



## **PROVIDER HUMAN RIGHTS COMMITTEE GUIDELINES**

(ADAPTED FROM THE DMH/DD/SAS RULES FOR MH/DD/SA FACILITIES AND SERVICES, 10A NCAC 27G .0504)

All provider agencies are required to have an active Human Rights Committee regardless of the number of consumers. Smaller providers are encouraged to collaborate with one another to fulfill this contractual and legislative requirement. The Roles and Responsibilities of the Human Rights Committee must include the following elements and be clearly defined in the programs Policy and Procedure manual.

### **POLICY AND PROCEDURE**

Provider agencies are required to develop policies and procedures that address the following:

- Composition, size, and appointment of committee members
- Training and Orientation of committee members
- Frequency of Meetings (at least Quarterly)
- Rules of conduct and voting procedures
- Procedures for monitoring the effectiveness of existing protocols for protecting client rights
- Reporting requirements (internal reporting and Quarterly Reports to the LME)

### **MEMBERSHIP**

- Committee membership should be representative of the race, ethnicity, gender, and disability of population served.
- Committee membership should have at least a 50% consumer and family representation
- Committee members should be receive Human Rights training and technical assistance

### **MEETING**

- Committee must meet at least Quarterly
- Committee must review the following
  - Client grievances
  - Alleged violations of rights, including abuse, neglect & exploitation
  - Concerns regarding the use of restrictive interventions
  - Failure to provide needed services
- Committee must have a quorum, which is  $\frac{1}{2}$  the members plus one additional member (i.e. if there are 12 members on the roster, 7 must be present to have a valid/voting meeting)

### **REPORTING REQUIREMENTS**

Documented Human Rights activities must include:

- Committee minutes must document the following:
  - Indication of members present and their titles (must have consumer/family representation)

- A thorough review of complaints/grievances, violations of rights, restrictive interventions, and failure to provide services and must include the following items, where applicable:
  - Follow-up activities
  - Status of open reports/incidents/allegations
  - Internal investigations
  - Plans of corrections
  - Follow-up or reports with all applicable agencies (Health Care Personnel Registry (HCPR), DHSR, DSS, law enforcement, etc...)
  - Analysis of trends
- Committee Reports and Minutes are to be submitted to the QI Department by the 15<sup>th</sup> day of the month following the end of each quarter (April, July, October, January).

Reports may be sent via a hard copy to the above address or emailed to [jmelton@acmhdds.org](mailto:jmelton@acmhdds.org). Should you have any questions, please Joanne Melton at (336) 513-4200, ext. 4109.