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TELEP

## Request for Inclusion or Revision to an **Administrative Directive**

**Connecticut Department of Correction** 

Administrative Dire	Administrative Directive Number: 8.9 Title: Health Services Administrative Remedies					
I recommend the following inclusion or revision to the above referenced Administrative Directive (provide detailed explanation regarding reason for change):						
The following language is suggested to be added to Administrative Directive 8.9, Health Services Administrative Remedies section 4 subsection h, Time limitations.						
preclu the in these the Ad shall Admini was in	de an inmate from hav: mate must adhere to th circumstances have imp ministrative Remedies be thirty (30) days f: strative Remedy not in	ing access to he time frame proved suffic procedure. rom the even ncluding the ise prevented	emergent medical circums o the Administrative Remer- es set forth in this Dire- ciently to allow the inma- In such circumstances, the t that is the basis of the period of time during wh d from accessing the Admin ical circumstances.	dies procedure, ctive once te to access he timeframes e ich the inmate		
This language is suggested based on Rucker v. Giffen						
See attached documents						
ORIGINATOR						
Name: James DelPeschio			Title: Lieutenant	Date: 5/6/2021		
Signature: A . Contract Facility/Unit: OSP						
OFFICE OF STANDARDS AND POLICY REVIEW:						
Reviewed by: Office of Standards and Policy Staff signature:				Date:		
Approved Denied	UNIT/DISTRICT/DIVISION RECOMMENDATIONS:			Date: 5/10/2)		
	District Administrator's signature: (only needed if originating from facility)			Date:		
1	Division Administrator's signature: Millie Mully			Date: 5-11-21		
COMMISSIONER'S DECISION:						
This request is:	P		ffective date of request:			
The language/provisions of this inclusion/revision shall be effective as of and subsequently added to the Administrative Directive at the next update:			Date:			
This inclusion/revision shall be added to the Administrative Directive prior to:				Date:		
This inclusion/revision shall be added immediately to the Administrative Directive.						
Commissioner's si	Commissioner's signature: Mul Illin Date: Shipru					