**Section 350.810 Personnel**

a) The facility shall have staff sufficient in number and qualifications on duty 24 hours each day to provide services that meet the total needs of the residents. At a minimum, there shall be at least one staff member awake dressed and on duty at the facility at all times.

b) Regardless of the organization or design of resident living units, the minimum direct care staff to resident ratios are as follows:

1) For units that include any of the following types of residents, the staff-to-resident ratio shall be two and one-half hours of care per day per resident:

A) children under the age of six years,

B) severely and profoundly intellectually disabled,

C) severely physically handicapped, and

D) residents who are aggressive, assaultive, or security risks, or who manifest severely hyperactive or psychotic behavior.

2) For units serving moderately intellectually disabled residents requiring habit training, the ratio shall be two hours of care per day per resident.

3) For units serving residents in vocational training programs and adults who work in sheltered employment situations the staff to resident ratio shall be one hour of care per resident per day.

4) Direct care staff includes licensed nurses, auxiliary personnel, qualified intellectual disability professionals, and DSPs. The health services supervisor is not included in determining the ratio.

c) The number and categories of personnel to be provided shall be based on the following:

1) Number of residents.

2) Amount and type of program content, supervision, and personal care needed to meet the particular needs of the residents at all times.

3) Size, physical condition, and the layout of the building including proximity of service areas to the resident's rooms.

4) Medical orders

d) The facility shall provide an administrator as set forth in Subpart B.

e) The facility shall provide a Resident Services Director who is a Qualified Intellectual Disability Professional as defined in Section 350.330, who is assigned responsibility for the coordination and monitoring of the residents' overall plan of care. The administrator or an individual on the professional staff of the facility may fulfil this assignment to ensure that residents' plans of care are individualized, written in terms of short- and long-range goals, understandable and utilized; meet the resident's needs through appropriate staff interventions and community resources. Residents shall be involved in the preparation of their plan of care, whenever possible.

f) The facility shall provide activity personnel as set forth in Section 350.1050(c).

g) The facility shall provide dietary personnel as set forth in Sections 350.1810 and 350.1820.

h) The facility shall designate a staff member suited by training, or experience, or both, to be responsible for social services and for the integration of social services with other elements of the plan of care.

i) The facility shall provide nursing personnel as set forth in Subpart F

(Source: Amended at 48 Ill. Reg. 2546, effective January 30, 2024)