**DDS Ethics Committee for Independent Contractors and Consultants**

**Approval of Staff Expense Payments for Accompanying an Individual to an Activity or Event Check List**

Documents required for the ethics committee’s review and approval of compliance with

[**ADVISORY OPINION NO. 99-15**](http://www.ct.gov/ethics/cwp/view.asp?a=2305&q=301330) **Application of Ethics Rules to Acceptance of Expense Payments to Accompany Department of Mental Retardation Client to Event**

**Prior approval**, not later than three months in advance of the activity or event from the DDS Ethics Committee for Independent Contractors and Consultants, is required for **staff receiving $2,000 or more** from an individual or an individual’s family for expenses for the activity or event.

**Post approval**, not later than three months after the activity or event from the DDS Ethics Committee for Independent Contractors and Consultants, is required for **staff receiving more than $200 but less than $2,000** for expenses for the activity or event.

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| 1. | **[ ]**  | Name of individual receiving funding or services from DDS who is participating in the activity or event |
| 2. | **[ ]**  | Name of staff for whom expenses are being paid |
| 3. | **[ ]**  | Description of the type of activity or event and where and when did it take place.  |
| 4. | **[ ]**  | Narrative of other funding sources requested including, but not limited to, fundraising, charitable initiative or grant, family contribution, etc. |
| 5. | **[ ]**  | Documentation of request and approval with signatures of the individual the individual’s family or guardian, and the Planning and Support Team (PST), including PST minutes, and individual’s or guardian’s signed permission |
| 6. | **[ ]**  | Signed authorization from the independent contractor or consultant |
| 7. | **[ ]**  | Documentation of expenditures by an individual or an individual’s family for an independent contractor’s or consultant’s staff  |
| 8. | **[ ]**  | Documentation of use of funds (Allowable expenses include transportation, lodging, meals, admissions when accompanied by the individual. Disallowed expenses include snacks, souvenirs, or admissions when staff is not accompanied by the individual.) |
| 9. | **[ ]**  | Documentation that the contractor’s or consultant’s management staff, other than the staff attending the event, and the Planning and Support Team, have agreed that an individual’s funds should be used for staff to attend the activity or event. |
| 10. | **[ ]**  | Documentation of the independent contractor’s or consultant’s meal reimbursement policy or guidelines, if applicable. |
| 11. | **[ ]**  | Receipts are required to be available for review for any expense of $20 or more. |