

Date: 3/7/23

Dear Families,

Enclosed you will find the "Individual's Rights and Responsibilities," "Informal Resolution Process" and "Grievance Procedure." New York State regulations mandate all persons receiving services from Saratoga Bridges and/or their family/advocate must receive a copy of these Rights and the process for filing a grievance.

Notice of these Rights, the Informal Resolution Process, and Grievance Procedures shall only be provided to you as follows:

- Upon admission to and/or enrollment in Saratoga Bridges services
- When the person's rights have been limited
- When there are amendments to the Rights & Responsibilities regulations
- Upon your request
- If there is a change in advocacy representation

Please note: You will not receive an annual copy of this policy unless you request it.

Also enclosed is a "Guide for Access to Mental Hygiene Records in New York State." This guide details the rights of "Qualified Persons" in New York State to access certain investigative reports covered under Jonathan's Law. Under Jonathan's Law, the "Qualified Person" has the right to request the incident report, be offered the opportunity to have a meeting with the Agency Executive Director or designee to discuss the incident and receive a 10-day action report on the measures taken in response to the incident. In cases of allegations of abuse, the "Qualified Person" has the right to access a copy of the investigative report. Any incident reports and investigative reports accessed will be redacted. Under the law, the request for incident reports and investigative reports must be made in writing.

Written requests can be sent to:

Quality Assurance Director Saratoga Bridges 16 Saratoga Bridges Blvd. Ballston Spa, New York 12020 518-587-0723 ext. 1229

Please review the enclosed policies and keep them for your records. However, we request that you sign the enclosed signature page and return it to Saratoga Bridges in the enclosed self addressed envelope. Signing this form only indicates that you have received a copy of the policy and read it, signing the form does not necessarily indicate that you agree with the policies.

If you have any questions or concerns, please feel free to contact me at 518-587-0723 ext 1207.

Sincerely,

Dorothy Broekhuizen Chief Operating Officer Saratoga Bridges

Individual Rights

- 1. You have the same rights afforded to all citizens of the United States of America.
- 2. You have the right to participate in your program plan. The plan should consider your interests and be individualized, addressing your need for a meaningful productive life.
- **3.** You have the right to object to any aspect of your program plan. You have the right to request additional services or modifications in the plan.
- **4.** You have the right to have your requests, concerns or suggestions addressed formally. There is a process available to you to resolve concerns if needed (Grievance Procedure). You have the right to choose to whom you wish to express your concerns.
- **5.** You have the right to respect, and dignity provided to all people regardless of developmental disability, religion, race, gender, age, emotional disability, physical disability, or sexual orientation.
- **6.** You have the right to receive respectful, competent, assistance and guidance from skillful and courteous staff.
- 7. You have the right to invite others to attend your program planning meetings. You have the right to ask that others do not attend your meeting.
- **8.** You have the right to be informed upon admission of services and activities Saratoga Bridges will provide.
- **9.** You have the right to confidentiality regarding all aspects of your life and to be free of commercial and financial exploitation.
- 10. You have the right to be free from corporal punishment, physical and psychological abuse, including unnecessary restraint. All Saratoga Bridges employees are mandated by law to report any suspected incidents and /or neglect to the appropriate authorities.
- 11. You have the right to any legal and civil right without regard to developmental, physical, or emotional disability.
- **12.** You have the right to receive visitors at reasonable times in your home and at work.
- 13. You have the right to be free from excessive or unnecessary medications. You have the right to refuse medication.
- **14.** You have the right to privacy in all aspects of your personal hygiene and sleeping.
- **15.** You have the right to vote and participate in civic activities.
- **16.** You have the right to participate if desired in the religion of your choice.
- 17. You have the right to a safe, clean home and work environment.
- **18.** You have the right to appropriate and humane healthcare and the opportunity to the extent possible, to have input either personally or through parents or guardians, or correspondent to participate in the choice of a physician and dentist, or the opportunity to obtain a second opinion.

- **19.** You have the right to create a healthcare proxy.
- **20.** You have the right to make, or have made on your behalf, an informed decision regarding cardiopulmonary resuscitation (CPR), in accordance with provision of Article 29-B of the Public Health Law.
- 21. You have the right to be free from discrimination, or adverse action due to being tested for or diagnosed with any communicable disease (such as HIV, AIDS, or Hepatitis).
- **22.** You have the right to a diet that is nutritious and offers choice.
- 23. You have the right to express grievances, concerns, and suggestions without fear of reprisal (see Grievance Process).
- 24. You can request an alternative residential setting whether a new residence or change of room and involvement in the decisions regarding such changes.
- **25.** You can request a different day program/room and involvement in such changes.
- **26.** You have the right to your own bank account and to be regularly notified of your financial status and given assistance in using your resources, as appropriate.
- 27. You have the right to your own clothing and personal belongings and to be involved in the selection and purchase of your clothing and other personal belongings.
- **28.** You have the right to receive instruction on sexuality and you have the right to request family planning services.
- **29.** You have the right to privacy in sending and receiving mail.
- **30.** You have the right to access the telephone for personal and confidential conversations.
- 31. You have the right to object to any plans initiated by Saratoga Bridges to reduce, suspend, or discontinue any of your Waiver Services. (Such as Residential Habilitation, Respite, Day Habilitation, Pre-Vocational Services, Supported Employment, Plan of Care Support Services, Family Education and Training etc.) If Saratoga Bridges suggests a change in your Waiver Service, you will be notified in writing, and you will be provided with the specific Grievance Procedure for you to follow if you disagree.
- **32.** None of the above rights can be denied or limited for disciplinary reasons.

<u>Responsibilities</u>

- 1. You have the responsibility to be a good neighbor, roommate, co-worker, and citizen.
- **2.** You have the responsibility to treat others with respect and to respect the possessions and privacy of others.
- **3.** You have the responsibility to co-operate with others in fulfilling the outcomes you have established in your service plan.
- **4.** You have the responsibility to express preferences, desires, and concerns and to participate in the program planning process.
- **5.** You have the responsibility to work towards your personal goals and dreams and to request support in achieving your personal goals and dreams.

6. You have the responsibility to follow rules and guidelines appropriate to the services and supports you receive.

GRIEVANCE PROCEDURES

POLICY:

All people served by Saratoga Bridges cannot be denied the opportunity, either personally or through parent(s), guardian(s), or an advocate -- to express grievances, concerns, or suggestions relative to a right or a responsibility.

The individual receiving services and/or the parent, guardian or advocate has a right to register and resolve grievances and to make recommendations without any type of reprisal or intimidation.

Saratoga Bridges will offer an informal negotiation / resolution process between the objecting party and relevant staff of the agency, including the CEO or her designee. This meeting will include the Person's Care Manager and advocate, as applicable. Saratoga Bridges will include documentation of the results of the process in the Individual case record. Written confirmation of the results of this meeting will be sent to the objecting party by the CEO, whether the issue is resolved or not.

To voice a complaint or grievance related to a right or responsibility, you may contact any of the following parties:

Program Administrators / Program Directors and the CEO of Saratoga Bridges may be contacted at:

Saratoga Bridges 16 Saratoga Bridges Blvd Ballston Spa, NY 12020 (518) 587-0723.

- Director of Capital District DDSO
 Oswald D. Heck Developmental Center
 Balltown and Consaul Roads
 Schenectady, NY 12305-2397
 518-370-7370
- New York State Justice Center for the Protection of Persons with Special Needs 161 Delaware Avenue Delmar, New York 12054 (518) 549-0200

Commissioner
 Office for People with Developmental Disabilities (OPWDD)
 44 Holland Avenue
 Schenectady New York 12305 518-473-9689

appropriate parties as outlined in the proceeding Policy (Procedures for Objection to SARATOGA BRIDGES

Informal Resolution Process

The goal of the Care Manager/QMRP/Program Administrator is to assist the person receiving services and/or their family in attaining their life goals.

When the person or family perceives that their desires and choices are not being addressed, there needs to be a process of problem identification and resolution. The steps outlined below represent the informal resolution process that is available to Person served within Saratoga Bridges. The process is reviewed with each person and/or family at the time of admission, enrollment or when changes occur, and signed by the Care Manager/QMRP and the person and family representatives or advocate.

At any time, the service recipient and/or a family representative may begin this process by one of two methods:

- By having a conversation with the Care Manager/QMRP to identify the problem area(s) of
 concern and requesting a meeting to resolve them. This is the simplest way to resolve
 differences and hopefully would occur as natural part of the conversations between the person
 or family and the Care Manager.
- By calling the Administrator of or Program Director, identifying the area(s) of concern and requesting a meeting to resolve the differences.

The Care Manager/QMRP, considering the schedules of the person and/or family members and Administrator of /Program Director, will identify a time and place for the meeting. The person and family members may request the presence of anyone they see as helping the process. The meeting will be facilitated by the Administrator of /Program Director, who will focus on the following activities:

- Introduction of all meeting participants.
- Clearly stating the purpose of the meeting.
- Obtaining the respective concerns of all participants of the meeting and discussing the steps that would lead to a resolution that reflects the desires and choices of the person and/or family members.
- Formalizing the steps, in writing, that will identify the timelines and each person's responsibilities in the resolution process. This summary will become part of the person's single case record.
- Written confirmation of the results of this meeting will be sent to the objecting party by the Executive Director, whether the issue is resolved or not.

• If a resolution cannot be reached through this informal process, the objecting party will be given the opportunity to submit a formal written objection to Services/Formal Objection process).



Formal Objection to and Appeal of Care Policy and Procedure

Updated 8.26.2022 SRR

Formal Objection to and Appeal of Care Policy and Procedure

POLICY:

It is the policy of Saratoga Bridges to resolve all complaints, grievances, and unresolved issues by initiating our informal complaint resolution process which outlines the steps to take to mediate and come to mutual agreement regarding any outstanding issue informally.

If this process proves to be fruitless and there remains an objection to program planning, care and / or treatment, or planned discontinuance of waiver services or agency-initiated discharge, the following formal objection procedures are to be followed.

Objections, related to facilities or HCBS waiver services, may be initiated regarding: any plan of services, (including an individualized service plan [ISP] [see section 633.99 of this Part]), or part thereof and proposed changes thereto.

- Plans for placement.
- A proposal initiated by the agency/facility to discharge (see section 633.99 of this Part); and
- A proposal to reduce, suspend or discontinue HCBS waiver service(s).

Objections to major medical treatment, for which informed consent is necessary, are not governed by the objection processes of this policy. Rather, refer to section 633.11 of NYCRR.

PROCEDURE:

The following parties may initiate an objection:

- Adult persons receiving services.
- Parents, guardians, correspondents, and advocates of persons receiving services.
- The Mental Hygiene Legal Service.
- Saratoga Bridges as a provider of services.
- Upon such objection, the person or party shall herein be referred to as the objecting party.

A. The person receiving services, and his or her parent, guardian, correspondent, and advocate, as applicable, shall be advised of the mechanism to resolve an objection: upon admission to a facility or enrollment in HCBS waiver services, as changes occur, and upon any substantive amendment to regulation NYCRR 633.12.

In addition, when Saratoga Bridges proposes to reduce, suspend, or discontinue a person's HCBS waiver service(s), Saratoga Bridges shall, in a form and format approved by the commissioner, advise the person, and his or her advocate and Care Manager as applicable, of the proposed changes and of the mechanism for resolving an objection to the proposed changes.

A capable adult person receiving services may refuse the initiation of an objection or subsequent appeal on his or her behalf.

A person, with his or her parent, guardian, correspondent, and advocate as applicable, may select a representative of his or her choice to provide assistance and/or representation, including legal counsel.

The following processes shall be available to resolve an objection:

- 1. There shall be a mechanism available at Saratoga Bridges for informal resolution between the objecting party and relevant staff of the agency, including the chief executive officer or his or her designee. Such process shall include the person's Care Manager and advocate, as applicable.
- 2. Written confirmation of resolution or inability to reach a resolution shall be sent to the objecting party by the chief executive officer.
- 3. If, through this informal mechanism, a resolution cannot be reached, the objecting party shall be given the opportunity to submit a formal written objection requesting a hearing to the appropriate DDRO director.
- 4. Within five days of receipt of a formal written objection, a hearing shall be scheduled, to take place before a hearing officer appointed by the DDRO Director, with no less than 10 days' notice to the involved parties.
- 5. A written decision by the hearing officer shall be sent to the involved parties within 14 days of that hearing.

If any party to the proceeding is not satisfied with the decision, it may be appealed within 10 days to the commissioner, who will issue a final written

decision to all parties within 14 days of receipt of the appeal. The commissioner may, at his or her discretion, send the matter back to the hearing officer for further review.

During the period that an objection is undergoing administrative review:

- A person shall participate in programming mutually agreeable to the objecting party, the agency, the person, and his or her parent, guardian, correspondent, or advocate.
- Every effort feasible shall be made to maintain the person in at least his or her current level of programming; and
- To protect a person's health, safety, or welfare or the health, safety, or welfare of others, nothing herein shall preclude a change in programming for, or the relocation or discharge of a person. However, while an objection to placement or discharge is undergoing administrative review, relocation or discharge shall only take place with the commissioner's approval.
- B. Related to the reduction, suspension, or discontinuance of HCBS waiver services:
 - The agency shall have a process available for informal resolution between the objecting party and relevant staff of the agency, including the chief executive officer or his or her designee. Such process shall include the person's Care Manager and advocate, as applicable. The agency shall include documentation of the result of the process in the person's record.
 - Written notice of the parties' inability to resolve the objection shall be sent
 to the objecting party by the chief executive officer. Such notice shall be
 in a form and format approved by the commissioner, and shall be sent by
 certified mail, return receipt requested, or such other means so that the
 time of receipt of the information can be documented.
 - The objecting party may submit a written objection to the DDRO director requesting administrative review of the reduction, suspension, or discontinuance, within 14 days after the receipt of the notice.
 - The agency shall not reduce, suspend, or discontinue the HCBS waiver service(s) at issue during such 14-day period, unless otherwise agreed to by the parties.

Upon receipt of a written objection requesting an administrative review, the DDRO director or his or her designee shall contact the objecting party and the agency providing the service(s) to mediate resolution of the objection. If there is no resolution within 14 days of receipt of the objection, a hearing shall be scheduled, with no less than 10 days' notice to the involved parties.

The hearing shall be conducted by a hearing officer appointed by the DDRO director. The objecting party and the agency may mutually agree to extend the time periods noted in this clause.

The hearing officer shall issue a written decision to the objecting party and the agency within 14 days after the conclusion of the hearing. Either party may appeal the decision to the commissioner and submit a written reply to the decision within 14 days of its receipt.

The commissioner will issue a final written decision to all parties within 14 days of the last date to appeal. The commissioner may, in his or her discretion, send the matter back to the hearing officer for further review.

During the period that an objection is undergoing administrative review (including an expedited review), the agency shall not reduce, suspend, or discontinue the HCBS waiver service(s) at issue, unless otherwise agreed to by both parties.

When Saratoga Bridges proposes to reduce, suspend, or discontinue the provision of a HCBS waiver service(s) to prevent immediate risk to the health or safety of the person or others: the agency shall make reasonable efforts to alleviate the health and safety risks at issue, and the agency or the objecting party may request an expedited hearing by the following process:

- (1) A written request for the hearing shall be sent by the agency or objecting party to the commissioner. An agency shall also immediately notify the person, parent, guardian, correspondent, and advocate, as applicable, of such request.
- (2) If the commissioner determines that an expedited hearing is warranted, the appropriate DDSO director will schedule a hearing within seven days of the commissioner's determination. The hearing will be held before a hearing officer appointed by the DDSO director. Absent good cause, the parties involved in the objection will receive at least three days' notice of the hearing.
- (3) The hearing officer's recommendation shall be sent to the parties and sent to the commissioner within five days of the conclusion of the hearing. The hearing officer shall advise the parties of their opportunity to send a written reply to the recommendation directly to the commissioner. The commissioner will issue a final written decision as soon as practicable thereafter.

No person or objecting party or a representative of either, shall be denied the opportunity to participate in any hearings pursuant to this section. The person or objecting party or a representative may offer information and ask relevant questions of any parties participating in any such hearing.

During the period that the objection is undergoing administrative review, there shall be no communication between either the agency or the objecting party and either the hearing officer or the commissioner, concerning the objection, except on notice and opportunity for all involved parties to participate.

The commissioner's decision is the final administrative remedy available and may be appealed in accordance with the provisions of article 78 of the Civil Practice Law and Rules.

Treatment may be given, other than treatment for which informed consent is required by applicable regulation, to a person, despite objection, in a situation where the treatment is deemed necessary to avoid serious harm to life or limb of that person or others, at the discretion of the chief executive officer and in accordance with agency/facility or the sponsoring agency policies/procedures.

END OF DOCUMENT

My signature on this page indicates that I have either read or had the following Saratoga Bridges policies explained to me and I have a copy of such in my possession.

Regulation Part 633.4; 633.12

****Individual's Rights & Responsibilities****

****Individual's Grievance Procedure****

****Informal Resolution Process****

Individual's Signature	Date
Parent/Guardian/Correspondent	 Date
Representative of Saratoga Bridges	 Date

Please detach, sign and date and return to Saratoga Bridges, 16 Saratoga Bridges Boulevard, Ballston Spa NY, 12020

Or

Scan and Email to: <u>Sramos@saratogabridges.org or return in the envelope that will</u> be mailed to you



This brochure will assist you in understanding the process for obtaining information about incidents involving persons receiving services. This is a guide and not a legal document. For more details about Jonathan's Law, please consult the resources listed at the end of this brochure.

What is Jonathan's Law?

Jonathan's Law established procedures that facilities must follow to notify parents, siblings and legal guardians of children and adults receiving services of incidents involving their loved ones. It also allows qualified persons to access certain documents pertaining to investigations of reportable incidents.

Who is a qualified person?

Under the law, qualified persons include:

- Parents or other legal guardians of minors;
- Parents, legal guardians, spouses, siblings or adult children of adults who are legally authorized to make health care decisions on behalf of the individual; or
- Adults who have not been determined by a court to be legally incompetent.

What facilities does the law cover?

All facilities operated, licensed or certified by the following state agencies must adhere to the requirements of Jonathan's Law:

- Office for People With Developmental Disabilities (OPWDD)
- Office of Mental Health (OMH)
- Office of Addiction Services and Supports (OASAS)

Where can I find more information or assistance?

- Information about Jonathan's Law can be found in NY Mental Hygiene Law sections 33.23 and 33.25.
- Additional requirements for access to patient records and the redisclosure of such records within the OASAS system can be found in 42 Code of Federal Regulations Part 2.
- Additional requirements for access to records and documents within the OPWDD system can be found in 14 NY Codes, Rules, and Regulations sections 624.6 and 624.8.
- OPWDD's information line is 1-866-946-9733 / TTY: 1-866-933-4889 and the website is www. opwdd.ny.gov
- OPWDD's "Learning About Incidents" brochure contains information about access to records. It is available on OPWDD's website at www. opwdd.ny.gov.
- The Justice Center's Individual and Family Support Unit's toll-free number is 1-800-624-4143 (Voice/Multi-language/TTY) and the email address is supportcoordinator@ iusticecenter.ny.gov

Free translation and language assistance services available in 200+ languages. Deaf and Hard of Hearing please call 1-855-373-2122 (TTY)

Justice Center for the Protection of People with Special Needs

Office for People With Developmental Disabilities

Office of Mental Health

Office of Addiction Services and Supports



A Guide for Individuals, Siblings, Parents and Legal Guardians





What is an "incident" and what is a "reportable incident"?

- An "incident" is defined as an accident or injury that affects the health or safety of a person receiving services.
- A "significant incident" is defined as an incident that has the potential to result in harm to the health, safety or welfare of a person receiving services.
- A "reportable incident" is defined as conduct that a mandated reporter is required to report to the NYS Justice Center for the Protection of People with Special Needs (Justice Center). Such conduct includes abuse, neglect, and significant incidents.

Who will be notified if an incident has occurred?

- A facility must inform the qualified person(s) by telephone of accidents or injuries that affect the health or safety of an individual receiving services within 24 hours of the initial report of the incident.
- If requested by a qualified person, the facility must promptly provide a copy of the written incident report.
- The facility must also offer to meet with the qualified person to further discuss the incident.

Who will be informed of actions taken to address an incident?

The director of the facility must provide the qualified person(s) with a written report on the immediate actions taken to address the incident (e.g., steps taken to protect the involved individual) within 10 days of the initial report of the incident.

Are other records or documents about the incident available?

Jonathan's Law requires facilities to provide records and documents pertaining to allegations and investigations into abuse, neglect, and significant incidents (reportable incidents) to the qualified person(s) upon written request.

At the conclusion of an investigation of an abuse or neglect incident reported to the Justice Center, the Justice Center will notify the service recipient or their personal representative of the finding of the investigation.

Reports of abuse and neglect are either substantiated or unsubstantiated.

Upon written request to the facility, the qualified person(s) may obtain records and documents pertaining to the investigation of an abuse or neglect incident reported to the Justice Center within 21 days of the conclusion of the investigation.

Can any information be withheld?

Yes. The names or information that identifies other persons receiving services and employees will be redacted unless these individuals authorize disclosure.

Federal laws or regulations may pose additional restrictions on the release of records or information contained in those records. For example, federal law prohibits OASAS facilities from releasing any records or information that would identify a person as receiving services without the specific consent of the person receiving services (or a court order compliant with federal law).

If a patient is a minor and is receiving services to which a parent or guardian has also consented, **both** the minor and the parent or guardian must consent to disclosure.

How should requests for records and documents be made?

Requests for incident and investigation records **must be made to the facility** that was providing services to the individual at the time of the incident.

The Justice Center is not authorized to provide any records under Jonathan's Law.

When reportable incidents are investigated by the Justice Center, the Justice Center will coordinate with the facility so that the disclosure of records and documents will be made in compliance with Jonathan's Law.

When will records be made available?

When the qualified person(s) makes a written request for records and documents pertaining to a reportable incident, the facility must respond to this request within 21 days of the conclusion of an investigation.

Can records or documents obtained by a qualified person be shared?

A qualified person who received records and documents pertaining to reportable incidents may share them only with:

- Health care providers:
- Behavioral health care providers;
- Law enforcement agencies (if the qualified person believes a crime has been committed); and/or
- · The qualified person's attorney.