



## Advancing the Commission's Strategic Goals A Report on 2001 Activities & Plans for 2002

In the Spring of 2000, the Commission solicited the input of all staff, as well as outside parties who have a stake in the Commission's mission, to craft a strategic plan to guide our activities. The plan, finalized in June 2000, puts forth seven goals towards which the Commission strives in its mission of improving the lives of people with disabilities and protecting their rights.

This report provides an accounting of some of our major accomplishments in 2001 in pursuit of those goals, and additional activities, based on the suggestions of staff and our continuing dialogue with stakeholders, that will be undertaken in 2002 to further our service to individuals with disabilities.

More than just an accounting, though, it is the reason why the people of New York should be proud of the work of the men and women who make the Commission's mission a reality, just as I am to serve as your Chair.

Gary O'Brien  
Chair

### **Goal 1: To Maintain and Improve Our Traditional Independent Oversight Role.**

#### **Objectives:**

- Review the cost effectiveness and spending practices of mental hygiene agencies.
- Conduct systemic reviews of mental hygiene policies, programs and services.
- Assure effective and timely investigations of complaints, allegations of abuse, and unusual or traumatic deaths.
- Effectively communicate findings to improve quality of care.

#### **Accomplishments 2001:**

Reviewed and, where necessary, investigated 9,500 allegations of adult abuse, 228 allegations of child abuse, and 2,433 reports of deaths occurring in mental hygiene facilities.

Responded to over 19,730 requests for assistance received through the 1-800 number, usually by offering information and referral services, but also by commencing 217 care and treatment investigations.

Conducted a systemic review of electroconvulsive therapy (ECT) practices in State psychiatric centers.

Ensured fiscal components to programmatic reviews in problematic mental hygiene agencies including Transitional Services Inc. (TSI), Southern Tier Environments for Living, New Dimensions, PEOPLE Inc., and a number of adult homes.

Investigations at TSI and Ocean House resulted in recommendations for significant disallowances of Medicaid billings for mental health services; these investigations also identified systemic problems in the delivery of health and mental health services which have been brought to the attention of the Department of Health and the Office of Mental Health.

Created an Information Management Unit within QAIB to intake and triage cases coming to the bureau's attention and to offer support services to investigators.

Consolidated QAIB's various data bases to more effectively manage case activities and to identify systemic issues.

Began work on linking other Commission data bases (SDMC and Adult Homes) to better coordinate Commission case activities.

The Fiscal Bureau established a state-of-the-art connection with DOH's Medicaid data base to enable prompt and thorough assessments of fiscal issues relating to service delivery within the mental hygiene system.

Established a monthly medical case review process within QAIB bringing the expertise of all the bureau's nurses to bear on complex medical cases.

Initiated a process for reviewing the various types of case activities within QAIB with an eye toward improving timeliness and responsiveness.

In addition to issuing letters and reports of findings and recommendations stemming from investigations and fiscal, policy and program reviews, pursued a course of face-to-face briefings with operating and licensing agencies to engender a sense of the importance of certain matters under Commission scrutiny. Examples include TSI, ECT practices, sexuality guidelines, incident reporting, and ongoing work in adult homes.

### **Planned Activities 2002:**

Continue traditional case work, policy and fiscal activities. Also, as the events of September 11, 2001 will undoubtedly increase demands for mental health service, remain vigilant, in responding to complaints and in other activities, to monitor the impact on those who may be negatively affected by the increased demand.

Advance the initiatives undertaken in 2001 to improve our traditional oversight role as outlined above, including refining data base systems, examining our response to different types of cases to improve timeliness and effectiveness, and ensuring joint fiscal and programmatic examinations of troubled agencies/programs.

Continue to seize opportunities for face-to-face briefings for representatives of operating and licensing agencies and other government officials, in addition to providing written reports of Commission findings, to stress the importance, and at times urgency, of issues the Commission has identified in the course of its work.

### **Goal 2: To Monitor New and Emerging Service Trends and Modalities within the Mental Hygiene System**

#### **Objectives:**

- Increase the Commission's knowledge of new and emerging trends in service delivery.
- Assist operating agencies with the design and implementation of new service modalities.
- Assess the effectiveness of new service modalities.

#### **Accomplishments 2001:**

**In the context of reviewing draft incident reporting regulations, initiated a dialogue with the Office of Mental Health (OMH) and Office of Mental Retardation and Developmental Disabilities (OMRDD) concerning Commission jurisdiction over new and emerging service modalities that are funded, but not certified, by the offices.**

Proposed to OMH that the Commission develop clinical case studies of individuals who benefitted from its new community services initiatives which would profile the unique bundlings of services which worked for the individuals so that other agencies can replicate them.

As an outgrowth of the 1999 Promise of Opportunity Conference, assisted in hosting regional forums across the State during which local agencies could discuss and seek solutions to challenges in creating truly person-centered programs and services within OMRDD's expanding service delivery system.

With OMRDD and several other agencies, and also as an outgrowth of the Promise of Opportunity Conference, secured a grant for a distance learning program (NYSDEALS) which would enable new staff being hired for the evolving MR/DD service system to learn critical skills, such as medication administration, incident reporting, etc.

Served on the Oversight Committee for OMRDD's NYS-CARES initiative.

### **Planned Activities 2002:**

Continue the dialogue with OMH and OMRDD over the Commission's access to new service modalities.

Commence a multi-bureau fact-finding survey of OMH's intensive case management program.

Develop best-practice case studies focusing on individuals well served by OMH's single point of access system who benefitted from unique bundlings of services, as proposed to OMH in 2001 and described above.

Conduct policy research on the feasibility of using HUD funds for mental health housing needs.

Continue work on the distance learning project for MR/DD employees (NYSDEALS).

Remain an active participant on the NYS-Cares Oversight Committee.

### **Goal 3: To Ensure That Persons with Mental Disabilities Served Primarily by Non-Mental Hygiene Agencies Receive Services That Effectively Address Their Needs.**

#### **Objectives:**

- Identify service systems outside the mental hygiene system which serve and significantly impact on the lives of persons with mental disabilities.
- Identify the needs of persons with mental disabilities within those systems.
- Assess how well those systems address the needs of these individuals.

#### **Accomplishments 2001:**

Focused on two service systems outside the traditional mental hygiene system which serve significant numbers of individuals with mental disabilities, continuing and expanding our work in the adult home system, and learning more about the criminal justice system.

#### **In the Adult Home Arena:**

Staffed and trained an adult home team to assist the Commission in visiting and inspecting adult homes. Conducted initial and follow-up reviews of 24 adult homes serving nearly 3,000 persons. Additionally, 227 complaints were acted on

regarding conditions in 22 adult homes, which resulted in site visits to seven of those homes. Reports of findings shared with adult home operators and the Department of Health (DOH) and OMH.

During 2001, DOH, OMH, the Governor's Office, the Division of the Budget and other governmental and advocacy bodies - including, but not limited to, the Mental Health Action Network, the NYS Association for Community Living, and the Conference of Local Mental Hygiene Directors - were briefed on the Commission's findings.

Also in 2001, the six homes identified as the poorest by the Commission in reviews during 2000 were either closed, placed under receivership, or are facing revocations of operating certificates or other serious enforcement action.

Participated in an interagency workgroup with DOH and OMH to identify and propose remedies for systemic problems associated with adult homes serving individuals with mental disabilities. A work plan with recommendations was developed for agency commissioners by the workgroup.

Developed and successfully piloted a medication management review protocol to be used by DOH and OMH in the joint review of problematic adult homes. Began work on a review protocol for case management services in homes.

Signed an MOU with DOH and OMH regarding joint inspections and information sharing. Also commenced a review of the standards that would prohibit the referral of individuals to problem homes to ensure their effective implementation.

Provided DOH technical assistance in assessing the character and competence of certain adult home operators.

Completed a comprehensive fiscal and programmatic report on the operations of Ocean House and assisted other State agencies and law enforcement authorities in their investigations relative to this program.

Conducted and now finalizing the "Layering of Services" study, which is a systemic review of the costs and adequacy of services provided to residents with mental disabilities living in the State's largest adult homes.

Encouraged our contract advocacy offices to continue their representation of individuals residing in adult homes.

### **In the Criminal Justice Arena:**

Solicited the input of our contract advocacy agencies on the nature of complaints and issues they see arising from jails and prisons. One agency, Disability Advocates Inc., embarked on a project of visiting Special Housing Units (SHUs) of State prisons to assess conditions and inform individuals with disabilities of their rights; a second contractor, New York Lawyers for the Public Interest, is doing similar work in NYC jails.

Convened a series of meetings with representatives of various criminal justice and mental hygiene agencies and advocacy groups to educate Commission staff on issues impacting on individuals with mental disabilities within the criminal justice system.

Hosted a meeting of senior staff from the State's criminal justice and mental hygiene agencies to discuss best practices and continuing challenges in serving individuals with mental disabilities in the criminal justice system particularly in the areas of alternatives to incarceration, services during incarceration and release planning. The role of the Commission in assisting these agencies in their efforts was also discussed.

Shared the information gleaned from the above-referenced interagency meetings

on criminal justice matters with all interested Commission staff.

### **Planned Activities for 2002:**

Continue our independent site visiting and complaint activities in adult homes as well as our work with the interagency workgroup to address the broader issues impacting on individuals living in adult homes.

Begin briefing key parties on the significance of the programmatic and fiscal findings emerging from our "Layering of Services" study in adult homes.

While continuing to learn more about individuals with mental disabilities in the criminal justice system, initiate a person-centered review of the individuals (and their experiences) who cycle through Central New York Psychiatric Center and the Satellite Clinics of State correctional facilities, visiting a couple of Special Housing Units if possible.

Enter into a dialogue with the Division of Probation and Correctional Alternatives to explore ways in which the Commission can be of assistance to that agency in its efforts to appropriately divert individuals with disabilities from incarceration.

### **Goal 4: To Advocate for and Empower Persons with Disabilities in Exercising their Human, Civil and Legal Rights.**

#### **Objectives:**

- Maintain a statewide system of protection and advocacy services.
- Advance the rights and quality of life for individuals with disabilities through systemic advocacy.
- Provide individuals who advocate for themselves or others with necessary information and tools.
- Support individuals with mental disabilities and other appropriate parties in providing informed consent for major medical procedures.

#### **Accomplishments 2001:**

Maintained and supported a statewide network of legal and administrative advocacy agencies to provide protection and advocacy (P&A) services for individuals with mental and other disabilities.

Embarked on establishing a new P&A service for individuals who are Social Security beneficiaries.

Recruited the Mental Health Association (MHA) to join in our Disabilities Awareness Program; members of county chapters of the MHA will replicate the Commission's Disabilities Awareness work in their local schools.

Established liaisons with staff of local DDSOs who will incorporate parts of the Commission's Educational Advocacy Training program into their work with families.

Completed the statewide expansion of the Surrogate Decision Making Program, by recruiting and training volunteers, educating program operators and contracting with Dispute Resolution Centers in the western region of New York, thus making this service available for certain disabled individuals throughout New York who require major medical care but may lack the capacity to consent and have no authorized surrogate.

Handled 882 SDMC cases during the first 11 months of 2001, convening hearings for 89% of the cases.

#### **Planned Activities 2002:**

Continue activities necessary to support a statewide network of contract advocacy agencies.

Move toward a five-year contracting system for P&A services which would entail soliciting requests for proposals and establishing performance standards/outcome measures.

Increase the number of persons served by the SDMC program and promote timely decision making for persons with mental disabilities who require non-emergency medical care by engaging in public outreach activities, recruiting volunteers and training volunteers and provider agencies.

#### **Goal 5: To Promote Excellence and to Assist Those Serving Persons with Disabilities by Providing Them with Information, Training and Technical Assistance.**

##### **Objectives:**

- Identify and disseminate information on best practices in serving individuals with disabilities.
- Provide training and technical assistance to service providers.
- Assist Boards of Visitors to carry out their duties effectively.

#### **Accomplishments 2001:**

Developed a link on our website to various other sites detailing best practices in the area of board governance for not-for-profit agencies.

Launched a regular newsletter column, *Accountant's Corner*, to continually disseminate information on sound financial practices to program operators.

Commenced work on developing a best practice document on medication administration practices in adult homes.

Through the Speakers Bureau, provided 29 in-service training sessions for agencies on topics including but not limited to: guardianship, abuse investigations & incident management, sexuality and consent issues, restraint, advanced directives, and the Americans with Disabilities Act (ADA).

Provided orientation training and ongoing technical assistance for the State's Boards of Visitors.

#### **Planned Activities 2002:**

Continue above mentioned training activities.

Recruit additional Commission staff to join the Speakers Bureau. Additionally, expand the array of topics about which Commission staff can present to interested audiences.

Develop a coordinated plan for a Commission presence at some of the service industry's major, typically annual conferences. The plan will

address the role the Commission will play (which can range from "personing" an information booth to offering papers and presentations) and what staff or Bureau will be responsible.

#### **Goal 6: To Foster Public Awareness of the Commission's Mission and Services.**

##### **Objectives:**

- Develop strategies to increase the general public's knowledge of Commission services.
- Inform persons with disabilities, service providers, government officials and other concerned parties of the Commission's services.
- Target outreach efforts to populations which, historically, have not used Commission services.

##### **Accomplishments 2001:**

Created a standing committee on public awareness to advise the Commission on steps it can take to bolster the public's understanding of our availability and services.

Sponsored a one-day workshop, which will be repeated periodically, for Legislators and legislative staff explaining the Commission's services and how the agency can be of help to them and their constituents.

Developed an audio-visual power-point infomercial about the Commission for use at conferences or like gatherings of individuals involved or interested in the field of disabilities.

Upgraded our website in conjunction with the Governor's e-government, e-commerce initiative.

Commenced a review of our intake activities over time to determine whether there are program types or geographic regions that are under-represented and may require targeted outreach.

Commenced a review of all Commission brochures to determine their currency and the need for additional materials.

Initiated a two year cycle of regional forums throughout the State in which the Chair and appropriate staff will meet with interested parties to explain Commission services and activities and solicit their concerns.

##### **Planned Activities for 2002:**

Continue above referenced outreach efforts, including website upgrades, the one-day Legislative workshop, and regional forums.

Target an informational outreach effort to those program types or areas of the State which appear to be under-represented in our review of intake activities during 2001.

As previously reported, develop an agency-wide plan for a Commission presence at some of the service industry's major, typically annual conferences.

#### **Goal 7: To Sustain and Continually Strengthen the Commission's Ability to Fulfill its Mission.**

### **Objectives:**

- **Recruit and maintain a workforce that is qualified, committed, well-trained and culturally diverse and sensitive.**
- **Maximize opportunities for growth and development for agency staff.**
- **Seize technological developments and opportunities.**
- **Promote a collaborative work environment conducive to staff achieving shared goals.**
- **Improve communication within the Commission.**

### **Accomplishments 2001:**

**Reinvigorated the agency's performance management system with an increased focus on employees' self-identified needs for growth and development.**

**Provided training for all supervisors in the performance management system.**

**Paid for 61 staff to attend over twenty conferences on topics including, but not limited to, psychotropic medications, nursing practices, depression, trauma, legal issues and computer skills. Advertised and promoted staff's attendance at grand rounds offered by local hospitals.**

**Clinical/Programmatic study groups have been established within QAIB focusing on issues such as pharmacology, children's services, criminal justice matters, etc. These groups have recently been opened to participation by any interested Commission staff.**

**Two Policy/Legal forums were offered to all interested Commission staff, one on Kendra's Law presented by the OMH and one on Special Housing Units presented by Disability Advocates, Inc.**

**An agency intranet was designed and brought on-line to aid in internal communications by providing staff agency news, opportunities to post their activities and observations, and access to Commission policies, forms, etc.**

### **Planned Activities for 2002:**

**Keep the reinvigorated performance management system on track. Continue the internal study groups and Policy/Legal forums.**

**While fiscal constraints require careful monitoring of conference attendance, such will not be prohibited. However efforts will be made to take advantage of free or low-cost conferences and grand rounds. Bureau Directors and supervisors will also ensure that professional growth needs are identified in staff's performance programs and that, wherever possible, information gleaned through an individuals attendance at a conference is shared with his/her colleagues.**

**Promote the expansion of cross-bureau activities to assure a comprehensive approach to oversight and quality improvement initiatives, e.g., QAIB-Fiscal reviews, Policy-Fiscal reviews, etc.**



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