A. Policy Statement

1. The department shall establish Human Rights Committees to address concerns and complaints about the rights of individuals who are placed or treated under the direction of the Commissioner of Developmental Services. The Human Rights Committee(s) shall advise and make recommendations to the Regional or Training School Director, as applicable, on matters which such committee(s) review.

2. Each Human Rights Committee (HRC) provides independent program and rights review for the sole purpose of advising Regional and Training School Directors regarding issues and concerns relevant to the rights of DDS individuals.

3. An HRC functions as a recommending and referring body and, as such, does not approve or disapprove individuals programs.

4. At least one HRC shall be established in each DDS region and training school.

5. Documentation of the proceedings of all HRC meetings shall include issues discussed, committee recommendations, and action requested.

6. Committee access to department records for the purposes of reviewing human rights issues shall follow department policy and procedure, Connecticut law, and Federal law, which includes but is not limited the confidentiality and privacy of individual and employee information. Typically access shall be limited to information which is the “minimum necessary” to satisfy the Committee's responsibilities.

B. Applicability

This policy shall apply to all individuals placed or treated under the direction of the Commissioner and to all staff providing services to those individuals. This includes individuals receiving services in DDS operated, funded, and/or licensed facilities or programs, including ICF/MR, CLA, CTH, Individual Supports, and Day Services, and, individuals receiving any HCBS waiver service where paid staff are required to carry out a restrictive intervention regardless of where the individual lives. This procedure shall not apply to individuals who live independently, who live with their families without DDS funded supports, or who reside in long-term-care facilities licensed, funded or overseen by other agencies of the state.

This policy shall be adhered to by staff and administrators of all DDS operated, funded and/or licensed facilities, programs, services and supports.
C. References

Constitution of the State of Connecticut
Constitution of the United States
State Statute:
  CGS 17a-238 “Persons Placed or Treated Under Direction of DDS Commissioner”
  CGS 17a-210 “Hearing Rights – Eligibility, Transfer, Medication/Aversives, Community-based service”
  CGS 45a-668, et seq, “Guardianship of Persons with Developmental Disabilities”
  CGS 46a-60 et seq, “CHRO”
  CGS 46a-7 et seq, “Protection & Advocacy/ Persons with Disabilities”
State Regulation:
  Regs. Conn Agencies, 17a-238-7 – 13, “Approval; Aversive Programs”
Federal Law:
  Developmental Disabilities Assistance and Bill of Rights Act, as amended
  Americans with Disabilities Act, as amended
  Rehabilitation Act (“504”), as amended
  HIPAA (Privacy of “protected health information”)
Federal Regulation for ICF/MR - 42 CFR Ch. IV Subpart I:
  483.420, Condition of Participation, Client Protections
  483-440, Condition of Participation, Active Treatment Services (f) Standard: Program monitoring and change (3) (i) (ii) (iii)
  483-450, Condition of Participation, Client Behavior and Facility Practices
DDS Policy:
  Rules, Regulations, Policy –Internal
  DDS-1, “Client’s Rights.”
  DDS-3, “Client Programs.”
  DDS-I.E.PO.003, “Behavior Modifying Medications”
  DDS-I.E.PR.003, “Behavior Modifying Medications”
  DDS-I.E.PO.004, “Program Review Committee”
  DDS-I.E.PR.004, “Program Review Committee”
  DDS-I.H.1.PO.002, “HIPAA Uses and Disclosures: General rules (The Standard)”