

**STATE OF CONNECTICUT
DEPARTMENT OF DEVELOPMENTAL SERVICES**

Policy No. 1.E.PO.002

Subject: Behavior Support Plans

Section: Health and Safety

Issue Date: April 11, 2006

Effective Date: Upon Release

Revised: July 1, 2009

**Approved:/S/ Peter H O'Meara,
Commissioner**

A. Policy Statement

The purpose of this policy is to assure that each person placed or treated under the direction of the Commissioner in any public or private facility, or who receives HCBS waiver services in his/her own or family home, shall be protected from harm and receive humane and dignified treatment which is adequate for such person's needs and for the development of such person's full potential. It is the intention of the department to promote and use the most humane and dignified approaches to supporting individuals who have challenging behaviors. The Department is committed to ensure that effort is to be made to introduce positive behavioral programming and supports that enhance the unique aspects of each individual supporting them to live a full life of choice and inclusion. The design, approval and implementation of behavior support plans will reflect the values of the department to provide the least restrictive setting and interventions for all who are served.

In addition, this policy is issued to promote statewide consistency regarding the use, documentation, review and approval of aversive procedures employed with individuals served by the Department of Developmental Services and to assure consistent implementation of Behavior Support Plans.

B. Applicability

This policy applies to all individuals placed or treated under the direction of the Commissioner. This includes individuals receiving services in or from DDS operated, funded and/or licensed facilities, including ICF/MR, CLA, CTH, Day Services and DDS Individualized Home Supports provided in any setting and/or any DDS funded service regardless of where the individual lives. It applies to individuals receiving any HCBS Waiver Services where paid staff are required to carry out a behavioral intervention that utilizes an aversive, physical, or other restraint procedure and/or staff funded by the DDS who are required to pass/give a behavior modifying medication, regardless of where the individual lives. This policy applies to individuals receiving services from the DDS Voluntary Services program if they are placed in an in-state DDS operated, funded and/or licensed facility. It also applies to any individuals who receive ongoing, planned psychiatric supports where behavior modifying medication is prescribed by the Psychiatrist regardless of where the individuals live and whether or not they are receiving DDS Waiver Services.

This policy does not apply to those receiving DDS Respite Services only, those exempt from Program Review Committee/Human Rights Committee (PRC/HRC) review, and those who reside in long-term care facilities licensed, funded and/or overseen by other state agencies.

C. Prohibitions

1. No behavioral support plan or course of treatment for any person placed or treated under the direction of the Commissioner shall include:
 - a. The use of an aversive procedure that has not been approved by the DDS Commissioner.
 - b. The use of aversive procedures except in accordance with Department of Developmental Services Regulations - Sections 17a-238-7 through 17a-238-11.
 - c. A restraint procedure or device used as a punishment contingency (i.e., shall not be presented contingent on the occurrence of a behavior for the planned purpose of reducing the frequency of an undesirable behavior).
 - d. The use of a room specifically designed for physical isolation/time-out and the use of a locked door for any physical isolation/time-out.
 - e. Any restraint procedure or device – without provision of appropriate supervision and release-time.
2. No training curriculum for the use of aversive procedures, physical restraint procedure, mechanical restraint apparatus or certain forms of physical isolation which is not presently approved by the department may be used for any person placed or treated under the direction of the commissioner without prior approval in accordance with CGS Section 17a-238-13.

D. Definitions

See Procedure I.E. PR.002 revised May 2008

E. References

1. Statutes
 - a. CT General Statute 17a-210
 - b. CT General Statute 17a-238
 - c. CT General Statute 45a-677
 - d. CT General Statute 45a-677(e)
 - e. CT General Statute 46a-11 et seq.
2. Rules, Regulations and Policy – External
 - a. ICF/MR Federal Regulations – 42 CFR Part 483 Subpart D 483-420, “Condition of Participation, Client Protections”
 - b. ICF/MR Federal Regulations – 42 CFR Part 483 Subpart D 483-440, “Condition of Participation, Active Treatment Services”
 - c. ICF/MR Federal Regulations – 42 CFR Part 483 Subpart D 483-450, “Condition of Participation, Client Behavior and Facility Practices”
3. Rules, Regulations and Policy or Instructions – DMR
 - a. Department of Developmental Services Regulations - Sections 17a-238-7 through 17a-238-11.
 - b. DDS I.F.PO.001, Abuse and Neglect Prevention
 - c. DDS I.F.PR.001, Abuse and Neglect Prevention, Reporting, Notification, Investigation, Resolution and Follow-up
 - d. DDS I.E.PR.002, Behavior Support Plans
 - e. DDS I.E.PR.003, Behavior Modifying Medications
 - f. DDS I.E.PR.004, Program Review Committee
 - g. DDS I.C.PR.001 through 004, Case Manage Procedures

- h. DDS I.E.PR.006, Pre-sedation for Medical/Dental Procedures
- i. DDS, II.G.PO.001, Office of the Commissioner Institutional Review Board (IRB)
- j. DDS.II.G.PR.001, Office of the Commissioner Institutional Review Board (IRB)
- k. DDS I.E.PO.00 6, Human Rights Committee
- l. DDS Policy 7, Programmatic Administrative Review
- m. DDS Policy 13, Advocates