**Section 300.4090 Personnel for Providing Services to Persons with Serious Mental Illness for Facilities Subject to Subpart S**

a) Psychiatric Medical Director

1) The facility shall have a consultant for the psychiatric rehabilitation program who is an Illinois licensed physician and is board eligible or board certified in psychiatry from the American Board of Psychiatry and Neurology. The psychiatric medical director is responsible for advising the administrator and the Psychiatric Rehabilitation Services Director on the overall psychiatric management of the program's residents.

2) There shall be communication linkages between the psychiatric medical director and the medical director.

3) The psychiatric medical director, working with the administrator, shall be responsible for annually approving in writing the facility's written policies and procedures for the psychiatric rehabilitation program.

4) Each resident shall be under the care of a psychiatrist. If a resident was admitted and has continuously been a resident since prior to January 1, 2002 and a psychiatrist has never served as the resident's primary physician, the resident may continue with the current physician if that physician uses psychiatric consultation, as needed, for the resident.

5) A psychiatrist shall be available for the psychiatric treatment and psychiatric medication management of the residents. All residents or residents' guardians shall be permitted their choice of psychiatrist.

6) Each resident shall be seen by a psychiatrist at least every 90 days and as often as necessary to ensure adequate psychiatric treatment.

b) Psychiatric Rehabilitation Services Director

1) A Psychiatric Rehabilitation Services Director (PRSD) shall be:

A) A licensed, registered, or certified psychiatrist, psychologist, social worker, occupational therapist, rehabilitation counselor, psychiatric nurse or licensed professional counselor who has a minimum of at least one year supervisory experience and at least one year of experience working directly with persons with serious mental illness and who has attended an Illinois Department of Public Aid (IDPA) training program; or

B) A person with a master's degree in a human services field with at least one year of supervisory experience and at least three years of experience working directly with persons with severe mental illness who has attended an IDPA training program.

2) An individual who is employed at a licensed nursing home in a capacity similar to that of a Psychiatric Rehabilitation Services Director on January 1, 2002 and who has at least five years of experience in that capacity may petition the Department for approval to continue to act in that role even if the individual is not a licensed, registered, or certified psychiatrist, psychologist, social worker, rehabilitation counselor, psychiatric nurse or licensed professional counselor. The Department will consider information submitted in accordance with subsection (h) of this Section in deciding whether to grant approval. The Department may revoke approval if the individual fails to continue to meet professional standards or to complete the required training.

3) Each facility shall have a PRSD for the psychiatric rehabilitation program who is assigned responsibility for:

A) Developing and implementing the facility's psychiatric rehabilitation program;

B) Developing and implementing the facility's staff training and in-service programs relating to the psychiatric rehabilitation program; and

C) Ensuring the coordination and monitoring of the residents' participation in the psychiatric rehabilitation program ITP.

4) The PRSD shall ensure that each resident's ITP is developed by an Interdisciplinary Team and is individualized, states the progressive goals of treatment, includes measurable objectives, is written in behavioral terms, is understandable and acknowledged by resident and staff, and is implemented.

5) The PRSD shall ensure that residents' needs are met through appropriate staff interventions and community resources and, whenever possible, that residents and their families or significant others are involved in the preparation of their plan of care.

6) The PRSD shall ensure the availability of education and information for family members of residents.

c) Psychiatric Rehabilitation Services Coordinator

1) A Psychiatric Rehabilitation Services Coordinator (PRSC) shall be an occupational therapist or possess a bachelor's degree in a human services field (including but not limited to: sociology, special education, rehabilitation counseling or psychology) and have a minimum of one year of supervised experience in mental health or human services.

2) An individual who is employed at a licensed nursing home in a capacity similar to that of a Psychiatric Rehabilitation Services Coordinator on January 1, 2002 and who has at least five years of experience in that capacity may petition the Department for approval to continue to act in that role even if the individual does not possess a bachelor's degree in human services. The Department will consider information submitted in accordance with subsection (h) of this Section in deciding whether to grant approval. The Department may revoke approval if the individual fails to continue to meet professional standards or to complete required training.

3) Each resident admitted to the facility shall have a PRSC to act as a case manager. The PRSC will be identified as the staff member to whom the resident primarily relates for the coordination of service.

4) The responsibilities of the PRSC are:

A) To provide the resident with a stable therapeutic relationship;

B) To orient the resident to the facility;

C) To review and assist the resident in understanding the treatment plan and program schedule;

D) To prepare and assist the resident with active participation in the treatment plan review;

E) To provide and/or coordinate the delivery of the psychiatric rehabilitation services programs; and

F) To monitor the resident in the areas of self-directed care and for overall compliance with the treatment plan.

5) There shall be a PRSC for each 30 participants.

6) If the PRSC is a consultant, then subsections (c)(4)(A) and (E) will also be the responsibility of facility staff.

d) In a facility with 10 or fewer residents with serious mental illness, the PRSD may act as the PRSC.

e) Registry of Certified Psychiatric Rehabilitation Services Aides

1) An individual will be placed on the Nurse Aide Registry as a psychiatric rehabilitation services aide when he/she has successfully completed a training program approved in accordance with the Long-Term Care Assistants and Aides Training Programs Code (77 Ill. Adm. Code 395) and has met background check information required in Section 300.661 of this Part, and when there are no findings of abuse, neglect, or misappropriation of property in accordance with Sections 3-206.01 and 3-206.02 of the Act.

2) An individual will be placed on the Nurse Aide Registry if he/she has met background check information required in Section 300.661 of this Part and submits documentation supporting one of the following equivalencies:

A) Documentation of current registration from another state as a psychiatric rehabilitation services aide (PRSA).

B) Documentation of successful completion of a PRSA training course approved by another state as evidenced by a diploma, certification or other written verification from the school. The documentation must demonstrate that the course is equivalent to, or exceeds, the requirements for PRSAs in the Long-Term Care Assistants and Aides Training Programs Code.

f) Psychiatric Rehabilitation Services Aides

1) Beginning January 1, 2003, facilities shall employ PRSAs or persons who have successfully completed a psychiatric rehabilitation certificate program to provide psychiatric rehabilitation program services to residents.

2) If a facility does not employ PRSAs to provide psychiatric rehabilitation program services, the following minimum training shall be provided to certified nursing assistants (CNAs) within 30 days after the CNA's first day of employment:

A) Understanding the impact of serious mental illness;

B) Understanding the role of psychiatric rehabilitation, including how to manage psychiatric disabilities and countering stigma and discrimination;

C) Confidentiality;

D) Preventative strategies for managing aggression and crisis intervention;

E) Goals and function of case management;

F) Appropriate verbal and physical interaction;

G) Communication skills between staff and residents; and

H) Basic psychiatric rehabilitation techniques and service delivery.

g) Consultants

1) A facility may use consultants with advanced professional degrees who meet the same requirements as facility personnel under this Subpart to provide psychiatric rehabilitation services and to provide expertise in the development and implementation of the facility's psychiatric rehabilitation services program and individual resident assessment and care planning.

2) All consultants providing services at the facility who are not physicians shall complete the Illinois Department of Public Aid-approved Psychiatric Rehabilitation Training Program.

h) An individual petitioning the Department for approval to continue acting as a PRSD or PRSC even if that person does not meet formal education requirements shall submit the following information to the Department:

1) Work history;

2) Education since high school;

3) Employment references;

4) A statement that the person is working in a capacity similar to the position for which the individual is seeking recognition; and

5) Any other information that supports that the individual is capable of meeting the professional standards of the recognized position.

 Within one year after approval is granted, the individual shall complete the training offered by IDPA for PRSC/PRSD, as applicable.

(Source: Amended at 29 Ill. Reg. 876, effective December 22, 2004)