



House of Representatives

File No. 657

General Assembly

February Session, 2024 **(Reprint of File No. 147)**

Substitute House Bill No. 5293
As Amended by House Amendment
Schedule "A"

Approved by the Legislative Commissioner
May 3, 2024

AN ACT CONCERNING THE DEPARTMENT OF DEVELOPMENTAL SERVICES' RECOMMENDATIONS REGARDING VARIOUS REVISIONS TO DEVELOPMENTAL SERVICES STATUTES.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective from passage*) (a) There shall be, within the
2 Health and Clinical Services Division of the Department of
3 Developmental Services, an Oral Health and Dental Services Unit. The
4 unit shall: (1) Support persons with intellectual disability by assisting
5 them with reaching and maintaining optimal oral health; (2) provide
6 such persons access to oral and dental health care; (3) educate such
7 persons, their families and support staff regarding oral disease
8 prevention and early detection; (4) disseminate oral health and dental
9 information to such persons, families and support staff; and (5)
10 participate in oral health-related research and education.

11 (b) The Oral Health and Dental Services Unit may provide dental care
12 services to persons with intellectual disability at designated dental

13 offices in any service region of the Department of Developmental
14 Services. Such services shall be specialized and individualized to meet
15 the needs of such persons. Dental services provided pursuant to this
16 subsection shall be provided under the scope of practice of a dentist
17 licensed pursuant to chapter 379 of the general statutes or dental
18 hygienist licensed pursuant to chapter 379a of the general statutes.

19 (c) The Commissioner of Developmental Services may contract with
20 a dentist licensed pursuant to chapter 379 of the general statutes or a
21 dentist granted a provisional license pursuant to the provisions of
22 section 20-120 of the general statutes, as amended by this act, for the
23 purpose of carrying out the duties of the Oral Health and Dental
24 Services Unit pursuant to the provisions of this section.

25 Sec. 2. Section 20-120 of the general statutes is repealed and the
26 following is substituted in lieu thereof (*Effective from passage*):

27 (a) Any graduate of a recognized dental college may practice
28 dentistry in a clinic for a period not exceeding six months, provided [he
29 shall obtain] such graduate obtains the written consent and approval of
30 the Dental Commission.

31 (b) A full-time faculty member of a school of dentistry in this state
32 who is licensed in another state or who has exceptional qualifications as
33 approved by the Dental Commission may be granted a provisional
34 license upon consent and approval of the Dental Commission which
35 provisional license shall be in effect during such time as the licensee is
36 in the full-time employment of a school of dentistry within the state.
37 Such provisional license shall limit the licensee to the practice of
38 dentistry (1) in the school of dentistry of which [he] such licensee is a
39 member of the faculty, [or] (2) in any hospital affiliated with such school,
40 or (3) as part of services offered by the Oral Health and Dental Services
41 Unit of the Department of Developmental Services, established
42 pursuant to section 1 of this act.

43 (c) Any graduate of a foreign dental school, who has exceptional
44 qualifications, as approved by the Dental Commission, may practice

45 dentistry in any state institution.

46 Sec. 3. Section 17a-249 of the 2024 supplement to the general statutes
47 is repealed and the following is substituted in lieu thereof (*Effective*
48 *October 1, 2024*):

49 (a) The Commissioner of Housing, in consultation with the
50 Commissioner of Developmental Services, shall provide grants-in-aid
51 or deferred loans to [private nonprofit organizations] an eligible
52 developer, as defined in section 8-39, that has partnered with a
53 Department of Developmental Services qualified provider or a provider
54 approved to provide services that support persons receiving services
55 under the Medicaid waiver program for autism spectrum disorder
56 services, operated through the Department of Social Services, for
57 supportive housing for persons with an intellectual disability or other
58 developmental disabilities, including, but not limited to, autism
59 spectrum disorder. The [commissioner] Commissioner of Housing shall
60 give priority in disbursement of grants to [a nonprofit organization
61 which] an eligible developer that reserves [fifty] not more than twenty-
62 five per cent [or more] of the initial residential capacity of a housing site
63 for individuals with such disabilities who are on a waiting list
64 maintained by the Department of Developmental Services or the
65 Department of Social Services for supportive housing or who wish to
66 move from a more structured setting to supportive housing.

67 (b) The Commissioner of [Developmental Services] Housing shall
68 expend not more than five million dollars on the [grant] program
69 established pursuant to this section in any one service region of the
70 Department of Developmental Services. The commissioner may expend
71 not more than two per cent of the funds allocated to the [grant] program
72 established by this section on administrative expenses directly related
73 to the [grant] program.

74 (c) The Commissioner of [Developmental Services] Housing shall
75 develop and publish guidelines for the award of grants and deferred
76 loans under subsection (a) of this section and a uniform application form

77 for such grants and deferred loans. The commissioner shall post such
78 guidelines and application form on the Internet web site of the
79 Department of [Developmental Services] Housing not later than [July 1,
80 2024] October 1, 2024.

81 (d) [Any] The recipient of a grant or deferred loan pursuant to
82 subsection (a) of this section shall report annually to the Commissioner
83 of [Developmental Services] Housing, on a form to be developed by the
84 commissioner, [how] on the expenditure of such grant funds [have been
85 expended] or deferred loans. The commissioner shall submit a report on
86 January 1, 2025, and annually thereafter, in accordance with the
87 provisions of section 11-4a, concerning the expenditure of grant funds
88 and deferred loans awarded pursuant to subsection (a) of this section to
89 the joint standing committees of the General Assembly having
90 cognizance of matters relating to housing, human services and public
91 health.

92 Sec. 4. Subsection (a) of section 5-247 of the general statutes is
93 repealed and the following is substituted in lieu thereof (*Effective from*
94 *passage*):

95 (a) Each appointing authority shall grant, on account of illness or
96 injury, to each full-time employee in a permanent position in the state
97 service who has furnished satisfactory proof of such illness or injury,
98 such sick leave with pay as has accrued to [his] such employee's credit
99 at the rate of one and one-quarter working days for each completed
100 calendar month of continuous full-time service which may be computed
101 on an hourly basis. Hourly computation of sick leave shall not diminish
102 benefit entitlement. On or before October 1, 1980, the Commissioner of
103 Administrative Services shall adopt regulations, in accordance with
104 chapter 54, concerning the accrual, prorating and granting of sick leave
105 with pay to other employees in the state service and extending sick leave
106 with pay or with part pay for longer periods to full-time permanent
107 employees disabled through illness or injury. A general worker
108 employed in a position by the Department of Developmental Services
109 as a self-advocate [, not to exceed eleven such general workers,] shall be

110 eligible for prorated sick leave, in accordance with regulations adopted
111 pursuant to this section. Each such employee who retires under the
112 provisions of chapter 66 shall be compensated, effective as of the date of
113 [his] the employee's retirement, at the rate of one-fourth of such
114 employee's salary for sick leave accrued to [his] the employee's credit as
115 of [his] the employee's last day on the active payroll up to a maximum
116 payment equivalent to sixty days' pay. Such payment for accumulated
117 sick leave shall not be included in computing retirement income and
118 shall be charged by the State Comptroller to the department, agency or
119 institution in which the employee worked.

120 Sec. 5. Subsection (e) of section 5-250 of the general statutes is
121 repealed and the following is substituted in lieu thereof (*Effective from*
122 *passage*):

123 (e) Notwithstanding the provisions of this section, a general worker
124 employed in a position by the Department of Developmental Services
125 as a self-advocate [, not to exceed eleven such general workers,] shall be
126 eligible for prorated vacation and personal leave.

127 Sec. 6. Subsection (a) of section 5-254 of the general statutes is
128 repealed and the following is substituted in lieu thereof (*Effective from*
129 *passage*):

130 (a) Each full-time permanent employee in the state service shall be
131 granted time off with pay for any legal holiday. A general worker
132 employed in a position by the Department of Developmental Services
133 as a self-advocate [, not to exceed eleven such general workers,] shall be
134 granted time off with pay for any legal holiday that falls on a day that
135 the general worker is regularly scheduled to work, [and] provided the
136 pay shall be for the number of hours the general worker would have
137 been scheduled to work. If a legal holiday falls on a Saturday,
138 [employees] each such full-time permanent employee and general
139 worker shall be granted equivalent time off on the Friday immediately
140 preceding such Saturday or given another day off in lieu thereof. The
141 Commissioner of Administrative Services may [issue] adopt

142 regulations, in accordance with the provisions of chapter 54, governing
143 the granting of holiday time to other employees in the state service.],
144 which regulations shall be approved by the Secretary of the Office of
145 Policy and Management.]

146 Sec. 7. Section 17a-210 of the general statutes is repealed and the
147 following is substituted in lieu thereof (*Effective July 1, 2024*):

148 (a) There shall be a Department of Developmental Services. The
149 Department of Developmental Services, with the advice of a Council on
150 Developmental Services, shall be responsible for the planning,
151 development and administration of complete, comprehensive and
152 integrated state-wide services for persons with intellectual disability
153 and persons medically diagnosed as having Prader-Willi syndrome. The
154 Department of Developmental Services shall be under the supervision
155 of a Commissioner of Developmental Services, who shall be appointed
156 by the Governor in accordance with the provisions of sections 4-5 to 4-
157 8, inclusive. The Council on Developmental Services may advise the
158 Governor on the appointment. The commissioner shall be a person who
159 has background, training, education or experience in administering
160 programs for the care, training, education, treatment and custody of
161 persons with intellectual disability. The commissioner shall be
162 responsible, with the advice of the council, for: (1) Planning and
163 developing complete, comprehensive and integrated state-wide
164 services for persons with intellectual disability; (2) the implementation
165 and [where] when appropriate the funding of such services; and (3) the
166 coordination of the efforts of the Department of Developmental Services
167 with those of other state departments and agencies, municipal
168 governments and private agencies concerned with and providing
169 services for persons with intellectual disability. The commissioner shall
170 be responsible for the administration and operation of the [state training
171 school] Southbury Training School, state developmental services
172 regions and all state-operated community-based residential facilities
173 established for the diagnosis, care and training of persons with
174 intellectual disability. The commissioner shall be responsible for
175 establishing standards, providing technical assistance and exercising

176 the requisite supervision of all state-supported residential, day and
177 program support services for persons with intellectual disability and
178 work activity programs operated pursuant to section 17a-226. The
179 commissioner shall stimulate research by public and private agencies,
180 institutions of higher education and hospitals, in the interest of the
181 elimination and amelioration of intellectual disability and care and
182 training of persons with intellectual disability. The commissioner shall
183 conduct or monitor investigations into allegations of abuse and neglect
184 and file reports as requested by state agencies having statutory
185 responsibility for the conduct and oversight of such investigations. The
186 commissioner shall receive and investigate complaints from persons
187 with intellectual disabilities and persons receiving services from the
188 Department of Social Services' Division of Autism Spectrum Disorder
189 Services, [or] legal representatives of such persons or [from] any other
190 interested person.

191 (b) In the event of the death of a person with intellectual disability for
192 whom the department has direct or oversight responsibility for medical
193 care, the commissioner shall ensure that a comprehensive and timely
194 review of the events, overall care, quality of life issues and medical care
195 preceding such death is conducted by the department and shall, as
196 requested, provide information and assistance to the Independent
197 Mortality Review Board established by Executive Order No. 57 of
198 Governor Dannel P. Malloy. The commissioner shall report to the board
199 and the board shall review any death: [(A)] (1) Involving an allegation
200 of abuse or neglect; [(B)] (2) for which the Office of the Chief Medical
201 Examiner or local medical examiner has accepted jurisdiction; [(C)] (3)
202 in which an autopsy was performed; [(D)] (4) which was sudden and
203 unexpected; or [(E)] (5) in which the commissioner's review raises
204 questions about the appropriateness of care. The department's mortality
205 review process and the Independent Mortality Review Board shall
206 operate in accordance with the peer review provisions established
207 under section 19a-17b for medical review teams and confidentiality of
208 records provisions established under section 19a-25 for the Department
209 of Public Health.

210 [(b)] (c) The commissioner shall be responsible for the development
211 of criteria as to the eligibility of any person with intellectual disability
212 for residential care in any public or state-supported private residential
213 facility and [, after considering the recommendation of a properly
214 designated diagnostic agency,] may assign such person to a public or
215 state-supported private residential facility. [The commissioner may
216 transfer such person from one such facility to another when necessary
217 and desirable for their welfare, provided such person and such person's
218 legal representative receive written notice of their right to object to such
219 transfer at least ten days prior to the proposed transfer of such person
220 from any such facility. Such prior notice shall not be required when
221 transfers are made between residential units within the training school
222 or a state developmental services region or when necessary to avoid a
223 serious and immediate threat to the life or physical or mental health of
224 such person or others residing in such facility. The notice required by
225 this subsection shall notify such person and such person's legal
226 representative of the person's right to object to such transfer, except in
227 the case of an emergency transfer as provided in this subsection, and
228 shall include the name, address and telephone number of the nonprofit
229 entity designated by the Governor in accordance with section 46a-10b to
230 serve as the Connecticut protection and advocacy system. In the event
231 of an emergency transfer, the notice required by this subsection shall
232 notify such person and such person's legal representative of the person's
233 right to request a hearing in accordance with subsection (c) of this
234 section and shall be given within ten days following the emergency
235 transfer. In the event of an objection to the proposed transfer, the
236 commissioner shall conduct a hearing in accordance with subsection (c)
237 of this section and the transfer shall be stayed pending final disposition
238 of the hearing, provided no such hearing shall be required if the
239 commissioner withdraws such proposed transfer.

240 (c) Any person with intellectual disability who is eighteen years of
241 age or older and who resides at any facility operated by the Department
242 of Developmental Services, or the legal representative of any person
243 with intellectual disability who resides at any such facility, may object

244 to any transfer of such person from one facility to another for any reason
245 other than a medical reason or an emergency, or may request such a
246 transfer. In the event of any such objection or request, the commissioner
247 shall conduct a hearing on such proposed transfer, provided no such
248 hearing shall be required if the commissioner withdraws such proposed
249 transfer. In any such transfer hearing, the proponent of a transfer shall
250 have the burden of showing, by clear and convincing evidence, that the
251 proposed transfer is in the best interest of the resident being considered
252 for transfer and that the facility and programs to which transfer is
253 proposed (1) are safe and effectively supervised and monitored, and (2)
254 provide a greater opportunity for personal development than the
255 resident's present setting. Such hearing shall be conducted in
256 accordance with the provisions of chapter 54.]

257 (d) Any person with intellectual disability, or the legal representative
258 of such person, may request a hearing for any final determination by the
259 department that denies such person eligibility for programs and
260 services of the department. A request for a hearing shall be made in
261 writing to the commissioner. Such hearing shall be conducted in
262 accordance with the provisions of chapter 54.

263 (e) Any person with intellectual disability, or the legal representative
264 of such person, may request a hearing to contest the category
265 assignment made by the department for persons seeking residential
266 placement, residential services or residential support. A request for
267 hearing shall be made, in writing, to the commissioner. Such hearing
268 shall be conducted in accordance with the provisions of chapter 54.

269 (f) Any person with intellectual disability or the legal representative
270 of such person, may object to (1) a proposed approval by the department
271 of a program for such person that includes the use of behavior-
272 modifying medications or aversive procedures, or (2) a proposed
273 determination of the department that community placement is
274 inappropriate for such person placed under the direction of the
275 commissioner. The department shall provide written notice of any such
276 proposed approval or determination to the person, or to the legal

277 representative of such person, [at least] not less than ten days prior to
278 making such approval or determination. In the event of an objection to
279 such proposed approval or determination, the commissioner shall
280 conduct a hearing in accordance with the provisions of chapter 54,
281 provided no such hearing shall be required if the commissioner
282 withdraws such proposed approval or determination.

283 Sec. 8. (NEW) (*Effective July 1, 2024*) (a) The Commissioner of
284 Developmental Services may transfer a person with intellectual
285 disability who receives residential care services from one public or state-
286 supported private residential facility to another when necessary and
287 desirable for such person's welfare, provided such person and such
288 person's legal representative receive written notice of their right to
289 object to such transfer not less than ten days prior to the proposed
290 transfer of such person from any such residential facility. Such prior
291 notice shall not be required when transfers are made between
292 residential units within the Southbury Training School or a regional
293 center. The notice required by this subsection shall provide such person
294 and such person's legal representative with information regarding the
295 person's right to object to such transfer, except in the case of an
296 emergency transfer or a transfer for a medical reason as provided in this
297 subsection, and shall include the name, address and telephone number
298 of the nonprofit entity designated by the Governor in accordance with
299 section 46a-10b of the general statutes to serve as the Connecticut
300 protection and advocacy system. In the event of an objection to the
301 proposed transfer, the commissioner shall conduct a hearing in
302 accordance with subsection (b) of this section and the transfer shall be
303 stayed pending final disposition of the hearing, provided no such
304 hearing shall be required if the commissioner withdraws such proposed
305 transfer. In the event of an emergency transfer or a transfer for a medical
306 reason, notification to such person or such person's legal representative
307 shall be given not later than ten days following the emergency transfer
308 or the transfer for a medical reason. Such notification shall include
309 information regarding the person's right to request a hearing in
310 accordance with subsection (b) of this section.

311 (b) Any person with intellectual disability who is eighteen years of
312 age or older and who resides at any residential facility operated by the
313 Department of Developmental Services, or the legal representative of
314 any person with intellectual disability who resides at any such
315 residential facility, may object to any proposed transfer, emergency
316 transfer or transfer for a medical reason of such person from one
317 residential facility to another for any reason or may request such a
318 transfer. In the event of any such objection or request, the commissioner
319 shall conduct a hearing on such transfer, provided no such hearing shall
320 be required if the commissioner withdraws such transfer proposal. In
321 any such transfer hearing, the proponent of a transfer shall have the
322 burden of showing, by clear and convincing evidence, that the transfer
323 is in the best interest of the resident who is being considered for transfer
324 or has been transferred and that the residential facility and programs to
325 which transfer is proposed or has been made (1) are safe and effectively
326 supervised and monitored, and (2) provide a greater opportunity for
327 personal development than the setting in which the resident presently
328 resides. Such hearing shall be conducted in accordance with the
329 provisions of chapter 54 of the general statutes.

330 (c) The commissioner may temporarily transfer any person residing
331 in a Department of Developmental Services public or state-supported
332 private residential facility if the commissioner determines there is an
333 emergency that exists in the residential facility that must be remedied
334 immediately, including, but not limited to, the residential facility is
335 rendered uninhabitable due to a natural disaster or utility malfunction
336 or the existence of temporary concerns relating to the residential
337 facility's staff's ability to meet the needs of the individual residing there.
338 The temporary transfer shall remain in place for a period of not more
339 than ninety days or until rescinded by the commissioner, whichever is
340 earlier. The commissioner shall provide any person who is being
341 temporarily transferred and such person's legal representative, if any,
342 with written notice of the temporary transfer as soon as practicable, but
343 not more than ten days after the date of the temporary transfer. A
344 person's right to object to a temporary transfer and right to request a

345 hearing pursuant to subsection (b) of this section shall be stayed until
346 the thirtieth day of the temporary transfer. If a hearing is requested, such
347 hearing shall be conducted in accordance with subsection (b) of this
348 section.

349 (d) During a public health emergency declared pursuant to section
350 19a-131a of the general statutes, the commissioner may request the
351 Governor to issue an executive order to allow the commissioner to
352 temporarily transfer any person residing in a Department of
353 Developmental Services public or state-supported private residential
354 facility to protect that person's health or safety. If the Governor issues
355 such executive order, the commissioner may make temporary transfers
356 as deemed necessary. The temporary transfer shall remain in place until
357 rescinded by the commissioner or until the expiration of the executive
358 order, whichever is earlier. The commissioner shall provide any person
359 who is being temporarily transferred and that person's legal
360 representative, if any, with written notice of the temporary transfer as
361 soon as practicable, but not more than ten days after the date of the
362 temporary transfer. A person's right to object to a temporary transfer
363 and right to request a hearing pursuant to subsection (b) of this section
364 shall be stayed until the thirtieth day of the temporary transfer. If a
365 hearing is requested, such hearing shall be conducted in accordance
366 with subsection (b) of this section.

367 Sec. 9. (NEW) (*Effective from passage*) (a) As used in this section and
368 sections 17a-210 of the general statutes, as amended by this act, and 17a-
369 238 of the general statutes, as amended by this act, (1) "human rights
370 committee" means a committee established pursuant to subsection (b)
371 of this section, (2) "department" means the Department of
372 Developmental Services, (3) "commissioner" means the Commissioner
373 of Developmental Services, (4) "regional director" means the person
374 appointed by the commissioner to be directly responsible for the
375 management of a service region of the department, and (5) "training
376 school director" means the person appointed by the commissioner to be
377 directly responsible for the management of the Southbury Training
378 School.

379 (b) There shall be, within each service region of the department and
380 at the Southbury Training School, a human rights committee, with
381 members appointed by the regional or training school director. The
382 commissioner shall establish uniform responsibilities and procedures
383 for each human rights committee in the state. Each human rights
384 committee shall (1) advise and make recommendations to the regional
385 and training school directors and the Commissioner of Developmental
386 Services on best practices, and (2) address concerns and complaints on
387 human rights issues involving persons receiving services from the
388 department, including, but not limited to, those involving: (A) Aversive
389 procedures, (B) restrictive interventions, (C) intrusive programs or
390 devices, (D) restitution, and (E) premeditation medication.

391 (c) The commissioner may adopt regulations, in accordance with the
392 provisions of chapter 54 of the general statutes, to implement the
393 provisions of this section.

394 Sec. 10. (NEW) (*Effective from passage*) (a) As used in this section and
395 sections 17a-210 of the general statutes, as amended by this act, and 17a-
396 238 of the general statutes, as amended by this act, (1) "program review
397 committee" means a committee established pursuant to subsection (b)
398 of this section, (2) "department" means the Department of
399 Developmental Services, (3) "commissioner" means the Commissioner
400 of Developmental Services, (4) "regional director" means the person
401 appointed by the commissioner to be directly responsible for the
402 management of a service region of the department, and (5) "training
403 school director" means the person appointed by the commissioner to be
404 directly responsible for the management of the Southbury Training
405 School.

406 (b) There shall be, within each service region of the department and
407 at the Southbury Training School, a program review committee, with
408 members appointed by the regional or training school director. The
409 commissioner shall establish uniform responsibilities and procedures
410 for each program review committee in the state. Each program review
411 committee shall advise the regional and training school directors and

412 the Commissioner of Developmental Services on best practices for
413 reviewing plans that include, but need not be limited to, behavior
414 support strategies, use of psychotropic and behavior modifying
415 medications and the use of restraints for each person who receives
416 services from the department.

417 (c) The commissioner may adopt regulations, in accordance with the
418 provisions of chapter 54 of the general statutes, to implement the
419 provisions of this section.

420 Sec. 11. Subsection (b) of section 17a-238 of the general statutes is
421 repealed and the following is substituted in lieu thereof (*Effective from*
422 *passage*):

423 (b) Each person placed or treated under the direction of the
424 Commissioner of Developmental Services in any public or private
425 facility shall be protected from harm and receive humane and dignified
426 treatment which is adequate for such person's needs and for the
427 development of such person's full potential at all times, with full respect
428 for such person's personal dignity and right to privacy consistent with
429 such person's treatment plan as determined by the commissioner. No
430 treatment plan or course of treatment for any person placed or treated
431 under the direction of the commissioner shall include the use of an
432 aversive device which has not been tested for safety and efficacy and
433 approved by the federal Food and Drug Administration, except [for]
434 any treatment plan or course of treatment including the use of such
435 devices [which] that was initiated prior to October 1, 1993. No treatment
436 plan or course of treatment prescribed for any person placed or treated
437 under the direction of the commissioner shall include the use of aversive
438 procedures except in accordance with recommendations from a regional
439 human rights committee and any procedures established by the
440 Commissioner of Developmental Services. For purposes of this
441 subsection, "aversive procedure" means the contingent use of an event
442 which may be unpleasant, noxious or otherwise cause discomfort to
443 alter the occurrence of a specific behavior or to protect an individual
444 from injuring himself or herself or others and may include the use of

445 physical isolation and mechanical and physical restraint. Nothing in this
446 subsection shall prohibit persons who are not placed or treated under
447 the direction of the Commissioner of Developmental Services from
448 independently pursuing and obtaining any treatment plan or course of
449 treatment as may otherwise be authorized by law. The commissioner
450 shall adopt regulations, in accordance with chapter 54, to carry out the
451 provisions of this subsection.

452 Sec. 12. Subsection (c) of section 17a-247b of the general statutes is
453 repealed and the following is substituted in lieu thereof (*Effective from*
454 *passage*):

455 (c) The department shall make information in the registry available
456 only to: (1) Authorized agencies, for the purpose of protective service
457 determinations; (2) employers who employ employees to provide
458 services to an individual who receives services or funding from the
459 department; (3) the Departments of Children and Families, Mental
460 Health and Addiction Services, Social Services and Administrative
461 Services and the Office of Labor Relations, for the purpose of
462 determining whether an applicant for employment with the
463 Departments of Children and Families, Developmental Services, Mental
464 Health and Addiction Services and Social Services appears on the
465 registry; or (4) charitable organizations that recruit volunteers to
466 support programs for persons with intellectual disability or autism
467 spectrum disorder, upon application to and approval by the
468 commissioner, for purposes of conducting background checks on such
469 volunteers.

470 Sec. 13. Section 17a-210a of the 2024 supplement to the general
471 statutes is repealed and the following is substituted in lieu thereof
472 (*Effective from passage*):

473 (a) There is established an independent [ombudsperson office] Office
474 of the Developmental Services Ombudsperson within the Department
475 of Developmental Services that is responsible for receiving and making
476 recommendations to the commissioner for resolving complaints

477 affecting individuals under the care or supervision of the department or
478 of any public or private agency with which the department has
479 contracted for the provision of services.

480 (b) The director of the [ombudsperson office] Office of the
481 Developmental Services Ombudsperson shall be appointed by the
482 Governor, with the approval of the General Assembly. Said director
483 shall be an elector of the state with expertise and experience in the fields
484 of developmental services and advocacy for the rights of the individuals
485 specified in subsection (a) of this section and shall be exempt from the
486 classified service.

487 (c) The Governor shall appoint the director of the [ombudsperson
488 office] Office of the Developmental Services Ombudsperson from a list
489 of candidates prepared and submitted to the Governor by the Council
490 on Developmental Services, established by section 17a-270. The
491 Governor shall notify the council of the pending expiration of the term
492 of an incumbent ombudsperson not less than ninety days prior to the
493 final day of the ombudsperson's term in office. If a vacancy occurs in the
494 position of ombudsperson, the Governor shall notify the council
495 immediately of the vacancy. The council shall meet to consider qualified
496 candidates for the position of ombudsperson and shall submit a list of
497 not more than five candidates to the Governor ranked in order of
498 preference, not more than sixty days after receiving notice from the
499 Governor of the pending expiration of the ombudsperson's term or the
500 occurrence of a vacancy. The Governor shall designate, not more than
501 sixty days after receipt of the list of candidates from the council, one
502 candidate from the list for the position of ombudsperson. If, after the list
503 is submitted to the Governor by the council, any candidate withdraws
504 from consideration, the Governor shall designate a candidate from those
505 remaining on the list. If the Governor fails to designate a candidate
506 within sixty days of receipt of the list from the council, the council shall
507 refer the candidate with the highest ranking on the list to the General
508 Assembly for confirmation. If the General Assembly is not in session at
509 the time of the Governor's or council's designation of a candidate, the
510 candidate shall serve as the acting ombudsperson until the General

511 Assembly meets and confirms the candidate as ombudsperson. A
512 candidate serving as acting ombudsperson shall be entitled to
513 compensation and have all the powers, duties and privileges of the
514 ombudsperson. An ombudsperson shall serve a term of four years, not
515 including any time served as acting ombudsperson, and may be
516 reappointed by the Governor or shall remain in the position until a
517 successor is appointed pursuant to this subsection. Although an
518 incumbent ombudsperson may be reappointed, the Governor shall also
519 consider additional candidates from a list submitted by the council as
520 provided in this section.

521 (d) The director of the [ombudsperson office] Office of the
522 Developmental Services Ombudsperson shall report monthly to the
523 Council on Developmental Services and, in accordance with the
524 provisions of section 11-4a, annually to the joint standing committee of
525 the General Assembly having cognizance of matters relating to public
526 health.

527 Sec. 14. Section 17b-352 of the general statutes is repealed and the
528 following is substituted in lieu thereof (*Effective from passage*):

529 (a) For the purposes of this section and section 17b-353, "facility"
530 means a residential facility for persons with intellectual disability
531 licensed pursuant to section 17a-277 and certified to participate in the
532 Title XIX Medicaid program as an intermediate care facility for
533 individuals with intellectual disabilities, a nursing home, rest home or
534 residential care home, as defined in section 19a-490. "Facility" does not
535 include a nursing home that does not participate in the Medicaid
536 program and is associated with a continuing care facility as described in
537 section 17b-520.

538 (b) Any facility which intends to (1) transfer all or part of its
539 ownership or control prior to being initially licensed; (2) introduce any
540 additional function or service into its program of care or expand an
541 existing function or service; (3) terminate a service or decrease
542 substantially its total licensed bed capacity; or (4) relocate all or a portion

543 of such facility's licensed beds, to a new facility or replacement facility,
544 shall submit a complete request for permission to implement such
545 transfer, addition, expansion, increase, termination, decrease or
546 relocation of facility beds to the Department of Social Services with such
547 information as the department requires, provided no permission or
548 request for permission to close a facility is required when a facility in
549 receivership is closed by order of the Superior Court pursuant to section
550 19a-545. The Commissioner of Social Services shall consider the criteria
551 in subdivisions (3) and (4) of subsection (a) of section 17b-354 when
552 evaluating a certificate of need request to relocate licensed nursing
553 facility beds from an existing facility to another licensed nursing facility
554 or to a new facility or replacement facility. The Office of the Long-Term
555 Care Ombudsman, [pursuant to section 17a-870] or, in the case of a
556 residential facility for persons with intellectual disability licensed
557 pursuant to section 17a-277, as described in subsection (a) of this section,
558 the Office of the Developmental Services Ombudsperson shall be
559 notified by the facility of any proposed actions pursuant to this
560 subsection at the same time the request for permission is submitted to
561 the department and when a facility in receivership is closed by order of
562 the Superior Court pursuant to section 19a-545.

563 (c) A facility may submit a petition for closure to the Department of
564 Social Services. The Department of Social Services may authorize the
565 closure of a facility if the facility's management demonstrates to the
566 satisfaction of the Commissioner of Social Services in the petition for
567 closure that the facility (1) is not viable based on actual and projected
568 operating losses; (2) has an occupancy rate of less than seventy per cent
569 of the facility's licensed bed capacity; (3) closure is consistent with the
570 strategic rebalancing plan developed in accordance with section 17b-
571 369, including bed need by geographical region; (4) is in compliance
572 with the requirements of Sections 1128I(h) and 1819(h)(4) of the Social
573 Security Act and 42 CFR 483.75; and (5) is not providing special services
574 that would go unmet if the facility closes. The department shall review
575 a petition for closure to the extent it deems necessary and the facility
576 shall submit information the department requests or deems necessary

577 to substantiate that the facility closure is consistent with the provisions
578 of this subsection. The facility shall submit information the department
579 requests or deems necessary to allow the department to provide
580 oversight during this process. The Office of the Long-Term Care
581 Ombudsman, or, in the case of a residential facility for persons with
582 intellectual disability licensed pursuant to section 17a-277, as described
583 in subsection (a) of this section, the Office of the Developmental Services
584 Ombudsperson shall be notified by the facility at the same time as a
585 petition for closure is submitted to the department. Any facility acting
586 pursuant to this subsection shall provide written notice, on the same
587 date that the facility submits its petition for closure, to all patients,
588 guardians or conservators, if any, or legally liable relatives or other
589 responsible parties, if known, and shall post such notice in a
590 conspicuous location at the facility. The facility's written notice shall be
591 accompanied by an informational letter issued jointly from the Office of
592 the Long-Term Care Ombudsman and the Department of
593 [Rehabilitation Services] Aging and Disability Services, or, in the case of
594 a residential facility for persons with intellectual disability licensed
595 pursuant to section 17a-277, as described in subsection (a) of this section,
596 the Office of the Developmental Services Ombudsperson and the
597 Department of Aging and Disability Services on patients' rights and
598 services available as they relate to the petition for closure. The
599 informational letter shall also state the date and time that the Office of
600 the Long-Term Care Ombudsman and the Department of Public Health,
601 or, in the case of a residential facility for persons with intellectual
602 disability licensed pursuant to section 17a-277, as described in
603 subsection (a) of this section, the Office of the Developmental Services
604 Ombudsperson and the Department of Public Health will hold an
605 informational session at the facility for patients, guardians or
606 conservators, if any, and legally liable relatives or other responsible
607 parties, if known, about their rights and the process concerning a
608 petition for closure. The notice shall state: (A) The date the facility
609 submitted the petition for closure, (B) that only the Department of Social
610 Services has the authority to either grant or deny the petition for closure,
611 (C) that the Department of Social Services has up to thirty days to grant

612 or deny the petition for closure, (D) a brief description of the reason or
613 reasons for submitting the petition for closure, (E) that no patient shall
614 be involuntarily transferred or discharged within or from a facility
615 pursuant to state and federal law because of the filing of a petition for
616 closure, (F) that all patients have a right to appeal any proposed transfer
617 or discharge, and (G) the name, mailing address and telephone number
618 of the Office of the Long-Term Care Ombudsman and local legal aid
619 office, or, in the case of a residential facility for persons with intellectual
620 disability licensed pursuant to section 17a-277, as described in
621 subsection (a) of this section, the Office of the Developmental Services
622 Ombudsperson and local legal aid office. The commissioner shall grant
623 or deny a petition for closure within thirty days of receiving such
624 request.

625 (d) An applicant, prior to submitting a certificate of need application,
626 shall request, in writing, application forms and instructions from the
627 department. The request shall include: (1) The name of the applicant or
628 applicants; (2) a statement indicating whether the application is for (A)
629 a new, additional, expanded or replacement facility, service or function
630 or relocation of facility beds, (B) a termination or reduction in a
631 presently authorized service or bed capacity, or (C) any new, additional
632 or terminated beds and their type; (3) the estimated capital cost; (4) the
633 town where the project is or will be located; and (5) a brief description
634 of the proposed project. Such request shall be deemed a letter of intent.
635 No certificate of need application shall be considered submitted to the
636 department unless a current letter of intent, specific to the proposal and
637 in accordance with the provisions of this subsection, has been on file
638 with the department for not less than ten business days. For purposes of
639 this subsection, "a current letter of intent" means a letter of intent on file
640 with the department for not more than one hundred eighty days. A
641 certificate of need application shall be deemed withdrawn by the
642 department, if a department completeness letter is not responded to
643 within one hundred eighty days. The Office of the Long-Term Care
644 Ombudsman, or, in the case of a residential facility for persons with
645 intellectual disability licensed pursuant to section 17a-277, as described

646 in subsection (a) of this section, the Office of the Developmental Services
647 Ombudsperson shall be notified by the facility at the same time as the
648 letter of intent is submitted to the department.

649 (e) Any facility acting pursuant to subdivision (3) of subsection (b) of
650 this section shall provide written notice, at the same time it submits its
651 letter of intent, to all patients, guardians or conservators, if any, or
652 legally liable relatives or other responsible parties, if known, and shall
653 post such notice in a conspicuous location at the facility. The facility's
654 written notice shall be accompanied by an informational letter issued
655 jointly from the Office of the Long-Term Care Ombudsman and the
656 Department of Aging and Disability Services, or, in the case of a
657 residential facility for persons with intellectual disability licensed
658 pursuant to section 17a-277, as described in subsection (a) of this section,
659 the Office of the Developmental Services Ombudsperson and the
660 Department of Aging and Disability Services on patients' rights and
661 services available as they relate to the letter of intent. The notice shall
662 state the following: (1) The projected date the facility will be submitting
663 its certificate of need application, (2) that only the Department of Social
664 Services has the authority to either grant, modify or deny the
665 application, (3) that the Department of Social Services has up to ninety
666 days to grant, modify or deny the certificate of need application, (4) a
667 brief description of the reason or reasons for submitting a request for
668 permission, (5) that no patient shall be involuntarily transferred or
669 discharged within or from a facility pursuant to state and federal law
670 because of the filing of the certificate of need application, (6) that all
671 patients have a right to appeal any proposed transfer or discharge, and
672 (7) the name, mailing address and telephone number of the Office of the
673 Long-Term Care Ombudsman and local legal aid office, or, in the case
674 of a residential facility for persons with intellectual disability licensed
675 pursuant to section 17a-277, as described in subsection (a) of this section,
676 the Office of the Developmental Services Ombudsperson and local legal
677 aid office.

678 (f) The Department of Social Services shall review a request made
679 pursuant to subsection (b) of this section to the extent it deems

680 necessary, including, but not limited to, in the case of a proposed
681 transfer of ownership or control prior to initial licensure, the financial
682 responsibility and business interests of the transferee and the ability of
683 the facility to continue to provide needed services, or in the case of the
684 addition or expansion of a function or service, ascertaining the
685 availability of the function or service at other facilities within the area to
686 be served, the need for the service or function within the area and any
687 other factors the department deems relevant to a determination of
688 whether the facility is justified in adding or expanding the function or
689 service. During the review, the department may hold an informal
690 conference with the facility to discuss the certificate of need application.
691 The Commissioner of Social Services shall grant, modify or deny the
692 request within ninety days of receipt thereof, except as otherwise
693 provided in this section. The commissioner may place conditions, as the
694 commissioner deems necessary to address specified concerns, on any
695 decision approving or modifying a request for a certificate of need filed
696 pursuant to this section. Conditions may include, but are not limited to,
697 project and Medicaid reimbursement details and applicant
698 requirements for summary and audit purposes. If the commissioner
699 modifies the request, the commissioner shall notify the facility of such
700 modification prior to issuing the decision and provide the applicant
701 with an opportunity for an informal conference to discuss the
702 modifications. Upon the request of the applicant, the review period may
703 be extended for an additional fifteen days if the department has
704 requested additional information subsequent to the commencement of
705 the commissioner's review period. The director of the office of certificate
706 of need and rate setting may extend the review period for a maximum
707 of thirty days if the applicant has not filed in a timely manner
708 information deemed necessary by the department. The applicant may
709 request and shall receive a hearing in accordance with section 4-177 if
710 aggrieved by a decision of the commissioner.

711 (g) The Commissioner of Social Services shall not approve any
712 requests for beds in residential facilities for persons with intellectual
713 disability which are licensed pursuant to section 17a-227, as amended

714 by this act, and are certified to participate in the Title XIX Medicaid
715 Program as intermediate care facilities for individuals with intellectual
716 disabilities, except those beds necessary to implement the residential
717 placement goals of the Department of Developmental Services which
718 are within available appropriations.

719 (h) The Commissioner of Social Services shall adopt regulations, in
720 accordance with chapter 54, to implement the provisions of this section.

721 Sec. 15. Subsection (l) of section 17a-274 of the general statutes is
722 repealed and the following is substituted in lieu thereof (*Effective from*
723 *passage*):

724 (l) In the event that any person placed under the provisions of this
725 section is recommended for transfer by the Department of
726 Developmental Services, the department shall proceed as required by
727 subsection [(c)] (b) of section [17a-210] 8 of this act and shall in addition
728 notify the Probate Court which made the placement.

729 Sec. 16. Section 17a-227 of the general statutes is repealed and the
730 following is substituted in lieu thereof (*Effective from passage*):

731 (a) No person, firm or corporation shall operate within this state a
732 community living arrangement or community companion home
733 [which] that it owns, leases or rents for the lodging, care or treatment of
734 persons with intellectual disability, Prader-Willi syndrome or autism
735 spectrum disorder unless such person, firm or corporation, upon
736 written application, has obtained a license issued by the Department of
737 Developmental Services. An application for licensure under this section
738 shall be verified by oath, but need not be notarized.

739 (b) The [commissioner] Commissioner of Developmental Services
740 shall adopt regulations, in accordance with the provisions of chapter 54,
741 to ensure the comfort, safety, adequate medical care and treatment of
742 such persons at the residential facilities described in subsection (a) of
743 this section. Such regulations shall include requirements that: (1) All
744 residential facility staff be certified in cardiopulmonary resuscitation in

745 a manner and time frame prescribed by the commissioner; (2) records of
746 staffing schedules and actual staff hours worked, by residential facility,
747 be available for inspection by the department upon advance notice; (3)
748 each residential facility develop and implement emergency plans and
749 staff training to address emergencies that may pose a threat to the health
750 and safety of the residents of the facility; (4) department staff verify
751 during quality service reviews and licensing inspections, that (A) staff
752 is adequately trained to respond in an emergency, and (B) a summary
753 of information on each resident is available to emergency medical
754 personnel for use in an emergency; (5) all residential facilities serving
755 persons with Down syndrome fifty years of age or older have at least
756 one staff member trained in Alzheimer's disease and dementia
757 symptoms and care; and (6) for community living arrangements, the
758 commissioner shall determine a minimum number of licensure-related
759 visits that are unannounced.

760 (c) After receiving an application and making such investigation as is
761 deemed necessary and after finding the specified requirements to have
762 been fulfilled, the department shall grant a license to such applicant to
763 operate a facility of the character described in such application, which
764 license shall specify the name of the person to have charge and the
765 location of each facility operated under the license. Any person, firm or
766 corporation aggrieved by any requirement of the regulations or by the
767 refusal to grant any license may request an administrative hearing in
768 accordance with the provisions of chapter 54. If the licensee of any such
769 facility desires to place in charge thereof a person other than the one
770 specified in the license, application shall be made to the Department of
771 Developmental Services, in the same manner as provided for the
772 original application, for permission to make such change. Such
773 application shall be acted upon not later than ten calendar days [from]
774 after the date of the filing of the application. Each such license shall be
775 renewed annually upon such terms as may be established by regulations
776 and may be revoked by the department upon proof that the facility for
777 which such license was issued is being improperly operated, or for the
778 violation of any of the provisions of this section or of the regulations

779 adopted pursuant to this section, provided the licensee shall first be
780 given a reasonable opportunity to be heard in reference to such
781 proposed revocation. Any person, firm or corporation aggrieved by
782 such revocation may request an administrative hearing in accordance
783 with the provisions of chapter 54. Each person, firm or corporation,
784 upon filing an application under the provisions of this section for a
785 license for a community living arrangement, shall pay to the State
786 Treasurer the sum of fifty dollars unless such fee is waived by the
787 commissioner.

788 (d) The Department of Developmental Services may contract, within
789 available appropriations, with any qualified provider for the operation
790 of a community-based residential facility, provided the qualified
791 provider is licensed by the department to operate such facilities. The
792 department shall include in all contracts with such licensed qualified
793 providers, provisions requiring the department to (1) conduct periodic
794 reviews of contract performance, and (2) take progressive enforcement
795 actions if the department finds poor performance or noncompliance
796 with the contract, as follows: (A) The licensed qualified provider may be
797 placed on a strict schedule of monitoring and oversight by the
798 department; (B) the licensed qualified provider may be placed on a
799 partial-year contract; and (C) payments due under the contract may be
800 reduced by specific amounts on a monthly basis until the licensed
801 qualified provider complies with the contract. If compliance cannot be
802 achieved, the department shall terminate the contract.

803 (e) The department may contract with any person, firm or
804 corporation to provide residential support services for persons with
805 intellectual disability, Prader-Willi syndrome or autism spectrum
806 disorder who reside in settings [which] that are not licensed by the
807 department. The commissioner shall adopt regulations, in accordance
808 with the provisions of chapter 54, to ensure the safety, adequate
809 supervision and support of persons receiving such residential support
810 services.

811 (f) Any person, firm or corporation who operates any facility contrary

812 to the provisions of this section shall be fined not more than one
 813 thousand dollars or imprisoned not more than six months or both. Any
 814 person, firm or corporation who operates any facility contrary to the
 815 regulations adopted pursuant to subsection (b) of this section shall be
 816 fined not more than one thousand dollars.

817 (g) If the commissioner determines, after investigation of a report
 818 received pursuant to the provisions of section 46a-11b, that a person,
 819 firm or corporation licensed to operate a community living arrangement
 820 or community companion home committed abuse or neglect against a
 821 person receiving support or services from the department during a
 822 licensure period, and such determination resulted in the revocation or
 823 surrender of such person, firm or corporation's license, the
 824 commissioner may disclose (1) the name of such person, firm or
 825 corporation, (2) the date of such revocation or surrender, and (3) the
 826 type of abuse or neglect committed to (A) authorized agencies, as
 827 defined in section 17a-247a, for the purpose of protective service
 828 determinations, (B) employers whose employees provide services to
 829 persons who receive support or services from the department, and (C)
 830 the Departments of Children and Families, Mental Health and
 831 Addiction Services, Social Services and Administrative Services for the
 832 purpose of making a determination on an application for (i)
 833 employment with, or (ii) licensure or certification as a provider for the
 834 Departments of Children and Families, Mental Health and Addiction
 835 Services, Social Services and Developmental Services.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>from passage</i>	New section
Sec. 2	<i>from passage</i>	20-120
Sec. 3	<i>October 1, 2024</i>	17a-249
Sec. 4	<i>from passage</i>	5-247(a)
Sec. 5	<i>from passage</i>	5-250(e)
Sec. 6	<i>from passage</i>	5-254(a)
Sec. 7	<i>July 1, 2024</i>	17a-210
Sec. 8	<i>July 1, 2024</i>	New section

Sec. 9	<i>from passage</i>	New section
Sec. 10	<i>from passage</i>	New section
Sec. 11	<i>from passage</i>	17a-238(b)
Sec. 12	<i>from passage</i>	17a-247b(c)
Sec. 13	<i>from passage</i>	17a-210a
Sec. 14	<i>from passage</i>	17b-352
Sec. 15	<i>from passage</i>	17a-274(l)
Sec. 16	<i>from passage</i>	17a-227

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact: See Below

Municipal Impact: See Below

Explanation

The bill expands the eligibility of grants and deferred loans that support the development of housing for people with certain disabilities to include municipal developers. This results in a potential revenue gain to municipalities beginning in FY 25 to the extent that municipalities are awarded this grant.

The bill also makes several changes to the supportive housing assistance program that could result in increased or more rapid use of funds authorized for the program, including transferring administrative authority for the program from the Department of Developmental Services to the Department of Housing. The program is funded through General Obligation (GO) bond funds. Future General Fund debt service costs may be incurred sooner under the bill to the degree that it causes authorized GO bond funds to be expended or to be expended more rapidly than they otherwise would have been. As of March 1, 2024, the unallocated bond balance available under the relevant authorization is \$15 million. The bill does not change GO bond authorizations relevant to the program.

House "A" allows the Department of Developmental Services (DDS) to share information regarding the license revocation of certain operators of community living arrangements and companion homes, has no fiscal impact.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to the terms of any bonds issued.

OLR Bill Analysis**sHB 5293 (as amended by House "A")******AN ACT CONCERNING THE DEPARTMENT OF DEVELOPMENTAL SERVICES' RECOMMENDATIONS REGARDING VARIOUS REVISIONS TO DEVELOPMENTAL SERVICES STATUTES.*****SUMMARY**

This bill makes various changes to Department of Developmental Services (DDS)-related statutes. Principally, it:

1. codifies existing practice by establishing an Oral Health and Dental Services Unit within DDS's Health and Clinical Services Division, and allows DDS to contract with dentists or provisionally licensed dentists for this purpose;
2. revises a recently enacted grant program for providers of supportive housing for people with developmental disabilities, such as by (a) shifting primary responsibility for the program from DDS to the Department of Housing (DOH) and (b) expanding the types of entities eligible for program grants;
3. removes the statutory cap of 11 DDS self-advocate coordinators;
4. updates and revises the law on transfers from DDS-operated or -funded residential facilities, such as by authorizing DDS to temporarily transfer residents for up to 90 days during certain emergency situations;
5. codifies existing practice by establishing in law a human rights committee and program review committee within each DDS service region and the Southbury Training School;
6. makes information in DDS's abuse and neglect registry available

- to the Office of Labor Relations to determine whether an applicant for employment with DDS or certain other state agencies appears on the registry;
7. specifically names the DDS ombudsperson office in law as the “Office of the Developmental Services Ombudsperson”;
 8. updates notice requirements related to intermediate care facilities for individuals with intellectual disability (ICF/IIDs) related to the certificate of need (CON) process, such as by requiring facility closure notices to go to the Office of the Developmental Services Ombudsperson rather than the Office of the Long-Term Care Ombudsman, and requiring the ombudsperson’s office to hold informational sessions related to these closures (the bill does not change the underlying CON requirements); and
 9. allows DDS to share information with certain entities if a DDS-licensed community living arrangement (i.e., group home) or community companion home’s license was revoked or surrendered because of substantiated abuse or neglect during the licensure period.

The bill also makes minor, technical, and conforming changes.

*House Amendment “A” adds the provisions on DDS sharing information on group home or community companion home licensing actions due to substantiated abuse or neglect.

EFFECTIVE DATE: Upon passage, except the provisions on residential transfers take effect July 1, 2024, and those on the supportive housing grant program take effect October 1, 2024.

§§ 1 & 2 — ORAL HEALTH AND DENTAL SERVICES UNIT

The bill codifies existing practice by establishing an Oral Health and Dental Services Unit within DDS’s Health and Clinical Services Division. Under the bill, the unit must:

1. support people with intellectual disability by helping them reach and maintain their optimal oral health;
2. provide them access to oral and dental health care;
3. educate them, their families, and support staff on oral disease prevention and early detection, and give them oral health and dental information; and
4. participate in oral health-related research and education.

The bill allows the Oral Health and Dental Services Unit to provide dental care services to people with intellectual disability at designated dental offices in any DDS service region. These services must be (1) specialized and individualized to meet their needs and (2) provided under the scope of practice of a dentist or dental hygienist.

Under the bill, the DDS commissioner may contract with (1) licensed dentists or (2) dentists with provisional licenses (see below) to carry out the unit's duties.

Provisional Licenses (§ 2)

Existing law allows for provisional licensure for an in-state dental school's full time faculty member who is not licensed in Connecticut but who is licensed in another state or has exceptional qualifications, upon approval by the state Dental Commission. Under current law, the provisional license allows dental practice only at the dentistry school where the person is a faculty member or affiliated hospitals. The bill additionally allows dental practice under this provisional license in DDS's Oral Health and Dental Services Unit.

§ 3 — SUPPORTIVE HOUSING ASSISTANCE PROGRAM

PA 23-137, § 53, requires the DDS commissioner to give grants to private nonprofits for supportive housing for people with an intellectual disability or other developmental disabilities, including autism spectrum disorder (ASD).

This bill makes several changes to this program. It transfers to the DOH commissioner the responsibility to provide assistance under the

program in consultation with the DDS commissioner and makes related conforming changes. For example, it requires (1) the DOH commissioner, rather than the DDS commissioner, to develop program guidelines and an application form, and extends from July 1, 2024, to October 1, 2024, the deadline for these materials to be posted online; (2) recipients of program assistance to annually report to DOH rather than DDS; and (3) DOH, rather than DDS, to annually report to specified legislative committees on the program.

The bill expands the allowable assistance under the program to include deferred loans. It targets the assistance to eligible developers (e.g., nonprofit corporations, housing construction businesses meeting certain requirements, or municipal developers), rather than just nonprofit organizations, for this supportive housing. It adds the condition that the developer have partnered with a DDS-qualified provider or a provider approved to provide services supporting people receiving services under the Department of Social Services's (DSS) ASD Medicaid waiver program.

Current law requires DDS, when providing assistance under the program, to prioritize nonprofits that reserve at least 50% of a housing site's initial residential capacity for people with these disabilities who are on a supportive housing waiting list DDS or DSS maintains. The bill instead requires DOH to prioritize developers that reserve up to 25% of the initial residential capacity for people with these disabilities on a waiting list or who wish to move from a more structured setting to supportive housing.

§§ 4-6 — DDS SELF-ADVOCATE COORDINATORS

The bill removes the statutory cap of 11 DDS self-advocates in a general worker position who are eligible for specified sick, vacation, and personal leave and holiday pay benefits. In practice, these positions are self-advocate coordinators.

The bill also specifies that the Department of Administrative Services commissioner's authority to issue regulations on granting holiday time to certain non-permanent state employees is subject to the standard regulation approval process.

§§ 7-8 & 15 — RESIDENT TRANSFERS

By law, the DDS commissioner may assign someone with intellectual disability to a public or state-supported private residential facility. The bill removes the specific requirement that the commissioner consider the recommendations of a properly designated diagnostic agency before making these assignments.

It also updates and revises the law on transfers between these residential facilities. Current law generally requires DDS to give at least 10 days' prior notice before transferring a facility resident, except for emergency transfers, for which notice must be provided within 10 days after the transfer. The bill also allows this post-transfer notice, rather than prior notice, for medical transfers.

The bill specifies that for all transfers, including those for emergencies or medical reasons, adult residents of these facilities or residents' legal representatives have the right to request a hearing if they object to a transfer. Current law (1) has conflicting provisions on the right to request a hearing to contest an emergency transfer and (2) does not allow objections to a medical transfer.

The bill also creates a process for temporary emergency transfers, as explained below.

Temporary Emergency Transfers

The bill sets standards and procedures for temporary transfers, without prior notice, due to emergencies or during a declared public health emergency.

Specifically, it allows the DDS commissioner to temporarily transfer anyone from a DDS-operated or state-supported residential facility if he determines that an emergency in the facility must be addressed immediately, including when the facility is left uninhabitable due to a natural disaster, utility malfunction, or temporary concerns with the facility staff's ability to meet resident needs. These transfers remain in place for up to 90 days or until the commissioner rescinds them, whichever is earlier.

The bill also allows the commissioner, during a declared public health emergency, to request that the governor issue an executive order authorizing the commissioner to temporarily transfer a facility resident for reasons of health or safety. If the governor issues the order, the commissioner may make temporary transfers as he deems necessary, and the transfers stay in place until the commissioner rescinds them or the order expires, whichever is earlier.

In either case, the commissioner must notify the person and the person's legal representative (if any) in writing about the temporary transfer as soon as practicable, but no later than 10 days after the transfer. The person cannot object and request a hearing until the 30th day of the transfer, and the hearing follows existing procedures and standards.

§§ 9-11 — HUMAN RIGHTS AND PROGRAM REVIEW COMMITTEES

The bill codifies existing practice by establishing in law a human rights committee and program review committee within each DDS service region and the Southbury Training School. The respective regional or training school director appoints the committees' members.

Under the bill, the human rights committees must:

1. advise and make recommendations to these directors and the DDS commissioner on best practices and
2. address concerns and complaints on human rights issues involving people receiving DDS services, including those involving aversive procedures (see below), restrictive interventions, intrusive programs or devices, restitution, and pre-sedation medication.

The program review committees must advise the directors and commissioner on best practices for reviewing plans that include things like behavior support strategies, use of psychotropic and behavior modifying medications, and the use of restraints for people receiving DDS services.

For each type of committee, the bill (1) requires the commissioner to establish uniform responsibilities and procedures and (2) allows him to adopt implementing regulations.

Human Rights Committee Recommendations on Aversive Procedures (§ 11)

Current law prohibits using aversive procedures on anyone placed or treated under the direction of the DDS commissioner, except under procedures established by the commissioner. The bill additionally provides that these procedures may occur only in line with recommendations from a regional human rights committee.

By law, an “aversive procedure” is the contingent use of an event that may be unpleasant, noxious, or otherwise cause discomfort and is designed to change a specific behavior or to protect someone from injuring himself, herself, or others. It can include the use of physical isolation and mechanical and physical restraints.

§ 12 — ABUSE AND NEGLECT REGISTRY

By law, DDS maintains a registry of certain former employees who left or were fired from their jobs because of a substantiated abuse or neglect complaint against them. These are people who were employed by DDS, or an agency, organization, or person DDS licenses or funds. The information is available only to certain agencies and employers for specified purposes.

The bill makes information in the registry available to the state’s Office of Labor Relations for determining whether an applicant for employment with certain state agencies appears on the registry. Specifically, this applies to applicants at DDS or the departments of Children and Families (DCF), Mental Health and Addiction Services (DMHAS), and Social Services (DSS). Existing law already grants these other agencies and the Department of Administrative Services (DAS) access to the registry to determine whether applicants appear on it.

§ 13 — OMBUDSPERSON OFFICE

By law, an independent ombudsperson office within DDS receives complaints affecting people under DDS care or agencies with whom the

department contracts for services and recommends to the commissioner ways to resolve these complaints. The bill specifically names this office as the “Office of the Developmental Services Ombudsperson.”

§ 14 — ICF/IID CON-RELATED NOTICES

By law, long-term care facilities, including Medicaid-certified ICF/IIDs, generally must seek certificate of need (CON) approval from DSS before certain activities (such as introducing new services or eliminating services). In several cases, the law requires the facility to also give related notices to certain other state entities.

The bill updates these notice requirements for ICF/IIDs, generally requiring them to give notices to the Office of the Developmental Services Ombudsperson (and in some cases, other agencies) rather than the Office of the Long-Term Care Ombudsman. Correspondingly, it requires the former, rather than the latter, office to take certain actions in response. Generally, these notices and related actions are follows:

1. facility notice of intended (a) pre-licensure ownership transfers, (b) new or expanded functions or services, (c) service terminations or substantial decreases in licensed bed capacity, or (d) bed relocations to a different facility;
2. facility notice of closure petition;
3. informational letter on patient rights (for patients and certain other parties) by the ombudsperson’s office and the Department of Aging and Disability Services (ADS) that must accompany the closure notice;
4. informational session on the potential closure held by the ombudsperson’s office and the Department of Public Health;
5. facility notice when submitting a letter of intent before filing a CON application; and
6. informational letter by the ombudsperson’s office and ADS that must accompany a letter of intent on potential service

terminations or substantial decreases in bed capacity.

§ 15 — INFORMATION SHARING ON ABUSE OR NEGLECT AT GROUP HOMES OR COMMUNITY COMPANION HOMES

The bill allows DDS to share information with certain entities if a DDS-licensed community living arrangement (i.e., group home) or community companion home's license was revoked or surrendered because of substantiated abuse or neglect during the licensure period. (Community companion homes offer a family-like setting for people with intellectual disability when circumstances make it difficult for the person to live with his or her family.)

Specifically, the bill allows the DDS commissioner to release the former licensee's name, license revocation or surrender date, and type of abuse or neglect to the following entities:

1. authorized agencies (i.e., agencies authorized to conduct abuse and neglect investigations and responsible for issuing or carrying out protective services for people with intellectual disability), for the purpose of determining protective services;
2. employers of people providing services to those receiving DDS services or support; and
3. DCF, DMHAS, DSS, and DAS, to make a determination on an employment application or provider licensure or certification with DCF, DMHAS, DSS, or DDS. (In practice, DAS generally oversees human resources functions for executive branch agencies.)

BACKGROUND

Related Bill

sHB 5292 (File 106), reported favorably by the Public Health Committee, contains identical provisions on DDS sharing information on group home or community companion home licensing actions due to substantiated abuse or neglect.

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute

Yea 37 Nay 0 (03/11/2024)

Housing Committee

Joint Favorable

Yea 14 Nay 0 (04/08/2024)