Informational Letter

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<td>To:</td>
<td>Commissioners of Social Services</td>
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<td>Executive Directors of Voluntary Authorized Agencies</td>
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<td>Issuing Division/Office:</td>
<td>Legal Affairs</td>
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<td>Date:</td>
<td>May 3, 2013</td>
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<td>Subject:</td>
<td>Protection of People with Special Needs Act and the Formation of the Justice Center and the Vulnerable Persons Central Register</td>
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<td>Suggested Distribution:</td>
<td>Directors of Social Services</td>
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<td>All Programs in Voluntary Agencies</td>
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<td>Division of Child Welfare and Community Services</td>
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<td>Staff Development Coordinators</td>
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<td>Contact Person(s):</td>
<td>Emily Bray 518-474-3283</td>
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Filing References

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<td>Chapter 501 of the Laws of 2012</td>
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I. Purpose

The purpose of the Informational Letter is to inform local social services districts and other agencies about the Protection of People with Special Needs Act, Chapter Law 501 of the Laws of 2012. This is the first communication regarding this legislation.

The chapter law is found on the legislative website:

http://public.leginfo.state.ny.us/menuf.cgi

This Act creates a new state agency named the Justice Center for the Protection of People with Special Needs (Justice Center). The Act amends the county law, the correction law, the criminal procedure law, the education law, the executive law, the mental hygiene law, the penal law, the public health law, the social services law, and the vehicle and traffic law all toward the end of providing better protection of vulnerable persons.

The law goes into effect June 30, 2013.

II. Background

This legislation is in response to a desire to strengthen and standardize the safety net for vulnerable persons, adults and children alike, who are receiving residential care from New York's human service agencies and programs. This legislation creates a set of uniform safeguards, to be implemented by a Justice Center whose primary focus will be on the protection of vulnerable persons.

The Justice Center also will develop a register that will contain the names of individuals found responsible for egregious or repeated acts of abuse or neglect. Before being placed on the register, such individuals will have a right to challenge that finding, but once on the register they will be forever barred from future employment in the care of vulnerable persons.

Employees found responsible for less serious acts shall be subjected to progressive discipline, including retraining and other actions necessary to facilitate their safe return to the workplace.

So that individuals who work with vulnerable persons are aware of their obligations to assist such persons to lead safe, vital and productive lives, the legislation requires the Justice Center to develop a code of conduct for workers who have regular contact with vulnerable persons. This code of conduct will serve as a guide to such workers by
containing the basic ethical standards to which all direct support workers should subscribe and be held accountable.

The Justice Center will also operate a statewide hotline to which certain persons will be mandated to report abuse, neglect and significant incidents involving vulnerable persons being served in certain residential and non-residential facilities and programs.

Accordingly, the purpose of this legislation is to create a durable set of consistent safeguards for all vulnerable persons that will protect them against abuse, neglect and other conduct that may jeopardize their health, safety and welfare, and to provide fair treatment to the employees upon whom they depend.

A copy of the law and draft Justice Center regulations is available on the Justice Center website at:  http://www.justicecenter.ny.gov.

III. Program Implications

Programs affected

The changes in the law will affect all voluntary agencies that run residential programs licensed or certified by OCFS, as well as other types of programs licensed or certified by OCFS, including runaway and homeless youth programs, family type homes for adults, detention programs, juvenile justice programs, institutions, group residences, group homes, and agency operated boarding homes including supervised independent living programs. However, the changes will not affect residential programs for victims of domestic violence.

Any local department of social services that runs a detention program or has a contract with an authorized agency for detention services or has a contract(s) for care of foster children in out of state facilities will also be impacted.

There are additional impacts to entities licensed or certified by Office of Alcoholism and Substance Abuse Services, Office for Persons with Developmental Disabilities, Office of Mental Health, New York State Education Department and the Department of Health, including certain children’s summer camp programs. Those are not discussed herein.

Changes:

Definitions: The law includes new definitions in section 488 of the Social Services Law. Definitions in the section include facility or provider agency, physical abuse, sexual abuse, psychological abuse, neglect, significant incident, reportable incident, mandated reporter, and custodian. Attached to this INF is a copy of Section 488 of the SSL.

Vulnerable Persons: means a person who, due to physical or cognitive disabilities, or the need for services or placement, is receiving services from a facility or provider agency.
This includes the children or adults in the residential programs we license, certify or operate.

**Reporting of Abuse or Neglect:** Institutional child abuse and neglect reports will no longer be part of the jurisdiction of the Statewide Central Register of Child Abuse and Maltreatment (SCR). Any concerns regarding Abuse or Neglect of a child in residential care must be reported to the Vulnerable Persons Central Register (VPCR). The VPCR will also register reports of suspected abuse or neglect of persons residing in Family Type Homes for Adults (FTHA).

**Reporting of Significant Incidents:** Mandated Reporters will also be required to report significant incidents to the VPCR.

**Investigation of Abuse or Neglect:** Reports registered by the VPCR will be forwarded to Justice Center investigative staff or to investigative staff at the State Agency that licenses, certifies or operates the facility or provider agency.

**Administrative Appeals:** Any person who is a subject in a substantiated report with the VPCR will have a right to appeal that substantiated finding through an administrative appeal process with the Justice Center.

**Criminal History Background Checks:** Prospective employees and volunteers at facility and provider agencies, as defined in the law, must be subject to a criminal history background check (fingerprinting). The Justice Center will submit the fingerprints and review and evaluate the criminal history information that is returned.

**Staff Exclusion List or Review of Applicants:** All facility and provider agencies are required to check applicants for employment and volunteer positions as well as contractors and consultants, with the Register of Substantiated Category One Cases of Abuse or Neglect (“staff exclusion list”) maintained by VPCR before determining whether to hire or otherwise allow the person contact with any service recipient. If an applicant is listed on the staff exclusion list, a facility or provider agency may not hire such a person for a position in which the person would have the potential for regular and substantial contact with a service recipient.

Programs required to check the staff exclusion list will conduct such check before conducting a database check with the Statewide Central Register (SCR). If the applicant is listed on the staff exclusion list, no database check with the SCR is required.

**Out-of-State Providers:** Out-of-state facilities or programs that provide services to foster children via a contract with a local department of social services will be required to report abuse or neglect and significant incidents regarding the foster child in their care.
Contracts with such out of state facilities and programs will have to be amended to require this reporting.

**Records Access**: The Justice Center will receive requests from the public for the records of facilities or provider agencies that relate to investigations of abuse or neglect. The Justice Center will secure the records from the facility or provider agency and determine if the records are available for public inspection under Section 490(6) of the Social Services Law.

**Incident Management**: Facilities or provider agencies shall establish policies or practices regarding the identification, reporting, investigation and follow-up on any reportable incidents in compliance with the Justice Center regulations or guidance. Data regarding these incidents should be collected and shared with the OCFS and the Justice Center as requested.

**Incident Review Committees**: Facilities or provider agencies must establish incident review committees. Each committee should be composed of members of the governing body of the facility or provider agency and other persons identified by the director of the facility or provider agency including some members of the following: direct support staff, licensed health care practitioners, service recipients and representatives of family, consumer and other advocacy organizations, but not the director of the facility or provider agency.

Incident review committee requirements may be waived by OCFS upon written application, based on size or the facility or provider agency or other relevant factors.

Incident review committee obligations include: (1) review of the timeliness, thoroughness and appropriateness of the facility or provider agency’s response to reportable incidents; (2) make recommendations regarding the response to a reportable incident to the director of the facility or provider agency; (3) review incident trends and patterns concerning reportable incidents; (4) make recommendations to the director of the facility or provider agency to assist in reducing reportable incidents;


Issued By:
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Division/Office: Legal Affairs
§ 488. Definitions
Effective: June 30, 2013

As used in this article, the following terms shall have the following meanings:

1. “Reportable incident” shall mean the following conduct that a mandated reporter is required to report to the vulnerable persons’ central register:

(a) “Physical abuse,” which shall mean conduct by a custodian intentionally or recklessly causing, by physical contact, physical injury or serious or protracted impairment of the physical, mental or emotional condition of a service recipient or causing the likelihood of such injury or impairment. Such conduct may include but shall not be limited to: slapping, hitting, kicking, biting, choking, smothering, shoving, dragging, throwing, punching, shaking, burning, cutting or the use of corporal punishment. Physical abuse shall not include reasonable emergency interventions necessary to protect the safety of any person.

(b) “Sexual abuse,” which shall mean any conduct by a custodian that subjects a person receiving services to any offense defined in article one hundred thirty or section 255.25, 255.26 or 255.27 of the penal law; or any conduct or communication by such custodian that allows, permits, uses or encourages a service recipient to engage in any act described in articles two hundred thirty or two hundred sixty-three of the penal law. For purposes of this paragraph only, a person with a developmental disability who is or was receiving services and is also an employee or volunteer of a service provider shall not be considered a custodian if he or she has sexual contact with another service recipient who is a consenting adult who has consented to such contact.

(c) “Psychological abuse,” which shall mean conduct by a custodian intentionally or recklessly causing, by verbal or nonverbal conduct, a substantial diminution of a service recipient’s emotional, social or behavioral development or condition, supported by a clinical assessment performed by a physician, psychologist, psychiatric nurse practitioner, licensed clinical or master social worker or licensed mental health counselor, or causing the likelihood of such diminution. Such conduct may include but shall not be limited to intimidation, threats, the display of a weapon or other object that could reasonably be perceived by a service recipient as a means for infliction of pain or injury, in a manner that constitutes a threat of physical pain or injury, taunts, derogatory comments or ridicule.

(d) “Deliberate inappropriate use of restraints,” which shall mean the use of a restraint when the technique that is used, the amount of force that is used or the situation in which the restraint is used is deliberately inconsistent with a service recipient’s individual treatment plan or behavioral intervention plan, generally accepted treatment practices and/or applicable federal or state laws, regulations or policies, except when the restraint is used as a reasonable emergency intervention to prevent imminent risk of harm to a person receiving services or to any other person. For purposes of this subdivision, a “restraint” shall include the use of any manual, pharmacological or mechanical measure or device to immobilize or limit the ability of a person receiving services to freely move his or her arms, legs or body.
(e) “Use of aversive conditioning,” which shall mean the application of a physical stimulus that is intended to induce pain or discomfort in order to modify or change the behavior of a person receiving services in the absence of a person-specific authorization by the operating, licensing or certifying state agency pursuant to governing state agency regulations. Aversive conditioning may include but is not limited to, the use of physical stimuli such as noxious odors, noxious tastes, blindfolds, the withholding of meals and the provision of substitute foods in an unpalatable form and movement limitations used as punishment, including but not limited to helmets and mechanical restraint devices.

(f) “Obstruction of reports of reportable incidents,” which shall mean conduct by a custodian that impedes the discovery, reporting or investigation of the treatment of a service recipient by falsifying records related to the safety, treatment or supervision of a service recipient, actively persuading a mandated reporter from making a report of a reportable incident to the statewide vulnerable persons’ central register with the intent to suppress the reporting of the investigation of such incident, intentionally making a false statement or intentionally withholding material information during an investigation into such a report; intentional failure of a supervisor or manager to act upon such a report in accordance with governing state agency regulations, policies or procedures; or, for a mandated reporter who is a custodian as defined in subdivision two of this section, failing to report a reportable incident upon discovery.

(g) “Unlawful use or administration of a controlled substance,” which shall mean any administration by a custodian to a service recipient of: a controlled substance as defined by article thirty-three of the public health law, without a prescription; or other medication not approved for any use by the federal food and drug administration. It also shall include a custodian unlawfully using or distributing a controlled substance as defined by article thirty-three of the public health law, at the workplace or while on duty.

(h) “Neglect,” which shall mean any action, inaction or lack of attention that breaches a custodian’s duty and that results in or is likely to result in physical injury or serious or protracted impairment of the physical, mental or emotional condition of a service recipient. Neglect shall include, but is not limited to: (i) failure to provide proper supervision, including a lack of proper supervision that results in conduct between persons receiving services that would constitute abuse as described in paragraphs (a) through (g) of this subdivision if committed by a custodian; (ii) failure to provide adequate food, clothing, shelter, medical, dental, optometric or surgical care, consistent with the rules or regulations promulgated by the state agency operating, certifying or supervising the facility or provider agency, provided that the facility or provider agency has reasonable access to the provision of such services and that necessary consents to any such medical, dental, optometric or surgical treatment have been sought and obtained from the appropriate individuals; or (iii) failure to provide access to educational instruction, by a custodian with a duty to ensure that an individual receives access to such instruction in accordance with the provisions of part one of article sixty-five of the education law and/or the individual’s individualized education program.

(i) “Significant incident” shall mean an incident, other than an incident of abuse or neglect, that because of its severity or the sensitivity of the situation may result in, or has the reasonably
foreseeable potential to result in, harm to the health, safety or welfare of a person receiving services and shall include but shall not be limited to:

(1) conduct between persons receiving services that would constitute abuse as described in paragraphs (a) through (g) of this subdivision if committed by a custodian; or

(2) conduct on the part of a custodian, which is inconsistent with a service recipient’s individual treatment plan or individualized educational program, generally accepted treatment practices and/or applicable federal or state laws, regulations or policies and which impairs or creates a reasonably foreseeable potential to impair the health, safety or welfare of a person receiving services, including but not limited to:

(A) unauthorized seclusion, which shall mean the placement of a person receiving services in a room or area from which he or she cannot, or perceives that he or she cannot, leave at will;

(B) unauthorized use of time-out, which shall mean the use of a procedure in which a person receiving services is removed from regular programming and isolated in a room or area for the convenience of a custodian, or as a substitute for programming but shall not include the use of a time-out as an emergency intervention to protect the health or safety of the individual or other persons;

(C) except as provided for in paragraph (g) of subdivision one of this section, the administration of a prescribed or over-the-counter medication, which is inconsistent with a prescription or order issued for a service recipient by a licensed, qualified health care practitioner, and which has an adverse effect on a service recipient. For purposes of this paragraph, “adverse effect” shall mean the unanticipated and undesirable side effect from the administration of a particular medication which unfavorably affects the well-being of a service recipient;

(D) inappropriate use of restraints, which shall mean the use of a restraint when the technique that is used, the amount of force that is used or the situation in which the restraint is used is inconsistent with a service recipient’s individual plan, generally accepted treatment practices and/or applicable federal or state laws, regulations or policies. For the purposes of this subdivision, a “restraint” shall include the use of any manual, pharmacological or mechanical measure or device to immobilize or limit the ability of a person receiving services to freely move his or her arms, legs or body; or

(3) any other conduct identified in regulations of the state oversight agency, pursuant to guidelines or standards established by the executive director.

2. “Custodian” means a director, operator, employee or volunteer of a facility or provider agency; or a consultant or an employee or volunteer of a corporation, partnership, organization or governmental entity which provides goods or services to a facility or provider agency pursuant to contract or other arrangement that permits such person to have regular and substantial contact with individuals who are cared for by the facility or provider agency.
3. “Executive director” shall mean the executive director of the justice center for the protection of people with special needs as established by article twenty of the executive law.

4. “Facility” or “provider agency” shall mean:

(a) a facility or program in which services are provided and which is operated, licensed or certified by the office of mental health, the office for people with developmental disabilities or the office of alcoholism and substance abuse services, including but not limited to psychiatric centers, inpatient psychiatric units of a general hospital, developmental centers, intermediate care facilities, community residences, group homes and family care homes, provided, however, that such term shall not include a secure treatment facility as defined in section 10.03 of the mental hygiene law, or services provided in programs or facilities that are operated by the office of mental health and located in state correctional facilities under the jurisdiction of the department of corrections and community supervision;

(b) any program or facility that is operated by the office of children and family services for juvenile delinquents or juvenile offenders placed in the custody of the commissioner of such office and any residential programs or facilities licensed or certified by the office of children and family services, excluding foster family homes and residential programs for victims of domestic violence;

(c) adult care facilities, which shall mean adult homes or enriched housing programs licensed pursuant to article seven of this chapter: (i) (A) that have a licensed capacity of eighty or more beds; and (B) in which at least twenty-five percent of the residents are persons with serious mental illness as defined by subdivision fifty-two of section 1.03 of the mental hygiene law; (ii) but not including an adult home or enriched housing program which is authorized to operate fifty-five percent or more of its total licensed capacity of beds as assisted living program beds pursuant to section four hundred sixty-one-l of this chapter;

(d) overnight summer day and traveling summer day camps for children with developmental disabilities as defined in regulations promulgated by the commissioner of health; or

(e) the New York state school for the blind and the New York state school for the deaf, which operate pursuant to articles eighty-seven and eighty-eight of the education law; an institution for the instruction of the deaf and the blind which has a residential component and is subject to the visitation of the commissioner of education pursuant to article eighty-five of the education law with respect to its day and residential components; special act school districts serving students with disabilities; or in-state private schools which have been approved by the commissioner of education for special education services or programs, and which have a residential program, including a school approved on a child-specific basis for emergency interim placements pursuant to governing state regulations, with respect to its day and residential components.

4-a. “State oversight agency” shall mean the state agency that operates, licenses or certifies an applicable facility or provider agency; provided however that such term shall only include the following entities: the office of mental health, the office for people with developmental
disabilities, the office of alcoholism and substance abuse services, the office of children and family services, the department of health and the state education department. “State oversight agency” does not include agencies that are certification agencies pursuant to federal law or regulation.

5. “Mandated reporter” shall mean a custodian or a human services professional, but shall not include a service recipient.

5-a. “Human services professional” shall mean any: physician; registered physician assistant; surgeon; medical examiner; coroner; dentist; dental hygienist; osteopath; optometrist; chiropractor; podiatrist; resident; intern; psychologist; registered nurse; licensed practical nurse; nurse practitioner; social worker; emergency medical technician; licensed creative arts therapist; licensed marriage and family therapist; licensed mental health counselor; licensed psychoanalyst; licensed speech/language pathologist or audiologist; licensed physical therapist; licensed occupational therapist; hospital personnel engaged in the admission, examination, care or treatment of persons; Christian Science practitioner; school official, which includes but is not limited to school teacher, school guidance counselor, school psychologist, school social worker, school nurse, school administrator or other school personnel required to hold a teaching or administrative license or certificate; social services worker; any other child care or foster care worker; mental health professional; person credentialed by the office of alcoholism and substance abuse services; peace officer; police officer; district attorney or assistant district attorney; investigator employed in the office of a district attorney; or other law enforcement official.

6. “Physical injury” and “impairment of physical condition” shall mean any confirmed harm, hurt or damage resulting in a significant worsening or diminution of an individual’s physical condition.

7. “Delegate investigatory entity” shall mean a facility or provider agency, or any other entity authorized by the regulations of a state oversight agency or the justice center for the protection of people with special needs to conduct an investigation of a reportable incident.

8. “Justice center” shall mean the justice center for the protection of people with special needs.

9. “Person receiving services,” or “service recipient” shall mean an individual who resides or is an inpatient in a residential facility or who receives services from a facility or provider agency.

10. “Personal representative” shall mean a person authorized under state, tribal, military or other applicable law to act on behalf of a vulnerable person in making health care decisions or, for programs that serve children under the jurisdiction of the state education department or the office of children and family services, the service recipient’s parent, guardian or other person legally responsible for such person.

11. “Abuse or neglect” shall mean the conduct described in paragraphs (a) through (h) of subdivision one of this section.
12. “Subject of the report” shall mean a custodian, as defined in subdivision two of this section, who is reported to the vulnerable persons’ central register for the alleged abuse or neglect of a vulnerable person as defined in subdivision eleven of this section.

13. “Other persons named in the report” shall mean and be limited to the following persons who are named in a report to the vulnerable persons’ central register other than the subject of the report: the service recipient whose care and treatment is the concern of a report to the vulnerable persons’ central register, and the personal representative, if any, as defined in subdivision ten of this section.

14. “Vulnerable persons’ central register” shall mean the statewide central register of reportable incidents involving vulnerable persons, which shall operate in accordance with section four hundred ninety-two of this article.

15. “Vulnerable person” shall mean a person who, due to physical or cognitive disabilities, or the need for services or placement, is receiving services from a facility or provider agency.

16. “Intentionally” and “recklessly” shall have the same meanings as provided in subdivisions one and three of section 15.05 of the penal law.