly.); the Physician's Desk Reference (PDR) (Medical Economics Company, Five Paragon Drive, Montvale NJ 07645-1742 (2017)) (AGENCY NOTE: This document is published annually.); and the Drug Facts and Comparisons (Facts and Comparisons, 111 West Port Plaza, Suite 300, St. Louis MO 63146-3098 (2017)) (AGENCY NOTE: This document is published annually and updated monthly.).

"Qualified Intellectual Disabilities Professional" or "QIDP". A QIDP must have at least one year of experience working directly with individuals with intellectual disabilities or other developmental disabilities and be one of the following (42 CFR 483.430):

a doctor of medicine or osteopathy licensed pursuant to the Medical Practice Act of 1987 [225 ILCS 60];

a registered professional nurse licensed pursuant to the Nurse Practice Act [225 ILCS 65];

an occupational therapist or occupational therapist assistant certified by the American Occupational Therapy Association or other comparable body pursuant to the Illinois Occupational Therapy Practice Act [225 ILCS 75];

a physical therapist certified by the American Physical Therapy Association or other comparable body pursuant to the Illinois Physical Therapy Act [225 ILCS 90];

a physical therapist assistant registered by the American Physical Therapy Association or a graduate of a two-year college-level program approved by the American Physical Therapy Association or comparable body;

a psychologist with at least a master's degree in psychology from an accredited school pursuant to the Clinical Psychologist Licensing Act [225 ILCS 15];

a social worker with a bachelor's degree from a college or university or graduate degree from a school of social work accredited or approved by the Council on Social Work Education or another comparable body, pursuant to the Clinical Social Work and Social Work Practice Act [225 ILCS 20];

a speech-language pathologist or audiologist with a certificate of Clinical Competence in Speech-Language Pathology or Audiology granted by the American Speech Language Hearing Association or comparable body or meeting the education requirements for licensure and being in the process of accumulating the supervised experience required for licensure pursuant to the Illinois Speech-Language Pathology and Audiology Practice Act [225 ILCS 110];

a professional recreation staff person with a bachelor's degree in recreation or in a specialty area such as art, dance, music, or physical therapy;

a professional dietician registered by the American Dietetic Association; or

a human services professional with a bachelor's degree in a human services field, including but not limited to sociology, special education, rehabilitation counseling and psychology.

"Quality assurance." A systematic and objective approach to monitoring and evaluating the appropriateness, adequacy and quality of services and supports that enable individuals with a developmental disability to achieve defined outcomes in their lives.

"Quality assurance review." A BQM process to determine the degree of compliance with quality assurance requirements in this Part that a CILA agency has maintained. This can include reviewer observation and an on-site, desk audit, remote or virtual form of examination of the following: policies, procedures, records of individuals, written Personal Plan and Implementation Strategies. Reviewers shall use an instrument containing national indicators to interview individuals and employees. Observation of a sample of individuals, drawn from across CILA sites statewide, is also a part of the review.

"Relative." Spouse, parent, stepparent, son, daughter, brother, sister, stepbrother, stepsister, half-brother, half-sister, uncle, aunt, niece, nephew, first cousin, or any such person denoted by the prefix "grand" or "great" or the spouse of any of the persons specified in this definition.

"Relief." A paid service for caregivers that provides support to individuals with developmental disabilities in host family living arrangements. Relief services enable the caregivers to have free time apart from the individuals with developmental disabilities.

"Remote Monitoring and Supports." The use of electronic interactive technology (e.g., a device, a product, or system) to provide supports and services, absent of direct care staff, in accordance with the Health Care Affordability Act [305 ILCS 5/12-21.21]. Remote monitoring and supports are meant to increase independence and daily living skills of individuals.

"Residence." See "living arrangement."

"Respite." Services provided to individuals who are unable to care for themselves, furnished on a short-term basis due to the absence of or need for relief of those persons normally providing care.

"Restraint." The *direct restriction through mechanical means or personal physical force of the limbs, head, or body of* an individual except as part of a medically prescribed procedure for the treatment of an existing physical disorder or the amelioration of a physical disability. *The partial or total immobilization of an individual for the purpose of performing a medical or surgical procedure shall not constitute restraint*. *Momentary periods of physical restriction by direct person-to-person contact, without the aid of material or mechanical devices, accomplished with limited force, and that are designed to prevent* an individual *from completing an act that would result in potential physical harm to* the individual *or another shall not constitute restraint, but shall be documented in the* individual’s record.[405 ILCS 5/1-125]

"Seclusion." *Sequestration by placement of* an individual *alone in a room from which he* or she *has no means of leaving; seclusion is prohibited.*  [405 ILCS 5/1-126]

"Secretary." The Secretary of the Department or their designee.

"Self-administration of medications." An individual with a developmental disability's ability to correctly take prescribed medications independently or has been assessed and determined to be independent in accordance with 59 Ill. Adm. Code 116.

"Substantial compliance." An evaluation result that determines that a surveyed program meets the requirements set forth in this Part sufficiently to be at a Level 1 or 2, as described in Section 115.440, and in good standing.

"Support Services Team" or "SST". Contracted entities that provide an interdisciplinary technical assistance and training response to persons with a developmental disability in a medical or behavioral situation that challenges their ability to live and thrive in the community.

"Survey" or "licensure and certification survey." A process to determine the degree of compliance with this Part that a CILA agency has maintained. This includes surveyor observation and an on-site, desk audit, remote, or virtual examination of the following: policies, procedures, records of individuals, written Personal Plan and Implementation Strategies, and the physical plant. Interviews of individuals and employees and observation of a sample of CILA sites are also a part of the survey.

"Tardive dyskinesia." An abnormal involuntary movement disorder associated with the long-term use of antipsychotic medications. It may be persistent or transient and is characterized by a variable mixture of facial, ocular, oral, lingual, truncal or limb movements.

"Time-out." Contingent removal from a situation in which reinforcement occurs into a situation from which reinforcement does not occur, for a reasonable period of time; time-out is prohibited.

"Treatment." *An effort to accomplish an improvement in the mental condition or related behavior of* an individual*. Treatment includes, but is not limited to, hospitalization, partial hospitalization, outpatient services, examination, diagnosis, evaluation, care, training, psychotherapy, pharmaceuticals, and other services provided for* individuals *by mental health agencies* or psychiatric hospitals. [405 ILCS 5/1-128]

"Volunteer." An unpaid person whose activities (e.g., helping with yardwork, assisting in recreational activities, teaching a cooking or yoga class) are organized and supervised by the CILA agency to supplement the services the CILA agency provides or other activities designated by the CILA agency.

"Waiver." An action by the Department in which exceptions to this Part are granted on application by a CILA agency for a period not to exceed the duration of the current license. Waivers may be granted only for that which is allowable under this Part.

(Source: Amended at 47 Ill. Reg. 8485, effective May 31, 2023)