



ALL INDIA INSTITUTE OF SPEECH & HEARING,  
MANASAGANGOTTHRI, MYSORE - 570 006



## 4 E-Governance

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### 4.5 Such other information as may be prescribed under section [4(i)(b)(xvii)]

(viii) Any other information such as

#### a .CITIZENS CHARTER

##### Preamble

In view of the several government initiatives and legislation for persons with disability in the country, services for persons with disabilities is no longer a question of optional benevolence for service providers and rehabilitation professionals. Likewise, for the consumers, obtaining services from rehabilitation professionals is no more perceived as a passive process of partaking or receiving whatever is supplied without dispute or demur.

Persons with disabilities, caregivers and/or their families are consumers in their own right. As consumers in the rehabilitation service industry, they receive end products in the form of prosthesis and orthotics like tricycles, guiding canes, pair of spectacles, hearing aids, Braille books, teaching aids, etc. Of course, they are also consumers of a different kind since they receive services like guidance, counseling, therapy, special education, advice, advocacy, etc.

Whether material goods or services, both, service-providers (rehabilitation professionals) as well as service-receivers (persons with disabilities or their caregivers) need to be equally enlightened about their relative claims, rights, immunities, privileges and prerogatives. They must also defend against defilement, fight against infringement, protest against violation and object against encroachment. In confirmation of the above, the following Charter on Consumer Rights and Privileges for Citizens Seeking Services at AIISH, Mysore, is framed for public proclamation and publicity.

##### Article 1: Right to Equality

Means right to equality in receiving or dispensing services for any or all consumers irrespective of their caste, creed, religion, age, language, status, gender, extent of disability, region or geographical location, etc.

Consumers should immediately report out-of-turn favors other than on humane grounds, refusals to provide services, discrimination in quality of services provided by rehabilitation professionals on the basis of caste, creed, religion, age, language, gender, type or extent of disability, socioeconomic status, region or geographical location, etc.

## **Article 2: Right to Informed Consent**

Means right to be informed on diagnostic impressions, tests or investigations conducted, participation as subjects in research, about reports on results, estimated cost of services, proposed plan or procedures of therapy/treatment, short term or longer term side-effects or implications of the treatment, prognosis, outcome, etc.

Consumers can insist on information from the rehabilitation professionals on the final decision about their diagnosis or clinical condition, need for certain tests or investigations, treatment or therapeutic plans, time frame for their implementation, possible investment required in terms of time or money, prognosis, etc. No cash payments ought to be made without proper and authentic receipts on behalf of the institute. Any refusal to part or divulge complete information must be immediately reported. Consumers have the right to demand details on research project/s for which they or their wards are made subjects. They can also deny/refuse consent to be subject/s or participate in any research activity or demand details on approval for given projects by an Ethics committee exclusively constituted for this purpose.

## **Article 3: Right to Choose**

Means right to choose, decline and/or give consent by the consumer for any informed test/s, clinical procedures or investigations, opt or refuse any line of advice or therapy, etc., in the interest of the person with disability, their caregivers, family or society at large.

Consumers can insist on giving informed choice or consent for informed test, clinical procedure or investigation, opt or refuse any line of advice or therapy, etc., in the interest of the person with disability, their caregivers, family or society at large.

## **Article 4: Right to be Heard**

Means right to be heard about consumers' opinions on various issues related to diagnosis, therapeutic plan, programs, investigation procedures, including right to be represented in various forums formed to consider action-oriented research for welfare of service receivers. Consumers have the right to express opinions, make constructive criticisms, debate, suggest, query, etc., on all or any matters related to service delivery for persons with disabilities and/or their families.

The consumers can form non-political and non-commercial self help groups or consumer organizations which can be given representation in a Public Grievance/Redress Committee of the Institute especially constituted for this purpose on matters related to consumer interests or satisfaction.

## **Article 5: Right to Seek Redress**

Means right to seek redress against unfair clinical procedures or malpractice, unscrupulous exploitation of service receivers, etc. It also includes right for hearing and settlement of genuine grievances on or against specific instances of malpractice, misappropriation or misdemeanor by rehabilitation professionals or service providers.

Consumers can make complaints at duly Public Grievance/Redress Committee constituted by the Institute for their genuine grievances. The nature of complaints may be trivial or serious with broad ramification in the interest of persons with disabilities, their caregivers, families or society at large. The Public Grievance/Redress Committee shall investigate into charges, allegations or complaints received and eventually place their recommendations for action before the Director of the Institute.

## **Article 6: Right to Consumer Education**

Means right to acquire knowledge and skill needed to become an informed service receiver for or on behalf of persons with disabilities, their caregivers or families throughout their lives. Ignorance of consumers, particularly the illiterate and rural service receivers, is mainly responsible for their exploitation. Appropriate forum for consumer education, enlightenment and protection of their rights is therefore mandatory to prevent such unhealthy practices in the service delivery organisation for persons with disabilities.

Consumers must demand information and details on their rights, ongoing service activities for their own benefit or for benefit of their wards on a continual basis through group meetings, discussions, symposia, seminars, debates and declamations. There must be transparency in the practice or procedures of therapeutic planning, programming, implementation or execution of service delivery for persons with disabilities. Wherein the Institute is professedly a center for specialized manpower training, consumers must appreciate the genuineness of the efforts made by student-clinicians under the direct supervision of rehabilitation professionals.

## **Article 7: Right to Confidentiality**

Means right to demand for confidentiality in the process of assessment, conveying of diagnosis, treatment/therapeutic planning, programming, guidance, counseling, maintenance or dispensing of records and reports, registration of complaints, etc., by service providers or rehabilitation professionals.

Consumers can claim for privacy during the entire consultation process, beginning from initial assessment to program planning and implementation of therapy. Any infringement in this provision can be reported to appropriate forums and compensations for defamation claimed.

## **Article 8: Right to Integration and Mainstreaming**

Means right to claim for consideration in all clinical plans, procedures or practices. It is an approach that fosters integration and mainstreaming of the persons with disabilities and/or their families with normal society as a whole. In the entire rehabilitation process, there should be no tenor suggestive of segregation of disabled or their exclusion from the activities appropriate for the age, sex or cultural background of the individual with disabilities and/or their families.

Consumers can claim to be active partners in the caring process for persons with disabilities. They should report instances wherein there is any evidence suggestive of a practice of separation, exclusion, ostracism or deprivation of the disabled from their age, gender or cultural practices of their non-disabled peer population.

## **Article 9: Right for Barrier Free Environments**

Means right to demand for creation and maintenance of barrier free environments in the clinical settings, procedures and practices for testing, attitudinal expressions of rehabilitation professionals or service providers.

Consumers must report instances of deprecatory, defamatory or disparaging attitudinal expressions or comments made intentionally or unintentionally by service providers that are injurious to the psychological well being of the person with disability and/or their families. There must be no depiction of the disabled persons or their families as object of ridicule, pun or comedy. They must also

seek for corrections in physical or building architecture that may be disabling more than the actual handicap in the persons with disabilities in the clinical settings.