

Rights of People Supported by DDA during COVID-19 Emergency

Phase Two Operating Status

With the start of Phase 2 on June 22, 2020, the "stay at home" provisions of DC Mayor's Order 2020-063 have been lifted. This applies to all DC residents, including people receiving services from the Department on Disabilities Services' Developmental Disabilities Administration (DDA).

- While DC Health has recommended that people at higher risk for COVID transmission and for severe illness from COVID-19, including people who live in Residential Habilitation and Intermediate Care Facilities, limit going into the community and having visitors, this does not mean such activities are completely prohibited.
- While providers may make changes to limit the number of individual staff interacting with people supported, residential settings are not "on lock down," absent a specific quarantine direction from DC Health.
- Promoting the use of Universal Safeguards and Personal Protective Equipment (PPE) remains critical within the DDA system.

Visitation and Community Outings

When discussing visitation and community outings, DDA Service Coordinators, providers, and other supporters should always start with remembering that a person receiving DDA services and supports has the same rights as any other DC resident.

- People supported by DDA have the right to go into the community, have visitors within and outside their home, and go to visit family members and friends.
- Providers are prohibited from issuing blanket bans or restrictions of such rights.
- Any proposed restrictions of individual rights must comply with the DDS and provider human rights policies and procedures.¹ They must be individually justified, accompanied by the person's informed consent, and reviewed by the provider's Human Rights Committee, with a right to appeal to the DDS Human Rights Advisory Committee, prior to the implementation of such limitation.

Using the Community Participation Questionnaire (CPAQ)

The Community Participation Assessment Questionnaire (CPAQ) guides team discussions about re-starting day/employment providers' services. Use of the CPAQ is also subject to DDS and provider human rights policies and procedures.

- It is <u>not</u> required before a person can engage in community activities.
- It is <u>not</u> required before a person to have visitors or go visit people.
- It is <u>not</u> a directive to prevent people from engaging in activities based on their risks.
- It is <u>not</u> a tool that empowers the team to decide what a person can or cannot do.
- It is <u>not</u> mandating a complete elimination of risk, but rather designed to encourage discussion about how a person's choice can be supported in a way that reduces risk.

NOTE: <u>Reopen DC</u> was issued to the Mayor on May 21, 2020. However, as knowledge of COVID-19 continues to evolve, so do public health-related decisions. The Mayor's Order in each Phase will reflect any changed recommendations as the situation evolves.



¹ See DDS Human Rights Policy (2013-DDA-H&W-POL007); Provider Human Rights Committee Procedure (2013-DDA-H&W-PR015); and Human Rights Advisory Committee Procedure (2013-DDA-H&W-PR012).

The Role of Guardians and Other Substitute Decision-Makers

Guardians and other substitute decision-makers do not have the automatic authority to overrule a person's wish to go into the community, work, or have visitors.

- Guardians (even "general" ones) are legally: (1) prohibited from imposing unreasonable confinement or involuntary seclusion, including forced separation from other people, without receiving specific court approval; (2) required to, as much as possible, encourage independent decision-making by the person and include the person in the decision-making process; (3) required to try to make decisions based on the person's known wishes and only consider best interests when the person's wishes are unknown.
- A substitute health-care decision-maker's authority (sometimes known as a "21-2210 SDM") is strictly limited to medical decisions.

Cause for Sanctions

- Providers are prohibited from discharging a person for his or her refusal to accept a restriction absent appropriate human rights review, proven attempts to educate and support the person, and full exploration of less restrictive options.
- DDS may sanction providers for not complying with this guidance and related DDS human rights policies and procedures.

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