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**CHAPTER 26: ICF/DD SERVICES**

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**DECERTIFICATION****Termination of Certification of an ICF/DD**

An ICF/DD may voluntarily cease to participate in the Medical Assistance Program or may involuntarily be terminated from the program.

**Reasons for Decertification of an ICF/DD**

An ICF/DD may be decertified for the following reasons:

- The ICF/DD may voluntarily withdraw from the program for reasons of its own by having the owner and administrator submit a written notice of withdrawal to the DHH Health Standards Section at least 60 days in advance,
- A new owner may decide against participation in the program by submitting a written notice 60 days in advance to the DHH Health Standards Section,
- DHH may decertify an ICF/DD for failure to comply with Title XIX standards, thus canceling the facility's provider agreement,
- DHH may decertify an ICF/DD if deficiencies pose immediate jeopardy to the recipient's health, safety, rights, or welfare,
- The ICF/DD may allow its provider agreement to expire by submitting a written notice to DHH Health Standards Section at least 60 days in advance, or
- DHH may cancel the provider agreement if and when it is determined that the ICF/DD is in material breach of the contract.

**Recertification of an Involuntarily Decertified ICF/DD**

After involuntary decertification, an ICF/DD cannot participate as a medical assistance provider unless the following conditions are met:

- The reasons for the decertification or nonrenewal of the contract no longer exist,
- Reasonable assurance exists that the factors causing the decertification will not recur,
- The ICF/DD demonstrates compliance with the required standards for a 60-day period prior to reinstatement in a participating status, and

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- A professional medical review reports that recipients are receiving proper care and services.

**Examples of Situations Determined to Pose Immediate Jeopardy**

Listed below are examples of situations that may result in death, serious injury or directly threatens the health, safety, or welfare of a recipient or other situations adversely affecting recipients that could result in sanctions. These examples are not intended to be all-inclusive. Other situations adversely affecting recipients could constitute sufficient basis for the imposition of sanctions.

**Poisonous Substances**

An ICF/DD fails to provide proper storage of poisonous substances.

**Falls**

An ICF/DD fails to maintain required direct care staffing and/or a safe environment as set forth in the regulations such as equipment not being properly maintained or personnel not responding to a recipient's request for assistance.

**Assaults**

An ICF/DD fails to maintain required direct care staffing and fails to take measures when it is known that a recipient is combative and assaultive to other recipients, or the ICF/DD fails to take corrective action against an employee who has a history of recipient abuse and assaults a recipient.

**Physical Restraints Resulting in Permanent Injury**

An ICF/DD employee improperly applies physical restraints contrary to published regulations or fails to check and release restraints as directed by regulations or physician's written instructions.

**Control of Infections**

An ICF/DD fails to follow or meet infection control standards as ordered in writing by the physician.

**Medical Care**

An ICF/DD fails to secure proper medical assistance for a recipient.

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A recipient's condition declined and no physician was informed. This includes the following:

- An ICF/DD failed to follow up on unusual occurrences of negative findings,
- An ICF/DD failed to obtain information regarding appropriate care before and after a recipient's hospitalization,
- An ICF/DD failed to timely hospitalize a recipient during a serious illness

An ICF/DD did not follow written physician's orders. This includes failure to fill prescriptions timely.

**Medications**

An ICF/DD improperly stores and distributes medications. This would include the following:

- Knowingly withholding a recipient's medications,

**NOTE: The recipient does have the right to refuse medications. Such refusal *must be documented in the recipient's record and brought to the attention of the physician and ID team.***

- Omitting medications without justification,
- Excessive medication errors,
- Improperly storing narcotics or other prescribed drugs, mishandling of drugs or other pharmaceutical problems.

**Improper Treatments**

An ICF/DD employee knowingly does the following:

- Performs treatment contrary to a physician's order,
- Fails to feed recipients who are unable to feed themselves as set forth in physician's instructions,
- Fails to obtain a physician's order for use of chemical or physical restraints, or
- Fails to check and release physical restraints as specified in state regulations.

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**Natural Disaster/Fire**

An ICF/DD fails to train its staff members in disaster/fire procedures as required for licensing or failure to meet staffing requirements.

**Decubitus Ulcers**

An ICF/DD fails to follow decubitus ulcer care measures in accordance with a physician's written orders.

**Elopement**

An ICF/DD fails to provide necessary supervision of its recipients or take measures to prevent a recipient with a history of elopement problems from wandering away. Examples of preventative measures include, but are not limited to the following:

- Documentation that the elopement problem has been discussed with the recipient's family and the Interdisciplinary Team, and
- Personnel have been trained to make additional efforts to monitor these recipients.

**Environment/Temperature**

An ICF/DD fails to reasonably maintain its heating and air-conditioning system as required by regulations. Isolated incidents of breakdown or power failure will not be considered immediate jeopardy.

**Life Safety**

An ICF/DD knowingly fails to maintain the required Life Safety code system such as:

- Properly functioning sprinklers, fire alarms, smoke sensors, fire doors, electrical wiring,
- The practice of fire or emergency evacuation plans, or
- Stairways, hallways and exits are kept free from obstruction.

**Staffing**

An ICF/DD consistently fails to maintain minimum staffing. Isolated incidents where the facility does not maintain staffing due to personnel calling in sick or other emergencies are excluded.

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**Dietary Services**

An ICF/DD fails to follow the minimum dietary needs or special dietary needs as ordered by a physician. The special diets must be prepared in accordance with physician's orders or a diet manual approved by the American Dietary Association.

**Sanitation**

An ICF/DD fails to adhere to state and federal sanitation regulations. The following are examples of poor sanitation:

- Strong odors linked to a lack of cleanliness,
- Dirty buildup on floors and walls,
- Dirty utensils, glasses and flatware, and
- Insect or rodent infestation

**Equipment and Supplies**

An ICF/DD fails to provide equipment and supplies authorized in writing by a physician as necessary for a recipient's care.

**Recipient Rights**

An ICF/DD violates recipients' rights and such violations result in the recipients' distress to such an extent that their psychosocial functions are impaired or such violations directly threaten their psychosocial functioning. This includes the following:

- Psychological abuse,
- The use of corporal punishment,
- Allowance of the following responses to recipients by staff members and employment supervisors:
  - Physical exercise or repeated physical motions,
  - Excessive denial of usual services,

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- Any type of physical hitting or other painful physical contacts except as required by medical, dental, or first aid procedures necessary to preserve the recipient's life or health,
  - Requiring the recipient to take on an extremely uncomfortable position,
  - Verbal abuse, ridicule, or humiliation,
  - Requiring the recipient to remain silent for a long period of time,
  - Denial of shelter, warmth, clothing or bedding, or
  - Assignment of harsh physical work.
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- Failure to afford the recipient with the opportunity to attend religious services,
  - Denial of a recipient's meal without a doctor's order,
  - Failure to afford the recipient with suitable supervised opportunities for interaction with members of the opposite sex, except where a qualified professional responsible for the formulation of a particular individual's treatment/habilitation plan writes an order to the contrary and explains the reasons.

The secretary of DHH has the final authority to determine what constitutes "immediate jeopardy" or serious threat.