

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT ON DISABILITY SERVICES



Effective Date: December 1, 2010	Number of Attachments: 2
Responsible Office: DDS Deputy Director, Developmental Disabilities Administration	
Supersedes Policy: Rights of Persons with Mental Retardation and/or Developmental Disabilities to the Provision of Services and Supports in the Most Integrated Community Setting	
Title/Subject: Most Integrated Community-Based Setting Policy	
Cross-References: Nursing Facility Placement Policy & Procedure; PASRR Procedure; Human Rights Advisory Committee Policy	

All underlined words/definitions can be found in the Definitions Appendix.

1. PURPOSE

The purpose of this policy is to establish the standards and guidelines by which the Department on Disability Services (“DDS”), Developmental Disabilities Administration (“DDA”), will assist individuals with intellectual disabilities obtain services and supports in the least restrictive and most integrated community-based setting that is most appropriate to the needs of the individual.

2. APPLICABILITY

This policy applies to all DDA employees, subcontractors, providers/vendors, consultants, volunteers, and governmental agencies that provide services and supports on behalf of individuals with disabilities receiving services as part of the DDA Service Delivery System funded by DDA or the Department of Health Care Finance (DHCF).

3. AUTHORITY

The authority for this policy is established in the Department on Disability Services as set forth in D.C. Law 16-264, the “Department on Disability Services Establishment Act of 2006,” effective March 14, 2007 (D.C. Official Code § 7-761.01 *et seq.*); and D.C. Law 2-137, the “Mentally Retarded Citizens Constitutional Rights and Dignity Act of 1978,” effective March 3, 1979 (D.C. Official Code § 7-1301.01 *et seq.*).

4. POLICY

It is the policy of DDS to ensure all individuals receiving services from the DDA service system do so in the most integrated community setting appropriate to that individual. DDA will utilize person-centered planning and the assumption that all individuals will live in the most inclusive setting possible. Community integration in housing, work, education, personal supports, social and/or spiritual life will be supported and fostered through DDA providers. DDA providers are responsible for the provision of supports and services consistent with the assessed needs of the individual, and which result in the individual’s acquisition and maintenance of physical, mental, and social skills and well-being that enable the person to live successfully in the community. Any barriers to obtaining the needed supports and services will be addressed in the Individual Support

Plan (ISP) and any restriction to access to the most integrated setting by the Restrictive Control Review Committee (RCRC).

5. RESPONSIBILITY

The responsibility for this policy is vested in the Director, Department on Disability Services. Implementation for this policy is the responsibility of the Deputy Director, Developmental Disabilities Administration.

6. STANDARDS

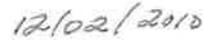
The following are the standards by which DDS will evaluate compliance with this policy:

- A. Individuals with intellectual disabilities have the fundamental right to gain and sustain an optimum level of independence and competency to make decisions and have control over their lives and choices. Services and supports shall be provided in a manner that promotes:
 1. Human dignity.
 2. Self-determination and freedom of choice to the individual's fullest capability.
 3. The opportunity to live and receive supports and services in the most integrated and most inclusive setting possible.
 4. The opportunity to undergo typical developmental experiences, even though such experience may have an element of risk, provided that the individual's safety and well being shall not be unreasonably jeopardized.
 5. The opportunity to engage in activities and styles of living that encourage and maintain the integration of the person in the community, including:
 - a. Social integration in settings typical of the community, which maximize the individual's contact with others who live or work in that community.
 - b. Maintaining a personal appearance that is appropriate to the individual's chronological age and the practices of the surrounding community and that is consistent with his or her choices and preferences and social and cultural background.
 - c. Active engagement in activities, patterns, and routines of living that are appropriate to the person's age and the practices of the surrounding community, and that are consistent with his or her interests and choices.
 - d. Communications that are courteous, respectful of the dignity of the individual, and facilitate the person's understanding of what is being communicated.
 - e. Active participation in recreation and leisure time activities in the community, which are appropriate to the individual's age, interests, and choices.
 - f. A home in a community integrated setting in which the person feels safe, and that is physically accessible to public transportation and community resources.

2. The DDS Human Rights Advisory Committee (HRAC) reviews all placements for appropriateness.
3. The Nursing Facility Placement/PASRR (Pre-Admission Screening and Resident Review) procedure delineates DDA's role in reviewing and evaluating all referrals to nursing facilities.



Laura L. Nuss, Director



Approval Date

Attachments:

1. Nursing Facility Placement Policy
2. Nursing Facility Placement/PASRR procedure