**Section 385.2000 Medical and Supportive Services**

a) Each client admitted shall be under the care of a physician. Clients shall be referred to a physician if they do not have one identified at the time of admission.

b) Each client admitted shall have had a physical examination within three days after admission, unless the client has had a physical examination no more than 30 days prior to admission; or has been admitted directly from an acute care hospital where the client had been admitted as a patient.

c) Each client admitted shall have tuberculin testing in accordance with the Control of Tuberculosis Code (77 Ill. Adm. Code 696) within 10 days after admission or be able to produce the results of a tuberculin test administered within the last 90 days or be under the care of a physician for tuberculosis. All individuals who are significant reactors shall have documentation in their record of follow-up and consideration for therapy.

d) The names and telephone numbers of persons to contact in medical and other emergencies shall be available. This information shall be reviewed with staff, contractual employees and direct care volunteers.

e) There shall be one or more agreements with area hospitals for emergency admissions and needed hospital-based services, for use in instances where a client is incapable of deciding his/her own hospital admission.

f) Each client shall have an assessment of physical, mental, and psychosocial needs. These needs shall be addressed in an integrated care plan that will allow the client to maintain his/her maximum potential for as long as possible.

g) The facility shall either contract, or provide directly, the staff and services needed to meet each client's integrated care plan. The integrated care plan shall be updated as needed, or at least every 3 months.

(Source: Amended at 26 Ill. Reg. 11990, effective July 31, 2002)