Developmental Disabilities Community Services

Handbook for Individuals Served

Welcome

We're committed to providing you with the best service possible. Please review this handbook and feel free to ask a member of our staff if you have any questions about our policies or procedures. You will have the opportunity to review this handbook with a staff member if you need assistance.

Who We Are

Jefferson Parish Human Services Authority (JPHSA) helps people in Jefferson Parish affected by mental illness, addictive disorders, and/or intellectual/developmental disabilities to live full, healthy, independent and productive lives to the greatest extent possible for available resources. We promise courtesy, empathy, and respect in meeting the expectations of those we serve and each other.

Developmental Disabilities Community Services (DDCS) at JPHSA provides services and supports to Jefferson Parish residents who meet the State of Louisiana's eligibility criteria for developmental disability services. Eligible individuals may receive services from birth throughout their life spans.

How do I apply for services for an individual with an intellectual/developmental disability?

If you suspect you or someone you know may have an intellectual/developmental disability, contact our Developmental Disabilities Community Services (DDCS) staff at (504)838-5424. You can request a determination of eligibility for developmental disability services and get referred to any other programs and services we offer (such as primary care or care for mental health and/or addictive disorders).

What is a developmental disability according to the State of Louisiana?

A developmental disability is defined as a severe, chronic disability which is due to an intellectual or physical disability or combination of intellectual and physical disabilities that occurs before age 22, is likely to continue indefinitely, and results in substantial functional limitations in three or more of the following major life areas:

- Self-care
- Receptive and expressive language*
- Learning
- Mobility
- Self-direction
- Capacity for independent living
- Economic self-sufficiency

*(*Note: Receptive language refers to the ability to understand information. It involves processing or understanding the words, sentences and meaning of what others say or what is read. Expressive language refers to being able to put thoughts into words and sentences in a way that others understand.)*

It is also important to note the following:

- Children 3-9 years of age may be eligible with only two of six substantial limitations. (Economic self-sufficiency is not considered for children.)
- Children 10-17 years of age must have three of six substantial limitations to be considered eligible. (Economic self-sufficiency is not considered for children.)
- Individuals 18 years of age and older must have three or more substantial limitations in any of the seven major life areas.
- The disability is not attributed solely to mental illness and reflects the need for a combination and sequence of care, treatment, or other services which are of lifelong or extended duration and are individually planned and coordinated.
- A substantial developmental delay or specific congenital (affecting the person at birth) or acquired condition in a person from birth through age 9 which, without services and support, has a high probability of resulting in the above criteria being met later in life may be considered a developmental disability.

How We Can Help

Services

After we determine eligibility for DDCS Services, a Personal Support Coordinator meets with you to develop a plan of support. The Personal Support Coordinator administers needs-based assessments to determine your level of functioning at home and in the community. We will discuss our service recommendations with you. All of our planning is person-centered and family-centered.

Some of the services we offer include the following:

- Individual and family supports
- Personal companion and respite services
- Psychological services/positive behavior support
- Flexible Family Fund
- Support coordination
- Supported living services
- Transition planning for high school graduates
- Vocational services
- Waiver services
- Advocacy
- Court liaison services
- Crisis intervention
- Referrals for immunizations, annual physicals, and affordable primary care

Charitable Choice

You have the right to receive services from an alternative provider if you object to the religious character of the current program. Federal law gives you:

1. the right to a referral and to services within a reasonable time after the date of such objection;
2. the right to receive substance use treatment services from a provider that has the capacity to provide such services;
3. the right to access services from an alternative provider that is reasonably accessible to you; and
4. the right to equivalent services, i.e. the value of referred services are not less than the value of the rejected services.

Additionally, the faith-based substance use treatment provider is not allowed to require participation in any religious activity as a component of treatment and may not discriminate against you on the basis of religion, a religious belief, a refusal to hold a religious belief, or a refusal to actively participate in a religious practice.

Supporting and Promoting Independence

JPHSA funding and services are not meant to replace natural and community resources. They support and promote greater independence, participation, and productivity toward overall goals of personal responsibility, empowerment, self-determination, good citizenship, and a positive quality of life within one's home and community. If funding and services are needed, a priority assessment is completed based on need and available resources.

Individuals/families may choose to do the following:

- Individuals/families may hire their own personal service provider from within their network of family, friends, and neighbors, and/or a Home and Community-based Waiver service provider. They must arrange for the training of the service provider and directly supervise the provider in providing the services as described in their Comprehensive Plan of Support and JPHSA Contract Agreement. Individuals/families must pay their personal service provider, and JPHSA reimburses them for disability-related supports and services (e.g. therapies, medical expenses, respite/personal companion, and disability related supplies).

- Individuals/families may utilize an approved, qualified JPHSA Community Service Provider Agency to deliver their services. The Community Service Providers hire, train, and supervise the direct support workers who provide the services approved in the Comprehensive Plan of Support. JPHSA Community Service Providers must meet JPHSA quality requirements. A Qualified Developmental Disabilities Professional is required to supervise services to individuals/families; have a 24 hour on-call service; meet direct support worker training requirements; and meet required JPHSA, state and federal licensing and certification standards for reporting critical incidents, training and supervision of staff, and documentation of services delivered. The DDCS Community Resource Directory provides a

listing and description of the approved Community Service Providers and the services they provide. This directory may be requested by calling us at (504)838-5424.

Personal Support Coordinators and You

Personal Support Coordinators assist individuals/families in obtaining needed community resources and JPHSA services and funding. They monitor the services identified in the Comprehensive Plan of Support of individuals/families to ensure the effectiveness of services, resolve barriers to services, and continuously monitor satisfaction with services.

The individual/family works with the Personal Support Coordinator to develop a contract agreement so they may purchase the services and supports identified in the Comprehensive Plan of Support. The parent and/or adult with a disability (if able to give informed consent) is the primary decision-maker and has choice and control of his or her authorized resources as stipulated in the JPHSA contract agreement.

Locations & Hours

DDCS Elmwood
1500 River Oaks Road W.
Suite 200
Jefferson, LA 70123 (504)838-5424

DDCS West Jefferson
5001 West Bank Expressway
Suite 200
Marrero, LA 70072 (504)371-0214

Developmental Disabilities Community Services hours are Monday through Friday, 8:00 AM to 4:30 PM.

Access After Hours

JPHSA provides 24-hour telephone and face-to-face crisis response and intervention services for children, adolescents, and adults with mental illness, addictive disorders, and/or intellectual/developmental disabilities. Mobile Crisis Services (MCS) can be reached at (504) 832-5123. The MCS team has the capacity to respond to crises in a variety of settings (e.g. homes, schools) across Jefferson Parish and can provide resources, assessment, intervention, brief in-home respite, and transportation to Health Centers when needed.

Note: If you are experiencing a life-threatening emergency, you should call an ambulance or go to your nearest hospital's emergency room.

Access to Records

In most instances, you have a right to see and obtain a copy of your record. There is a copy charge of $1 per page for the first 25 pages, 50 cents per page for pages 26-350, and 25 cents per page thereafter. A handling charge (not exceed $25) and postage costs may also apply. Copying charges are collected prior to the release of information to individual, families, or attorneys.

Protecting Your Privacy

In order to serve your needs, our staff members gather personal information about you. The information you provide will not be released to others without your permission in most cases. Our Notice of Privacy Practices lists all the occasions we are required or permitted by law to disclose or use your information. It also describes additional privacy rights. A copy of the Notice of Privacy Practices is located in the back of this handbook. If you have any questions or concerns regarding your privacy, please contact JPHSA's Privacy Officer at (504)512-3651.

Appeals & Feedback

JPHSA respects the needs of individuals. You, your family, guardian, and/or advocate have a right to appeal JPHSA decisions regarding developmental disabilities eligibility and resource allocation (the services you receive and the number of times those services are provided). Copies of the appeals processes are located at the back of this handbook. JPHSA staff members are also available to provide copies of appeal forms and any needed assistance.

Your satisfaction with JPHSA is important to us. If you have feedback, please speak directly with the staff person with whom you have been working. If this person is unavailable, or if you wish to speak with someone else, please call us at (504)838-5424 and ask to speak with a supervisor.

You may provide feedback in a number of ways:

- On the JPHSA website (can be done anonymously)
- Electronically through myjphsa@jphsa.org
- By U.S. mail addressed to 3616 S. I-10 Service Rd., W., Metairie, LA 70001, Attention: Quality Improvement Specialist (can be done anonymously)
- To a JPHSA staff member

If the matter is not resolved, you will be asked to present your feedback in writing. A form is available but not required, and the supervisor will provide any assistance you need when completing it. A copy of the feedback form is located at the back of this handbook. You will be notified of the decision concerning your feedback, if requested.

If you have any questions regarding the privacy of your information or would like to contact the Privacy Officer, please address your concerns in writing to the JPHSA Privacy Officer at 3616 S. I-10 Service Road W., Suite 200, Metairie, LA 70001.

JPHSA recognizes the importance of listening to and acknowledging all feedback received so we may continuously improve the quality of services and meet your expectations for responsive and high quality service delivery.

Voter Registration

JPHSA respects the rights of individuals to be included in aspects of community life shared by all citizens, including participation in elections. JPHSA offers the opportunity to register to vote at admission to a program, upon financial recertification, renewal, change of address, or change of name (when staff is made aware of the address/name change). If you are interested in registering to vote at any time during your participation at JPHSA, please ask a JPHSA staff member to assist you in doing so.

How You Can Help

Fees & Payment

JPHSA expects payment, including any private insurance co-payments, at the time of service, unless prior arrangements are made with JPHSA's Finance Operations office. We will bill you for all outstanding fees.

Discounted fees may be available based on the U.S. Federal Poverty Guidelines along with your income and household size. To be considered for a discounted fee, you must submit an initial application and re-applications on an annual basis thereafter. As part of this process, you will be asked to provide a copy of your most recent tax return, three most recent paycheck stubs, or annual social security statement.

If you are interested in applying for Medicaid, Medicare, or private insurance through the Health Insurance Marketplace, JPHSA staff can assist you and your family in the application process. Please advise any staff member of your interest, he or she will schedule an Outreach and Enrollment Specialist to assist you in completing your application.

Positive Behavior

If you become frustrated or upset while on our premises, our staff members will make every attempt to help you become calm. They will escort you to a quiet place and will work with you to resolve the issue. If you should present a danger to yourself or someone else, we may use physical holds to keep both you and our staff members safe. Physical holds are only used as a last resort and only to ensure your safety and the safety of others. Physical holds will remain until you regain self-control or, if not, until emergency services arrive. If this kind of crisis occurs in the community or in your home while our staff is present, they may contact 9-1-1 for assistance if needed and may also need to leave the area to ensure their safety. A copy of JPHSA's Behavior Support and Management policy is available upon request.

No Weapons

JPHSA does not allow weapons on the premises or wherever services are being provided. If you arrive at a JPHSA facility with a weapon, you will be asked to leave it in your vehicle. If the request is refused, you will be asked to leave and the appointment will have to be rescheduled. If you refuse to leave, we will contact law enforcement. If there is a weapon present during a session or visit in a community-based location, our staff will request it to be safely secured and stored. If the request is refused, our staff will leave and the appointment will have to be rescheduled.

Tobacco and Electronic Cigarettes

JPHSA prohibits the use of tobacco/electronic cigarette (e-cigarette) products in the interior of properties occupied, owned, or leased by JPHSA and within 25 feet of any entrance/exit. Tobacco/e-cigarette products include, but are not limited to, smoking tobacco of any kind, oral tobacco products (dips, chewable tobacco, etc.) and any form of smoking device. If you need help quitting smoking, please ask a staff member for a smoking cessation treatment referral

Appendix A: Notice of Privacy Practices

This notice describes how JPHSA may use and disclose your private information, and how you can get access to this information. Please review it carefully.

When it comes to your information, you have certain rights. This section explains your rights and some of our responsibilities to help you.

Get a copy of your service record: You can ask to see or get an electronic or paper copy of your service record and other information we have about you. Ask us how to do this. We will provide a copy or a summary of your information, usually within 15 days of your request. We may charge a reasonable, cost-based fee. We may not be able to produce some or all of your records electronically.

Ask us to correct your service record: You can ask us to correct information about you that you think is incorrect or incomplete. Ask us how to do this. We may say "no" to your request, but we'll tell you why in writing within 60 days.

Request confidential communications: You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address. We will say "yes" to all reasonable requests.

Ask us to limit what we use or share: You can ask us not to use or share certain information for treatment, payment, or our operations. We are not required to agree to your request, and we may say "no" if it would affect your care. If you pay for a service or healthcare item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say "yes" unless a law requires us to share that information.

Get a list of those with whom we've shared information: You can ask for a list (accounting) of the times we've shared your information for six years prior to the date you ask, who we shared it with, and why. We will include all the disclosures except for those about treatment, payment, and healthcare operations, and certain other disclosures (such as any you asked us to make). We'll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

Get a copy of this privacy notice: You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly. A copy can also be found at www.jphsa.org/privacy.

Choose someone to act for you: If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your information. We will make sure the person has this authority and can act for you before we take any action. You must provide a copy to us so we can have it on file.

File a complaint if you feel your rights are violated:

- You can complain if you feel we have violated your rights by contacting our Privacy Officer by phone at (504)512-3651, or address your concerns to: Privacy Officer, 3616 S. I-10 Service Road W., Suite 200, Metairie, LA 70001.
- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-800-368-1019, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/.

We will not retaliate against you for filing a complaint.

JPHSA safeguards your private information. You have choices about how your information is shared. We will never release your private information without your written consent unless we are legally obligated or permitted to do so. Certain information, including psychotherapy notes and substance use treatment records, are never released unless we are legally obligated to do so.

We will never sell or share your information for marketing purposes without your written permission.

How do we typically use or share your health information?

We typically use or share your information in the following ways:

- We can use your information and share it with other professionals who are treating you.
- We can use and share your information to run our practice, improve your care, and contact you when necessary.
- We can use and share your information to bill and get payment from health plans or other entities.

How else can we use or share your health information?

We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information, see www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html.

Help with public health and safety issues: We can share health information about you for certain situations such as the following:

- Preventing disease
- Helping with product recalls
- Reporting adverse reactions to medications
- Reporting suspected abuse, neglect, or domestic violence
- Preventing or reducing a serious threat to anyone's health or safety

Comply with the law: We will share information about you if state or federal laws require it, including with the U.S. Department of Health and Human Services if it wants to see that we're complying with federal privacy law.

Address workers' compensation, law enforcement, and other government requests: We can use or share information about you for the following purposes:

- For workers' compensation claims
- For law enforcement purposes or with a law enforcement official
- For activities authorized by law with health oversight agencies
- For special government functions such as military, national security, and presidential protective services

Respond to lawsuits and legal actions: We can share information about you in response to a court or administrative order, or in response to a subpoena.

Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For more information, see:

www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html

If the terms of this Privacy Notice change, a notice will be posted, and copies will be handed out. If you see the notice and did not receive a copy, please request one from the front desk staff.

Appendix B: Appeals Process

You Have a Right to Appeal Decisions About Your Eligibility for Services and Supports

If you disagree with JPHSA's eligibility decision regarding a determination of ineligibility for entry for behavioral health and/or developmental disabilities services and supports, you (or your family member, guardian, or advocate) may call:

The JeffCare Division Director at 504-838-5257 weekdays between 8 a.m. and 4 p.m. or may mail a written request to appeal to: Jefferson Parish Human Services Authority, 3616 S. I-10 Service Rd. W., Suite 100, Metairie, LA 70001, Attention: Appeals.

The Behavioral Health Community Services (BHCS) Division Director at 504-838-5702 weekdays between 8 a.m. and 4 p.m. or may mail a written request to appeal to: Jefferson Parish Human Services Authority, 1500 River Oaks Road W., Suite 100, Jefferson, LA 70123, Attention: Appeals.

The Developmental Disabilities Community Services (DDCS) Division Director at 504-838-5424 weekdays between 8 a.m. and 4 p.m. or may mail a written request to appeal to: Jefferson Parish Human Services Authority, 1500 River Oaks Road W., Suite 200, Jefferson, LA 70123, Attention: Appeals.

Please state why you believe you are eligible for services and/or supports and give any additional information you have to support this. The appeal, whether by telephone or letter must be made within thirty (30) calendar days of being informed you are not eligible for services.

The respective Division Director will provide you with written notification of the decision within ten (10) working days of receipt of your appeal.

Any decision you receive from the JeffCare or BHCS Division Director is final.

If you are denied developmental disabilities services or supports, you have a right to further appeal to the Louisiana Department of Health (LDH) Division of Administrative Law (DAL) within thirty (30) calendar days of your denial notice. You may inform the DDCS Division Director of your desire to receive assistance in making your appeal to LDH/DAL. JPHSA adheres to final decisions rendered by LDH/DAL.

Appendix C: Jefferson Parish Human Services Authority's

Feedback Form

In order to quickly and appropriately route your feedback, please select the relevant category below.

☐ Compliment ☐ Suggestion ☐ Complaint ☐ Other

Date:_____

Name:_____

(Print Name)

☐ Individual Seeking/Receiving Services ☐ Family Member ☐ Other_____

(Relationship)

If a family member or other, who are you filing this complaint on the behalf of? _____

(Print Name)

Select a choice: ☐ I would appreciate a personal response. ☐ I just thought you should know.

Do you prefer to be contacted by: ☐ Mail ☐ Phone | Phone Number: (___)_____

Mailing Address: _____

(Address) (City)

_____

(State) (Zip Code)

Feedback Details:

_____

_____

_____

_____

_____

_____

_____

_____

_____

If you have any complaint about privacy or confidentiality, you may contact JPHSA's Privacy Officer at 3616 S. I-10 Service Road W., Suite 200, Metairie, LA 70001, 504-512-3651.

This form is also available online at www.jphsa.org.

Appendix D: Notice of Disclosure to the Greater New Orleans Health Information Exchange (GNOHIE)

This is to notify you that Jefferson Parish Human Services Authority and its programs (JPHSA) share certain protected healthcare information with the Greater New Orleans Health Information Exchange (GNOHIE). GNOHIE is an electronic health information exchange that provides participating healthcare providers access to data in your electronic health records. The information shared in GNOHIE includes your diagnosis, name of treatment provider, medications, and prescriber notes. This information is shared in the system in order to assist JPHSA as well as other participating providers you see make an informed decision about your treatment.

YOU HAVE THE RIGHT TO OPT-OUT OF THE DISCLOSURE OF YOUR PROTECTED HEALTHCARE INFORMATION TO THIS EXCHANGE.

If you decide to opt-out, you are required to do so in one of the following ways:

- Go to the GNOHIE website at http://www.gnohie.org or
- Call 1-855-4GNOHIE (1-855-446-6443).

JPHSA staff can assist you with the opt-out process and answer any questions you may have about GNOHIE and the benefits of participation. If you decide to participate, you still have the option to opt-out at any time.

YOU MUST TAKE ACTION TO OPT-OUT OF GNOHIE IF YOU DO NOT WANT YOUR INFORMATION TO BE INCLUDED IN GNOHIE.

GNOHIE will have access to your information on the fourth day following this visit with a JPHSA provider. If you choose to consent and allow JPHSA and its programs to share this information, then you do not need to do anything.

Your signature on this form acknowledges that you have read this notice and that JPHSA staff answered your questions. Your signature also shows that you understand you have three (3) days from this visit with JPHSA to opt-out of GNOHIE before your information is automatically shared.

_____	_____
Sign Name	Parent or Guardian Signature (if applicable)
_____	_____
Print Name	Print Name of Parent/Guardian (if applicable)
_____	_____
Date	Date

Appendix E: The Rights and Responsibilities of Individuals Served

The Rights of Individuals Served include, but are not limited to, the following:

- The right to be given a handbook which includes a copy of the Rights and Responsibilities of Individuals Served, and to receive an explanation of these rights, prior to receiving the first service. In the case of individuals seeking telehealth services, access to the handbook is provided via the JPHSA website;
- The right to be treated with courtesy, empathy, and respect;
- The right to receive services for which eligibility is determined without regard to religion, race, color, creed, sex, national origin, age, sexual orientation, or disability;
- The right to receive services in a manner consistent with JPHSA program rules and expectations, including JPHSA policies and procedures, grant requirements, and federal and state laws and guidelines;
- The right to be referred to an appropriate provider if JPHSA does not offer the services the individual requires;
- The right to receive services in a manner that is non-coercive and protects the right to self-determination;
- The right to participate in decisions regarding services provided;
- The right to be informed of the benefits, risks, side effects, and alternatives to planned services;
- The right to refuse any service, treatment, or medication, unless mandated by law or court order, including the right to receive an explanation of potential consequences of refusal, such as discharge;
- The right to advance notice of the reason(s) for ending services, and to be included in discharge planning;
- The right to receive an explanation of the reason(s) for denial of services and the right to appeal decisions about eligibility and service level;
- The right to a current, written, individualized service/care plan that addresses identified emotional and/or health and wellness goals, and social, educational, or economic needs;
- The right to be included in the development and periodic review of the service/care plan;
- The right to seek second opinions from providers not affiliated with JPHSA, at one's own expense;
- The right to seek legal opinion, at one's own expense;

- The right to be informed of JPHSA's privacy practices and its feedback processes;
- The right to privacy of all personal and protected health information except when JPHSA is permitted or required by law to disclose that information with or without consent;
- The right to access one's own service record;
- The right to advance notice of applicable fees and expectations for payment, and the right to appeal a fee determination;
- The right to be informed that services are not refused due to an inability to pay at the time of service;
- The right to reasonable accommodation in service delivery, such as an interpreter or other aids, to eliminate or minimize visual, auditory, linguistic, cultural, and/or mobility barriers;
- In addition to the Rights of Individuals Served, JPHSA's Developmental Disabilities Community Services Division subscribes to the Rights of Persons Who Have Developmental Disabilities, per Louisiana Revised Statute 28:452.1.

The Responsibilities of Individuals Served include, but are not limited to, the following:

- The responsibility to provide an accurate and complete treatment and/or social history as well as to verbally inform staff if services are obtained elsewhere;
- The responsibility to notify the treatment/service team if there are any changes to primary, behavioral health, or disability needs;
- The responsibility to actively participate in treatment/service planning and decisions on the services;
- The responsibility to attend appointments and to provide no less than one business day's notice if unable to attend;
- The responsibility to follow treatment/service recommendations and to understand the potential impacts of not following treatment/service recommendations;
- The responsibility to provide payment, including private insurance co-payments and deductibles, at the time of service, and to adhere to terms of any payment plans;
- The responsibility to inform staff of any current advance directives;
- The responsibility to adhere to the facility rules when on the premises, such as no weapons, no use of tobacco/electronic cigarette products within 25 feet of an entrance, etc.; and
- The responsibility to refuse to sign any documents/forms that are not understood.

Appendix F: Chapter 4-A. The Developmental Disability Law

Louisiana Revised Statutes (RS) 28:452.1
PART II. RIGHTS OF PERSONS WHO HAVE
DEVELOPMENTAL DISABILITIES AND PRINCIPLES FOR THE
DEVELOPMENTAL DISABILITIES SERVICES SYSTEM
(Source: State of Louisiana Legislative Revised Statutes 28:452.1, 2005)

§452.1. Rights of persons who have developmental disabilities

A. The rights that are specifically enumerated in this Part are in addition to all other rights of persons with developmental disabilities protected under state and federal law and all rights enjoyed by all citizens of Louisiana. This listing of rights is neither exclusive of nor intended to infringe upon any civil rights that are guaranteed to all people. These rights are protected regardless of the place or residence of the person, type of service or support, ability to exercise these rights or choice to exercise these rights. It is the intent of this Chapter that these rights shall be applied in the provision of supports and services to persons with developmental disabilities.

B. The rights of persons with developmental disabilities, unless expressly or specifically restricted in accordance with federal or state laws, include the following rights:

(1) To receive timely a determination for entry into the system and, if the person is thought to have a developmental disability, to have an expeditious diagnosis and evaluation and arrangement of services and supports to the fullest extent possible.

(2) To have and to participate in the preparation of a support plan as defined in R.S. 28:451.2, to have the support plan reviewed annually, and to request review of the support plan, and modification if indicated, at reasonable intervals.

(3) To have access to his records.

(4) To receive developmental disabilities services and supports consistent with personal needs and choices in the most integrated setting appropriate, taking into account the resources available to the state and the needs of others with developmental disabilities.

(5) To receive supports and services that addresses the desires and goals of the person.

(6) To receive supports and services in a respectful and in the least intrusive manner.

(7) To communicate in private by telephone, uncensored mail, or otherwise, with people inside or outside the place of residence of the person.

(8) To receive visitors.

(9) To self-direction.

(10) To privacy of person and belongings.

(11) To practice the religion of his choice.

(12) To access his medical information and records, to communicate with medical personnel and to consent to medical treatment in accordance with this Chapter.

(13) To engage in leisure, recreational and other related activities.

(14) To receive reasonable accommodation in the proceedings and activities of the

developmental disabilities services system, including the application for and provision of supports and services and communication about such supports and services.

(15) To withdraw from any developmental disabilities services or supports to which the person has been admitted voluntarily and not be detained longer than seventy-two hours excluding Saturdays, Sundays and holidays, after executing a written request of discharge, or unless a commitment proceeding is instituted by the department or others as set forth in this Chapter during the seventy-two-hour period.

(16) To be informed both orally and in writing of the rights of the person under the system, both during the determination process and at intervals specified in office policy, using language and a communication system that effectively communicates those rights to the person.

(17) To be informed of the procedures that will be used to decide the type and amount of developmental disabilities services and supports provided to the person and the location of the services and supports.

(18) To have access to legal assistance and to be visited by his attorney at all times, and to communicate privately with his attorney and with the committing court, if applicable.

(19) To refuse specific services and supports unless refusal would pose a danger to himself or to others. Acts 2005, No. 128, §1, eff. June 22, 2005.

§452.2. Principles for the developmental disabilities services system

The department through the office shall provide developmental disabilities services and supports consistent with the following principles, to the extent possible:

A. Supports assist in enabling people to exercise self-determination in their lives.

B. Supports assist in enabling people to achieve their maximum potential through increased independence, productivity, and inclusion in their communities.

C. Personal outcomes and goals are considered in the development of individualized supports for each person.

D. The community where the person chooses to live and work is the optimum place to provide supports and services.

E. Persons and families are generally best able to determine their needs, rather than their needs being determined by others.

F. The needs of the entire family are considered in the development of family supports.

G. Family supports enable children to live in stable family environments with enduring relationships with one or more adults regardless of the severity of the disability of the child or the degree of support necessary.

H. Children and young adults with disabilities receive and participate in an appropriate education which enables them to have increased opportunities for well-being, development and inclusion in their communities.

I. Existing natural supports and community resources are promoted and utilized.

Acts 2005, No. 128, §1, eff. June 22, 2005.