# 115 CMR 7.00: STANDARDS FOR ALL SERVICES AND SUPPORTS

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## 7.01: Scope

(1) The provisions of 115 CMR 7.00 apply to all supports and services that are provided by public and private providers and subject to licensure and certification or regulation by the Department, except where such service is exempt through specific language of 115 CMR 7.00.

(2) Any supports or services subject to regulation by the Massachusetts Rehabilitation Commission and which provide social and pre-vocational supports and work training shall be subject to the applicable requirements of 115 CMR 7.00.

(3) 115 CMR 7.00 does not apply to programs, services, or facilities subject to regulation under M.G.L. c. 15D (606 CMR: *Department of Early Education and Care*), such as children's group residences, foster care, day care, children's site-based respite, and emergency housing; or under M.G.L. c. 111 (105 CMR: *Department of Public Health*), such as skilled nursing facilities, acute care facilities, intermediate care facilities and health clinics; or under 130 CMR 400.000 through 499.000 (Executive Office of Health and Human Services, Office of Medicaid), such as day habilitation and adult foster care; or to any programs, services, or facilities for which another state agency possesses exclusive regulatory authority.

# 7.02: Definitions

<u>Care Provider</u>. Refers to a person who is recruited and paid by a placement agency to provide supports in accordance with the individual's ISP and in a manner to foster community membership, rights and dignity, individual control and decision-making, personal growth and accomplishment, and personal well-being.

<u>Day Supports</u>. Refers to supports and services that lead to the acquisition, improvement, and retention of skills and abilities that prepare individuals for work and community participation. The services are provided in accordance with the individual's ISP and include career exploration activities that are predominantly job task oriented, community integration experiences, development of skills in activities of daily living, and the pursuit of personal interests and hobbies.

<u>Employment Supports</u>. Refers to supports and services designed to assist individuals to obtain and retain meaningful employment and compensation in integrated work settings that include supports to explore, develop and retain work skills and to obtain and maintain paid work. Employment supports are provided in accordance with the individual's ISP and include individual and small group work intended to assist their movement to competitive employment.

<u>Individualized Home Supports</u>. Refers to less than 24 hour per day supports and services that are provided regularly to enable individuals to establish, live in or maintain, on an on-going basis, a household of their own choosing. Services include teaching and fostering the acquisition, retention or improvement of skills related to personal finance, health, shopping and use of community resources, community safety, and other social and adaptive skills necessary to live in the community. Individualized home supports are flexible and designed to meet the individual's needs as specified in his or her ISP. Individualized home supports do not include live-in assistance.

### 7.02: continued

<u>Placement Services</u>. Refers to a set of services provided by a placement agency that consists of recruitment, training, supervision and pay of a care provider to provide residential supports, or respite services to one or more individuals in the home of the care provider or in the individual's own home.

<u>Residential Supports</u>. Refers to supports and services provided daily on a 24 hour basis to individuals who need daily assistance with care, supervision, and skills training to maximize their independence and participation in typical household activities and routines, participation in community recreational, cultural and leisure activities, and opportunities to maintain or expand their relationships with family and friends. Residential supports are provided in accordance with the individual's ISP and include 24 hour site based respite services and placement services provided in home and community based settings other than the individual's family home.

<u>24 Hour Respite Services</u>. Refer to supports and services that are provided on a 24 hour basis for short term relief for primary caregivers, or short term stabilization services for individuals who, due to behavioral or environmental circumstances, cannot remain in their current residence.

# 7.03: Organization Requirements

(1) All providers shall operate in a manner that supports positive outcomes for individuals in all of the services and supports offered and shall have policies, procedures and systems that:

- (a) support people in reaching their goals and aspirations;
- (b) reflect the values expressed in the Department's Mission Statement;
- (c) are understood and carried out by staff; and

(d) are dynamic documents that are reviewed and revised as necessary to stay current with best practice in the field.

(2) All providers shall have an effective internal quality management and improvement system that:

(a) regularly gathers data on program and service quality, including but not limited to, incidents, restraints, investigations and other program quality information;

(b) regularly reviews the quality data gathered and information from the Department's reviews of its contract and performance based outcomes;

(c) actively involves individuals and families and must include, but not be limited to, an evaluation of the individual's satisfaction with the services provided; and

(d) implements service improvements to address issues identified through internal and external reviews and feedback.

(3) All providers shall establish a formal mechanism such as a governing board that provides oversight to ensure the provision of quality supports to individuals and their families and that conducts an annual performance evaluation of the provider's chief executive officer.

(4) All providers shall have a process for developing long range plans for the organization.

# 7.04: Standards for Services and Supports

(1) All providers shall provide supports and services in ways that promote the following outcomes within the context and location of those supports and services and in accordance with the individual's ISP, the provider's mission statement, the Department's mission statement, and 115 CMR:

(a) <u>Protection and Affirmation of Rights and Dignity</u>. Protection and affirmation of the rights and dignity of individuals, including, but not limited to, respect of the individual, support of an individual's culture and religion, freedom of movement at home and in the workplace or day program, privacy, appropriate and timely assistance to the individual with decision-making, support of the individual in exercising his or her rights, and provision of safeguards whenever limitations are imposed.

(b) <u>Individual Choice and Control</u>. Opportunities for exercising choice and control in all aspects of an individual's life by providing the education and supports to enable the individual to make informed decisions, and by promoting an environment and culture where the individual's opinions are listened to and treated seriously.

(c) <u>Community Membership</u>. Opportunities to participate in, be integrated into, and contribute to the life of their community through:

 education and supports to assist individuals to participate in recreational, social, and leisure activities outside of the home in integrated settings with neighbors, other people in the community, and consistent with the needs, desires, and choices of each individual;
 access to the same services and resources used by neighbors and other people in the community;

3. a home offered by a residential supports provider that is part of a neighborhood, village, or community and with general design features, layout, and style of decor that would not stigmatize or devalue the individual. The home should offer the individual safety, refuge, rest, satisfaction, and enable the individual to exercise control and be at ease in the home; and

4. work in settings arranged by the provider of employment supports that maximize integration with other people in the community and with general design features that do not emphasize the supports' separateness or difference.

(d) <u>Relationships</u>. Supports that help individuals to develop and sustain varied and meaningful relationships with family, friends, neighbors and co-workers. The supports shall include education and assistance to help the individuals form friendships, express intimacy and sexuality in an appropriate, healthy and safe manner, and prepare individuals to receive visitors.

(e) <u>Skill Acquisition and Accomplishments</u>. Assessment, training, education, supports and services necessary for the individual to meet the goals in the individual's ISP, to acquire skills that increase self-reliance and that are necessary to achieve desired and valued outcomes

1. For providers of residential supports and individualized home supports, the supports and services include skills training and supports to maximize an individual's independence and performance of household activities and routines, participation in community recreational, cultural and leisure activities, and opportunities to maintain or expand their relationships with family and friends.

2. For providers of employment supports, the supports and services include supports to explore and develop work skills, to obtain and maintain paid work in integrated work settings, and the supports to help individuals on a pathway to employment by developing the skills to secure work.

3. For providers of day supports, the services and supports include help that will enable the individual to explore their work, leisure, and community interests, and to participate in their preferred activities.

(f) <u>Health, Safety, and Economic Security</u>. That the sites where supports and services are provided are safe; individuals are protected from abuse, neglect and mistreatment; health care services meet the needs of the individual; personal funds of individuals are safeguarded; and the individual is assisted in maximizing economic resources to meet his or her needs. Included are the requirements that the provider:

1. promote optimal health of the individual by arranging for coordinated routine, preventive, specialty, and emergency health care, professional clinical services; make first-aid supplies available; and assure prompt and appropriate response by staff to emerging health care issues;

2. comply with the Department's requirements governing the storage and use of prescription and over the counter medication as specified in 115 CMR 5.00: *Standards to Promote Dignity* and the Department's guidelines;

3. store, prepare and serve food in a clean, safe, nutritious, tasteful, and appetizing manner and for each individual to have regularly nourishing and well-balanced meals. The meals must be provided at least three times a day including one in the morning, one in the afternoon and one in the evening and be chosen by the individual unless there is documentation from a physician that the frequency, amount, texture or type of meal is medically contraindicated for the individual;

#### 7.04: continued

4. provide for the safety and well-being of individuals in both home, day and work environments, including implementation of the safety plan in accordance with 115 CMR 7.06;

5. provide site based supports and services in a physical setting that meets all applicable local, state, and federal requirements pertaining to building construction, sanitation, health, safety, occupational health, and zoning;

6. comply with the applicable environmental requirements of 115 CMR 7.07;

7. prevent abuse and neglect, and comply with all applicable local, state, and federal reporting requirements;

8. comply with state and federal wage-hour requirements when individuals engage in any work which must be compensated; and

9. support each individual to obtain personal possessions, including an adequate supply of fashionable, seasonal clothing as necessary for the individual's health and comfort and consistent with the individual's choice and preferences, and assist each individual to maintain his or her clothing in a clean and well-kept manner.

### 7.05: Staffing Standards

(1) All providers of supports and services unless specifically exempted by law or regulations, shall be subject to the following requirements:

(a) <u>Screening of Provider Staff and Care Providers</u>.

1. All providers shall comply with applicable federal and state labor laws and not engage in discriminatory employment practices.

2. All providers shall comply with all required Criminal Offender Record Checks.

3. All providers arranging or providing professional services or consultation shall assure that such professionals are licensed, certified or registered as required by law to provide such professional services to the public.

(2) <u>Staff Qualifications</u>. All providers shall assure that the number, organization and qualifications of staff meet the training, care, support, health, safety, and evacuation needs of the individuals supported by the provider. This shall be determined by all of the following:

(a) The provider's ability to meet the objectives in the ISP of each individual while promoting independence and skill development.

(b) The provider's ability to assist each individual to achieve the stated outcomes as set forth in his or her ISP.

(c) The provider's ability to meet environmental, safety, administrative, and service delivery requirements as set forth in 115 CMR 7.07.

(d) The provider's ability to develop and competently execute safety plans for all individuals at the location(s) where supports and services are provided as required in 115 CMR 7.06.

(3) <u>Supervision and Evaluation</u>. All providers shall have adequate staff as determined by all of the following:

(a) The skills demonstrated by staff in helping individuals to achieve outcomes identified in the individual's ISP, the provider's mission statement, and the mission statement, regulations, and standards of the Department.

(b) The level of ongoing supervision that supports staff in increasing their skills and ability to assist individuals supported by the provider.

(c) The ongoing staff development and training activities that are provided.

(d) Training activities that are tied to the specific needs of individuals supported by the provider.

(e) Access to technical and clinical consultation to enhance staff's ability to meet individuals' needs and desires.

(4) All providers shall have current staff job descriptions that describe the education, skills, and experience required of staff to meet the standards set forth in 115 CMR 7.04.

(5) All providers shall develop and utilize staff performance evaluations to enhance supports and services to individuals.

#### 7.05: continued

(a) Evaluations of staff performance shall be competency-based and shall assess the degree to which requirements of the employee's job description are achieved by the employee subject to the evaluation. Comments from individuals, families or guardians of individuals, and relevant external agencies shall be included in the evaluation of staff performance.
(b) Staff performance evaluations shall occur at least appually.

(b) Staff performance evaluations shall occur at least annually.

(c) The results of staff performance evaluations shall be used by the provider to produce continued improvement in the skills needed by staff to enhance the lives of the individuals they support.

(6) <u>Training</u>. All providers shall meet the following training requirements for staff, relief staff and care providers except as otherwise noted in 115 CMR 7.05(6).

(a) Training in the reporting of actual or suspected abuse, neglect, or omission as specified in M.G.L. c. 19C and 115 CMR 9.00: *Investigations and Reporting Responsibilities*.

(b) Training in the reporting of incidents as required in 115 CMR,

(c) Training in the implementation of positive behavioral supports and the requirements in 115 CMR 5.00: *Standards to Promote Dignity*.

(d) For staff, relief staff and care providers who may be expected to use restraint, training on the requirements in 115 CMR 5.11: *Seclusion, Locked Buildings, and Emergency Restraint* and on the appropriate use of restraint using a curriculum approved by the Department.

(e) For non-licensed staff who will be administering medication at a site that is required to be registered as a Medication Administration Program (MAP) site, training on the requirements of 115 CMR 5.15: *Medication* and on the safe administration of medications and are MAP certified.

(f) Training in first aid.

(g) Training in cardiopulmonary resuscitation (CPR) for all staff at every site providing 24 hour residential supports, employment supports, day supports or 24 hour site based respite supports. 115 CMR 7.05(6)(g) shall not apply to residential sites providing less than 24 hour supports.

(h) Training in all aspects of the safety plan for sites required to have safety plans under 115 CMR 7.06(3).

(i) At least one staff person trained in fire safety by an approved fire safety training agency, local fire department or from the Department shall be present at every site where residential supports, day supports or 24 hour site based respite services are provided. All other staff and care providers are trained in basic fire safety.

(7) <u>Staffing Requirements</u>.

(a) Providers of residential supports, including care providers, shall assure the presence of staff whenever an individual is present in the home, unless the individual:

1. has an ISP that expressly provides that he or she can be home alone for a defined period of time; and

- 2. is 18 years of age or older; and
- 3. is capable of evacuating from the home within  $2\frac{1}{2}$  minutes without assistance.

The Department's approval of an arrangement for any individual to remain in the home alone for a defined period of time does not change the residential supports into a different service that does not require 24 hour staffing.

(b) Providers of residential supports, care providers, and providers of 24 hour site-based respite shall develop a staffing pattern that is sufficient to enable all individuals to evacuate, with or without assistance, within  $2\frac{1}{2}$  minutes in accordance with professionally accepted fire safety procedures.

1. Assistance from any staff who evacuates and re-enters the building cannot be considered in determining sufficiency of staffing pattern.

2. Evacuation times may be extended only when an evaluation using the National Fire Protection Association's Fire Safety Evaluation System ("FSES") has been conducted and the results based on physical site adaptation, staffing patterns, characteristics of the individuals in the home, and other relevant factors, demonstrate that the extended evacuation times are within accepted fire safety standards. Until such time as there is an approved waiver from the Department, the provider must have sufficient staff to evacuate all individuals in the home within  $2\frac{1}{2}$  minutes. The provider shall ensure that staffing is sufficient to meet the conditions and evaluation time set in the waiver approved pursuant to 115 CMR 7.05(7)(b)2.

#### 7.05: continued

(c) Providers of residential supports, including care providers and providers of 24 hour site based respite supports shall have at least one person on duty and present in the home (including overnight) when any individual is present at the home except as otherwise provided in 115 CMR 7.05(7)(a).

(d) Successful performance on fire drills required by 115 CMR 7.06(3)(b)7. shall be a factor in determining the adequacy of the provider's staffing.

### 7.06: Standards for Safety

### (1) Search Plan.

(a) All providers shall prepare, file with the area office update as often as necessary, and have available at each location where supports and services are provided, a plan for searching for each individual served by the provider when the individual is missing and:

1. remains unaccounted for after informal attempts to locate him or her have been ineffective; and

2. is deemed to be in a position of unreasonable risk if alone for an extended period of time.

(b) All providers shall maintain a completed and updated "Emergency Fact Sheet" for each individual which shall be immediately accessible to staff, filed with the area office, and shall include the information required by 115 CMR 4.03(4): *Emergency Information*.

(c) The provider shall immediately notify the individual's family, guardian, service coordinator, and area office director of the initiation of search procedures for an individual.(d) The provider shall notify local and state police and local hospitals as appropriate.

### (2) Individual Safety Assessment.

(a) All providers shall assure that individual safety assessments are conducted and that strategies are developed for meeting the specific and unique safety needs of each individual. Individual safety assessments shall be conducted as part of the individual's ISP.

(b) The ISP and safety strategies shall be revised when the individual's health, mobility or other capabilities affecting safety and evacuation change.

(c) Safety strategies may include modification to the location where services are provided, other environmental modifications and use of assistive technology, staff supports, staff training focused on the individual's needs, and education of the individual to assure optimal understanding and independence regarding safety precautions and procedures.

(3) <u>Safety Plan</u>.

(a) All providers, except for providers of individualized home supports of less than 15 hours per week and providers of individualized home supports or respite in a family home, shall prepare and file with the area office a written safety plan assuring the safety of individuals in the event of a disaster, such as fire, explosion, loss of heat or electricity, interior flooding, or any other circumstances requiring emergency evacuation. Safety plans must be specific to and must be on hand at each site where supports and services are provided and must be easily accessible to all staff and others who provide supports and services to the individual.
(b) The safety plan shall include at least the following:

1. Safety strategies for each individual as outlined by the individual safety assessment required in 115 CMR 7.06(2).

2. An assessment of how group interaction may affect the needs of the individuals during a fire or other emergency.

- 3. Evidence of compliance with environmental standards pursuant to 115 CMR 7.07.
- 4. Use of assistive technology, if appropriate.

5. Sufficient numbers of trained staff to effectively implement the procedures in the safety plan.

6. Procedures for the safe evacuation of individuals:

a. For sites where residential supports and 24 hour site based respite supports are provided, safe evacuation is defined as assuring that all individuals can get out of the home in  $2\frac{1}{2}$  minutes, with or without assistance, without reliance on staff who have evacuated to return to provide assistance, and in accordance with professionally accepted fire safety evacuation procedures. For sites where employment supports or day supports are provided, safe evacuation is defined as assuring that individuals can evacuate in a safe, orderly and timely manner, with staff assigned to individuals needing assistance.

b. For any individual who needs assistance to evacuate, an evacuation plan specific to the individual is required.

7. Fire Drills.

a. Providers of residential supports except placement services shall conduct quarterly fire drills and maintain records of evacuation times, types of assistance, if needed, and assessments of individual and staff performance. At least two drills per year shall be conducted in the nighttime when individuals are in bed and asleep.

b. Providers of employment supports or day supports shall conduct two fire drills annually, with records of evacuation times and type of assistance needed, if any, and assessments of individual and staff performance.

c. A provider shall not deviate in any respect from the foregoing minimum requirements for fire drills unless it has provided alternative assurances in the provider safety plan submitted to and approved by the area director.

d. Records documenting the results of the required fire drills shall be submitted to the area office at the time safety plans are re-filed pursuant to 115 CMR 7.06(3)(e).

8. Methods to notify fire, police, and hospital facilities for assistance; on-call administrative staff; and families/guardians. The area director shall be notified as soon as possible, and in any event, within 12 hours.

9. Provision for transportation and immediate temporary resettlement of individuals and staff in another specified location.

10. Provision for the continuity of appropriate supports and services within the first 24 through 48 hours of an emergency pending arrangements with the Department for return to the original site or occupancy in other locations.

(c) <u>Assurances</u>. The safety plan shall include assurances signed by the head of the provider that the plan:

1. will be implemented as written and approved;

2. is designed to assure the safety of individuals in the event of a fire or other emergency as defined in 115 CMR 7.06(3); and

3. will be periodically evaluated for effectiveness.

(d) <u>Initial Filing</u>. For new supports and services, an initial safety plan is required prior to occupancy of a site and must be modified as the needs of individuals and group interactions are better known, but within 60 days of initial filing.

(e) <u>Refiling</u>. The safety plan shall be updated and refiled with the area office no less than every two years if no changes have occurred that warrant refiling during the two year period. A revised safety plan shall be refiled within 60 days after a change in any of the following:

- 1. the provider of services at a particular site;
- 2. the types of supports and services provided at the site;
- 3. the location where supports and services are provided;
- 4. the individuals' ability to evacuate;
- 5. the individuals living in the home;

6. the individuals served where employment supports or day supports are provided, such that the change necessitates revision to the safety plan;

7. the effectiveness of the plan, as determined by the Department.

(f) <u>Approval</u>. The safety plan shall be reviewed and approved by the area director or designee within ten working days for all sites where the services and supports are funded or provided by the Department. For licensed sites where the services and supports are not funded by the Department, safety plans shall be filed with the area office, but need not be approved by the area director.

#### 7.07: Environmental Standards for All Site Based Services

(1) All sites where residential supports, 24 hour site based respite supports, employment supports and day supports are provided must meet all applicable building, sanitary, health, safety, and zoning requirements.

(2) The environmental requirements 115 CMR of 7.07(3) through (8) shall apply to sites where residential supports, 24 hour site based respite supports, employment supports and day supports are provided, unless supports and services are provided in the home of the family of the individual.

#### 7.07: continued

(3) All providers must assure that the sites where supports and services are provided are clean, environmentally safe, free of vermin and obvious fire and chemical hazards, maintained in accordance with common fire safety practices, and of sufficient size to accommodate comfortably the number of individuals and staff it serves. Any objects or conditions that represent a fire hazard greater than that which could be expected of ordinary household furnishings shall not be permitted.

(4) All providers must assure that the sites used by persons with substantial mobility impairment are barrier-free to the extent necessary to permit access to the supports, services, personal, and common areas. A location shall be deemed to be barrier-free, in whole or part, if it meets the applicable standards of 521 CMR: *Architectural Access Board* as adopted by 780 CMR: *Board of Building Regulations and Standards*.

(5) The following environmental requirements shall apply to sites owned or leased by providers of residential supports, individualized home supports and 24 hour site based respite supports, and the homes of care providers.

(a) The site shall include complete living accommodations, including its own kitchen, living room, dining area, bedrooms, and bathrooms of typical residential design. The site shall provide for group and individual needs, including opportunities for privacy in clearly defined living, sleeping, and personal care spaces and areas that are accessible and available according to individual needs to enable personal development, the development of personal relationships, and engagement in leisure activities.

(b) The site shall provide physical comfort as well as a pleasing style of decor and an external appearance that is typical of other homes in the vicinity, except for accommodations that enhance accessibility for individuals.

(c) The layout of rooms shall permit ready access to common areas, with no intrusion into private bedroom areas.

(d) The site shall provide conveniently located common storage adequate for a reasonable amount of individual and group possessions.

(e) Major environmental controls, including those for lighting, appliances, plumbing, windows, and shades shall be operable by and accessible to individuals.

(f) Heating and plumbing systems shall be installed and maintained for safe, healthy, and comfortable use by the individuals supported by the provider.

(g) Heating and ventilation systems shall be adequate to maintain comfortable levels throughout the year.

(h) All substances that are potentially dangerous in nature shall be stored separately from food and in containers which are accurately labeled. No flammable liquids, such as gasoline, shall be stored in the site or in spaces attached to the site.

(i) Lighting shall be adequate to meet the individual and group needs of the residents and shall be provided in all major interior spaces, including walk-in closets and mechanical and storage rooms.

(j) Each individual shall be provided with bedroom space adequate for sleeping, dressing, attending to personal appearance and needs, and caring for his or her personal possessions. The bedroom shall be of sufficient size to comfortably accommodate a bed, dresser, closet space, and adaptive equipment if required, and to allow for an individual's privacy and activities.

(6) The following environmental requirements shall apply to sites owned, rented or leased by providers of residential supports, care providers, and providers of 24 hour site based respite support:

(a) The bedroom size shall be no less than 90 to 100 square feet for a single bedroom and 130 to 144 square feet for a double bedroom.

(b) The bedroom shall be occupied by one individual; provided, however, two individuals may share one bedroom if the two individuals, or their guardians if applicable, consent to the sharing of the bedroom.

(c) Existing sites serving five individuals as of July 15, 2016 must have at least  $1\frac{1}{2}$  bathrooms. Any newly developed sites serving five individuals must have two bathrooms.

(7) The following environmental requirements shall apply to sites owned or leased by providers of residential supports, care providers, providers of employment supports, day supports, and providers of 24 hour site based respite supports.

#### 7.07: continued

(a) All sites shall have two means of egress from floors at grade level; all other floors above grade level shall have one means of egress and one escape route serving each floor and leading to grade. This requirement shall not apply to employment supports or day supports when the second floor is used on an intermittent basis only. Any proven usable path to the open air outside at grade shall be deemed acceptable as an escape route, including but not limited to connecting doors, porches, windows within six feet of grade, ramps, fire escapes, and balcony evacuation systems. Double cylinder dead bolt locks that require key operation from within are prohibited on egress doors.

(b) All sites providing residential supports shall have a fire extinguisher that is operable and that is located in the kitchen.

(c) All sites shall have smoke detectors as required by 780 CMR: *Board of Building Regulations and Standards*. If more than one detector is required per site, each detector shall be interconnected so as to activate all other detectors.

(d) All sites shall have carbon monoxide detectors as required by 780 CMR: *Board of Building Regulations and Standards*.

(e) All vertical chutes (*e.g.*, laundry chutes, dumbwaiters, heating plenums) shall be sealed with gypsum board or some other fire retardant material.

(f) Bedroom doors are lockable unless clinically contraindicated or unless an individual, or his or her guardian, if applicable, chooses a bedroom with access to egress and consents to the bedroom door not having any lock.

(g) Locks on bedroom doors which do not provide access to an egress shall be permitted only in accordance with the following:

1. The head of the provider has documentation that the lock may be easily opened from the inside without a key and that the individual is able to unlock the door from the inside; and

2. At all times staff carry a key or have immediate access to a key to open the door in the event of an emergency.

(h) Bedrooms of individuals requiring hands-on physical assistance to evacuate or who have a mobility impairment, including individuals who use a wheelchair, shall be on a floor at grade or on a floor with a "horizontal exit," in accordance with 780 CMR: *Board of State Building Regulations and Standards*.

(i) Smoking shall be permitted only under the following conditions:

1. Staff may not smoke in the homes of individuals.

2. Smoking shall be prohibited in bedrooms and at sites where employment supports or day supports are provided.

3. Ashtrays of non-combustible material and safe design shall be provided in all areas where smoking is permitted.

(8) A provider shall not deviate in any respect from the foregoing environmental requirements of 115 CMR 7.07(7) as they apply to that provider, unless the provider demonstrates that the safety needs of individuals are otherwise adequately addressed and has received approval from the area director within its safety plan as required by 115 CMR 7.06. However, providers of 24 hour site-based respite may not deviate from any of the environmental requirements of 115 CMR 7.07(7) under any circumstances.

# 7.08: Capacity

(1) The capacity of a site where residential supports or 24 hour site-based respite supports are provided shall be determined by the Department and may vary depending on the size, location, and other characteristics of the site; the ages, needs and preferences of the individuals; and the experience and capability of the provider, provided, however, the capacity shall not exceed five individuals unless 115 CMR 7.08(2) applies.

(2) All sites providing residential supports and 24 hour site based respite services in existence and licensed by the Department as of December 1, 1995 shall be permitted to retain for the life of the original building the capacity in excess of five that was approved under the provider's license in effect as of that date; unless the Department and the provider determine that the additional individuals can no longer be accommodated in the home without detriment. If it is determined at any time that the site can no longer accommodate more than five individuals, the provider must develop and implement a plan to reduce the capacity to five or fewer.

## 7.08: continued

(3) A site where a care provider provides residential supports or 24 site based respite supports in the care provider's home may serve no more than three people (including individuals served by the Department), regardless of funding source. However, any placement service site with a capacity of four that was approved by the area director and in existence and licensed by the Department prior to June 1, 2014, may retain the capacity of four. In the event the Department determines that the site can no longer accommodate four individuals, the provider must develop and implement a plan to reduce the capacity to three or fewer.

# 7.09: Standards for Employment and Day Supports

(1) In addition to the requirements of 115 CMR 7.01 through 7.07, providers of employment supports or day supports shall adhere to the following standards:

(a) Integrated, individual employment is the preferred service option and outcome for adults of working age.

(b) All individuals are to be encouraged and supported in seeking and securing employment or becoming engaged on a pathway to employment.

(2) Providers of employment supports including individual and group options shall adhere to the following standards:

- (a) Individuals are educated about the benefits of integrated employment.
- (b) Career planning is provided through the development of an individualized plan that identifies specific job goals and support needs.
- (c) Individuals are supported to acquire and maintain jobs in an integrated work setting.
- (d) Individuals are supported to improve job skills and foster career advancement opportunities.
- (e) Individuals are supported to interact with co-workers and others without disabilities.
- (3) Providers of day supports shall adhere to the following standards:

(a) For all providers of day supports, provide a full range of community activities that provides opportunities for developing, enhancing, and maintaining competency in personal, social and community activities and includes, but is not limited to:

- 1. career exploration,
- 2. community integration experiences,
- 3. skill development and training,
- 4. development of activities of daily living,
- 5. socialization experiences and support to enhance interpersonal skills, and
- 6. pursuit of personal interests and hobbies.

(b) For providers of day supports that include supports to prepare individuals for work:

1. inform individuals and their families about the benefits of integrated employment.

2. develop and implement individualized support strategies that address habilitative goals necessary to prepare individuals for work;

- 3. conduct assessments to identify specific interests, skills and support needs;
- 4. develop relevant skills that lead to employment;
- 5. develop job placement plans based on assessments; and

6. develop and implement approaches and strategies to support expanding integrated community employment and meaningful community integration.

# 7.10: Standards for 24 Hour Site Based Respite Services

(1) In addition to the requirements of 115 CMR 7.01 through 7.08, all providers of respite services shall:

(a) minimize upset and disruption of the individual's typical life patterns and enable the individual to participate in life routines in accordance with the individual's ISP;

(b) to the extent possible obtain a thorough knowledge of each individual's medical needs, including his or her ability to communicate health and medication needs; determine each individual's ability to evacuate in an emergency and take necessary actions to assist the individual in the transition between home and provider, where feasible and when requested by the individual, family, or other primary care provider.

## 7.11: Standards for Placement Services

(1) In selecting the care provider the placement agency shall comply with the following:

(a) The placement agency shall assess the personal characteristics of the care provider and, where applicable, other members of the household who will be providing supervision or services with respect to their ability and appropriateness to serve the individual as determined through interviews, review of any prior service assessments, and information from at least two personal references. The placement agency shall also inquire of the care provider and the personal references as to whether any reports have been filed against the provider under M.G.L. c. 119 regarding the abuse, mistreatment, or neglect of children; under M.G.L. c. 19C, regarding abuse of adults with disabilities; under M.G.L. c. 19A, regarding abuse of elders; or under M.G.L. c. 111, regarding abuse of a resident in a facility licensed or certified by the Department of Public Health.

(b) In assessing the care provider's ability to provide supports and services to individuals, the placement agency shall consider the following factors:

1. motivation for application;

2. characteristics, number, and age of the individuals the care provider can adequately serve;

3. geographical location of the care provider's home in relation to the needs of the individual the placement agency intends to serve;

4. ability to adjust to family changes which will occur when the individual is placed;

5. capacity to integrate the individual into daily routines and patterns of living without undue disruption;

6. flexibility to meet the individual's changing needs;

7. ability to accept the individual's relationship with his or her natural parents and other family members;

8. ability, if and when appropriate, to assist an individual to make the transition to a more independent living arrangement; and

9. previous work experience, competencies, or training in providing supports and services to persons with intellectual disability or other disabilities, and relevant personal experiences.

(c) The placement agency shall assure that the minimum age for a person providing residential supports to an individual eligible for the Department's services in the care provider's own home is 21 years of age, except that a person 18 of age or older may provide such services if the person works under the direct supervision of someone 21 years of age or older and through training or experience exhibits the knowledge and competencies as set forth in 115 CMR 7.11(2)(a) prior to the provision of services. The age of any care provider shall be considered in determining the appropriateness of placing specific individuals with that person based on the individual's ISP.

(d) The placement agency shall assess whether the care provider's employment, if any, outside the home will decrease the provider's capacity to meet the requirements of 115 CMR 7.00 and that adequate provision exists for the care and supervision of individuals during any such absences.

(e) The placement agency shall assess the composition of the care provider's household to ensure that the number and characteristics of other members of the household do not adversely affect either the capacity of the provider to give adequate time, energy, and attention to individuals served or the appropriateness of the environment for specific individuals in accordance with their needs.

(f) The placement agency shall assure that a care provider is serving only individuals 18 years of age or older unless there is prior approval by the area director. The approval shall be based on the area director's consideration of the circumstances and relationships of all individuals who will be supported in the home and the capacity of the care provider to meet their needs.

(g) The placement agency shall conduct and document a review of the home of the person who may be selected as the care provider in accordance with the standards set forth in 115 CMR 7.07(1) and (3) through (7).

(2) The placement agency shall assure that care providers shall have sufficient pre-service and in-service training to assure that they have the information and skills necessary to meet the needs of individuals to be supported.

#### 7.11: continued

(a) Prior to the delivery of services, the placement agency shall assure that the care provider demonstrates knowledge and competence in at least the following areas: the current value base of service delivery; the nature and treatment of individuals with developmental disabilities; relevant principles of care, treatment, and the provision of supports; first aid; CPR; seizure care; and fire and safety considerations.

(b) The placement agency shall assure that the care provider annually receives sufficient ongoing in-service training to continue to meet the needs of individuals served.

(3) The placement agency shall execute a written agreement with the person indicating that the care provider will:

(a) comply with all applicable state laws, standards, and regulations;

(b) report any changes of location, household composition, or other conditions that may affect the person's continued suitability and ability to provide supports prior to such changes or as soon thereafter as practicable, but no later than 24 hours after such changes;

(c) permit on-site review of the home;

(d) permit a representative of the placement agency and an employee of the Department authorized to conduct surveys under 115 CMR 8.03(3): *Survey Team* to visit the home, as often as deemed necessary by the placement agency or the Department, to monitor compliance with the Department's regulations. Such visits may be made at any time, with or without notice, but should ordinarily be made with prior notice and at normal hours, giving due regard to the privacy of the individuals supported in the home, family members and other residents, and to any disruption that the visit may cause;

(e) cooperate with the placement agency and the Department in maintaining liability insurance coverage, where applicable; and

(f) arrange for emergency medical treatment of the individual and for notification of the placement agency and the individual's physician, family, and guardian, if any, and service coordinator of emergencies or symptoms reasonably appearing to require medical attention.

(4) The placement agency shall conduct an annual assessment of the skills of the care providers, with such assessment made available to the Department.

(5) The placement agency should determine whether the care provider is the sole provider of residential supports or whether there will be shared responsibility with a spouse or other adult members of the provider's family. If there is shared responsibility, the additional person(s) must be identified and determined appropriate as a care provider in accordance with the requirements of 115 CMR 7.11(1) through (4) and all other applicable regulations.

(6) The placement agency shall, prior to placement, determine and document the appropriateness of the placement in relation to the needs and age of the individual and the capacity and other characteristics of the care provider and of the home.

(7) Prior to placement, except in emergencies in which case as soon after placement as possible, the placement agency shall furnish the care provider with sufficient personal, medical, legal, and behavioral information to enable the care provider to care for the individual. Such information shall include, at least:

(a) information on medication, special diets, allergies and other pertinent medical needs and the name(s) and telephone number(s) of the person(s) designated by the placement agency for the care provider to contact in the event of a medical or other emergency involving the individual;

(b) information on the individual's work, training, school, or other supports; and

(c) information on the individual's legal status with respect to custody (if a minor) or guardianship, and, if applicable, the name, address, and telephone number of the guardian, and specific authority, limitations, and rights of the individual in relation to custody or the guardianship.

(8) Except in emergencies, a representative of the placement agency shall participate in the first meeting of the care provider and the individual.

## 7.11: continued

(9) After a placement is made, the placement agency shall visit the individual at the home to ensure its continuing appropriateness. The frequency of visits and the length of time over which visits are conducted may vary depending on the individual circumstances, but in no event shall the placement agency visit each home where residential or 24 hour respite supports are provided less frequently than once monthly, unless otherwise instructed in writing by the Department.

(10) The placement agency shall, within a week after such supports initially have been provided, and at least quarterly thereafter if the supports continue to be provided, contact the individual and his or her family or other primary care provider to obtain a written evaluation of the arrangement. The evaluation shall include an assessment of the individual's and family's satisfaction with the supports and services provided by the placement agency and the care provider and with the degree to which the services meet the individual's needs.

### **REGULATORY AUTHORITY**

115 CMR 7.00: M.G.L. c. 19B, §§ 1 and 13 through 15.