

**ONONDAGA COUNTY PLAN FOR  
SUPPORTING PEOPLE WITH  
DEVELOPMENTAL DISABILITIES  
AND THEIR FAMILIES  
2007-2009**

**New York State Office of Mental Retardation and Developmental Disabilities**

**Diana Jones Ritter, Commissioner**

**Onondaga County Department of Mental Health**

**David S. Brownell, Commissioner**

## SECTION 1:

### Opening Statement

#### Introduction by County Commissioner

Onondaga County's Department of Mental Health directs and administers a planning process consistent with Article 41 of the NYS Mental Hygiene Law.

In developing this year's plan, the Developmental Disabilities Sub-Committee of the Community Services Board sponsored an open Planning Forum attended by providers, families, and consumers. To increase consumer and family input, committee members also facilitated focus groups with existing consumer and family groups and organizations.

To the extent possible, the Plan guides the development of services and service delivery improvements. To a significant degree, SOMRDD priority initiatives e.g. New York Cares dictate service development.

#### County Profile

The population of Onondaga County is approximately 460,000. The City of Syracuse is located in the geographic center of the County. Outside the City, public transportation is not readily accessible. In all other ways, Onondaga County is "typical" enjoying a range of quality health services but certain populations, especially those with "complex" needs are not adequately served.

#### Developmental Disabilities System Profile

**Components:** A sizable number of voluntary agencies and the SOMRDD provide services to County residents. Total expenditures are unknown.

**Organizational Structure:** N.Y.S. OMRDD utilizes a regional management model. The C.N.Y. Developmental Services Office functions as a planner, provider, funder, regulator, coordinator, and overseer. The responsibility for developing an annual, county-wide comprehensive service plan is assigned by the MHL to county government.

**Operation and Processes:** The current interrelationship of the parts of service system functions moderately well. Accessing and negotiating the service system together with an obtuse array of funding streams remains intimidating to some families and providers. While the lack of service capacity, and in some cases the complete absence of some services e.g. crisis services, together with insufficient reimbursement levels continue to plague the system, the absence of user friendly, coordinated service system is a major challenge for those seeking service.

## SECTION 2:

### Documentation of Discovery Process

**County:** Onondaga

**Year:** 2007

#### **Constituent Groups Consulted:**

In preparing the 2007-2009 County Plan, the Developmental Disabilities Sub-Committee conducted one large forum reaching out to individuals receiving services, family members, and local providers. Participants at this forum were asked to break into sub-groups by age including children, transitioning, and adults (including seniors). Each sub-group discussed the need for services based on three questions: What is working, what are the needs, and what are the barriers to services? A facilitator and note taker were assigned to each group.

In addition, the DD Sub-Committee also reached out to and facilitated similar meetings with the following existing groups:

- Self Advocates
- DD Aging Coalition
- Southwest Community Center
- Onondaga County Family Support Services Council
- Spanish Action League
- Autism Support Group
- TBI Support Group at David Clark Learning Center
- A group hosted by Exceptional Family Resources
- Family Capped
- Minority Network
- FEAT
- ACCESS Group

#### **Method of Discovery Utilized:**

Each group used a facilitated discussion focused on the questions above. Along with these focus groups, information from a survey conducted in 2006, as well as a review of the 2006 county plan was utilized. The overall goal was to keep the discussions as open as possible and to gain information from those people needing services and their family members. Providers of services were present in the groups, however, preference was given to input from recipients and families.

County: Onondaga

SECTION 3

Data as of: 12/31/06

Year: 2007

SUMMARY OF RESOURCES

OCT 18 2007

(OPTIONAL)

Community Housing	Enrollment & Age			Regional Annual Average Funded Amount Per Person	Elements of Funding	Total Public Funding (\$1,000's)
	0-21	22+	Total			
Community Residence Supervised	0	7	7	25,540	CR Res Hab, State Supplement	179
Community Residence Supportive	0	0	0	15,391	CR Res Hab, State Supplement	0
Individual Residential Alternative-Supervised	23	526	549	85,178	Res Hab price, IRA Supp., SSI and Clothing	46,762
Individual Residential Alternative-Supportive	0	16	16	40,298	Res Hab price, IRA Supp., SSI and Clothing	645
Intermediate Care Facility	0	13	13	134,986	ICF Rate	1,755
Family Care	11	113	124	15,544	SSI, Res Hab, annual respite and travel service	1,927
<b>Community Housing Sub-Total</b>	<b>34</b>	<b>675</b>	<b>709</b>			<b>51,268</b>
<b>CAMPUS HOUSING</b>						
Developmental Center			0			
Special Behavior Unit			0			
Autism Unit			3			
Multiple Disabilities Unit			2			
Center for Intensive Treatment			4			
Regional Behavioral Treatment Unit			0			
Local Intensive Treatment Unit			6			
Regional Intensive Treatment Unit			1			
Small Residential Unit			0			
Residential School			8			
Specialty Hospital			0			
<b>Campus Sub-Totals</b>	<b>0</b>	<b>0</b>	<b>24</b>			

County: Onondaga

## SECTION 3

Data as of: 12/31/06Year: 2007

## SUMMARY OF RESOURCES

(OPTIONAL)

Family & Individual Services	Enrollment & Age			Regional Annual Average Funded Amount Per Person	Elements of Funding	Total Public Funding (\$1,000's)
	0-21	22+	Total			
Family Support Services (including Crisis Intervention)	2103	719	2822	1,522	OMRDD Contracts	4,295
Individual Support Services	6	169	175	5,722	OMRDD Contracts	1,001
Residential Habilitation at Home	79	261	340	11,900	HCBS prices	4,046
Waiver Respite (Hourly)	141	43	184	3,684	HCBS prices	678
Freestanding Respite	195	44	239	16.95/hr	HCBS prices	Unable to calculate
Environmental Modifications & Adaptive Equipment		1375			ISS Contracts, HCBS prices	Information not available
Medicaid Service Coordination	674	4	2049		Monthly Fee Schedule: Supervised CRs \$154.60; Supportive CRs & IRAs \$198.74; Willowbrook Class \$276.06; All others \$236.31	About 5,500
Plan of Care Support Services (PCSS)	26	1	30	\$214/unit	Same as MSC	Unable to calculate
Family Education and Training (FET)	53	0	54	\$100 for individual family; \$50/unit group	\$100/Unit for individual support; \$50/unit for group (2-8 families); max: 2 units per waiver enrollee annually to enrollee's family	Unable to calculate
Care at Home	14		14	3,027	CAH Waiver Services Only	42
Consolidated Supports & Services			14	Typical Range of \$750-\$3500	HCBS prices established through Individualized Budgets	Information not available
<b>Family &amp; Individual Supports Sub-Total</b>	<b>3291</b>	<b>2616</b>	<b>5921</b>			
<b>CLINICS</b>						
Article 16 (Free Standing)	1060	2414	3474	90.88/unit	Medicaid Fee for Service full visit fee per unit	Unable to calculate
Article 16 (Joint Venture)				71.48	Medicaid Fee for Service	0
<b>Clinics Sub-Total</b>	<b>1060</b>	<b>2414</b>	<b>3474</b>			

County: Onondaga

SECTION 3

Data as of: 12/31/06

Year: 2007

SUMMARY OF RESOURCES

(OPTIONAL)

Day Services	Enrollment & Age			Regional Annual Average Funded Amount Per Person	Elements of Funding	Total Public Funding (\$1,000's)
	0-21	22+	Total			
Day Treatment	0	12	12	22,448	Day Tx Rate including transportation	269
Sheltered Workshop	1	229	230	11,321	OMRDD LTSE, State Aid and Direct SW contract	2,604
Day Training	5	56	61	4,356		266
Senior Day Training	0	25	25	3,430	OMRDD Contracts	86
Day Habilitation	39	755	794	26,623	Price set including transportation	21,139
Blended Day Hab & Prevoc	0	0	0	Not Available	OPTS project based	
Blended Prevoc & Supported Employment	0	0	0	Not Available	OPTS project based	
Blended Day Hab & Prevoc & Supported Employment	0	0	0	Not Available	OPTS project based	
Prevocational	0	162	162	12,254		1,985
Supported Employment	13	295	308	5,148	HCBS prices	1,586
<b>Day Sub-Totals</b>	58	1534	1592			
<b>OPTIONS FOR PEOPLE THROUGH SERVICES (OPTS)</b>						
<b>Opts Sub-Total</b>				11	Not Available	
<b>OTHER</b>	0	0	0			
<b>Other Sub-Totals</b>						
<b>Duplicated Totals</b>						

**SECTION 4:**

**Statement of Selected Outcomes**

**(Complete separately for each of five to eight of the most important outcomes)**

**County:** Onondaga

**Year:** 2007

**Selected Outcome**

**Topic:** Respite

**Tracking Number:**

(This is not a ranking number)

**Outcome Statement:**

Increase Respite opportunities

**Target Population, Identification of Data Sources and Qualification of Need (exact number of people to be served is not required):**

All age groups. Respite opportunities could include after school programming for children, long term respite, and emergency respite.

Data collected from various forums, focus groups and a county survey.

**Preliminary Strategies and Action Steps:**

Local providers will develop increased respite capacity.

**Project Timeline of Resolution:** 1-3 years

**Responsible Parties:** Local providers

**SECTION 4:**

**Statement of Selected Outcomes**

**(Complete separately for each of five to eight of the most important outcomes)**

**County:** Onondaga

**Year:** 2007

**Selected Outcome**

**Topic:** Transportation

**Tracking Number:**

(This is not a ranking number)

**Outcome Statement:**

Individuals will be provided with a higher quality/more flexible transportation that meets individualized needs.

**Target Population, Identification of Data Sources and Qualification of Need (exact number of people to be served is not required):**

Teens, Adults

**Preliminary Strategies and Action Steps:**

Work group to include local providers, users of service, and transportation providers to discuss improvement in transportation services. Discussion will include training of providers and their drivers, improved flexibility and reliability, and improved services for medically frail individuals.

**Project Timeline of Resolution:** 1-3 years

**Responsible Parties:** See above.

**SECTION 4:**

**Statement of Selected Outcomes**

**(Complete separately for each of five to eight of the most important outcomes)**

**County:** Onondaga

**Year:** 2007

**Selected Outcome**

**Topic:** Residential Services

**Tracking Number:**

(This is not a ranking number)

**Outcome Statement:**

Residential opportunities will increase insuring the preservation of transitional programs and permitting people to remain in their living arrangement as they age.

**Target Population, Identification of Data Sources and Qualification of Need (exact number of people to be served is not required):**

All. Information obtained from the county forums, focus groups and surveys, demonstrated a high need for individuals transitioning out of high school and looking for residential opportunities. Based on the County CLIP list the need for more residential opportunities exists for all age groups and level of disability.

**Preliminary Strategies and Action Steps:**

The first step would be to more clearly quantify the need and type of residential supports.

**Project Timeline of Resolution:** 1-4 years

**Responsible Parties:** Local providers, individuals, family members.

**SECTION 4:**

**Statement of Selected Outcomes**

**(Complete separately for each of five to eight of the most important outcomes)**

**County:** Onondaga

**Year:** 2007

**Selected Outcome**

**Topic:** Systems Improvement

**Tracking Number:**

(This is not a ranking number)

**Outcome Statement:**

Create a Learning Collaborative that will identify and propose solutions to existing systems issues.

**Target Population, Identification of Data Sources and Qualification of Need (exact number of people to be served is not required):**

Several large system issues were identified at the county forum and local focus groups.

**Preliminary Strategies and Action Steps:**

The creation of a Learning Collaborative of providers and people who receive or are in need of services.

**Project Timeline of Resolution:** On-going

**Responsible Parties:** Central New York Developmental Services Office

**SECTION 4:**

**Statement of Selected Outcomes**

**(Complete separately for each of five to eight of the most important outcomes)**

**County:** Onondaga

**Year:** 2007

**Selected Outcome**

**Topic:** Training

**Tracking Number:**

(This is not a ranking number)

**Outcome Statement:**

Provide high quality training especially for Service Coordination and direct care staff.

**Target Population, Identification of Data Sources and Qualification of Need (exact number of people to be served is not required):**

All. Information received through forums, focus groups and surveys, focused on the need for more informed service coordinators, and a more highly skilled work force.

**Preliminary Strategies and Action Steps:**

To develop a training committee or workgroup.

**Project Timeline of Resolution:** 1-3 years

**Responsible Parties:** Central New York Developmental Services Office.

**SECTION 4:**

**Statement of Selected Outcomes**

**(Complete separately for each of five to eight of the most important outcomes)**

**County:** Onondaga

**Year:** 2007

**Selected Outcome**

**Topic:** Special Populations

**Tracking Number:**

(This is not a ranking number)

**Outcome Statement:**

Children and adolescents with intellectual impairments and co-occurring behavioral problems experiencing a crisis will have access to age appropriate residential and in home services.

**Target Population, Identification of Data Sources and Qualification of Need (exact number of people to be served is not required):**

Children and adolescents with intellectual impairments and co-occurring behavioral problems. Data derived from a local county forum, survey, and focus groups identified the need for more specialty services for this population.

**Preliminary Strategies and Action Steps:**

The first step would be to identify the need for specialized services for the group noted above and identify other needed services. Providers would then begin to address the areas of need through the development of programs or the enhancement of existing programs.

**Project Timeline of Resolution:** 2-3 years

**Responsible Parties:** Local service providers.

**SECTION 4:**

**Statement of Selected Outcomes**

**(Complete separately for each of five to eight of the most important outcomes)**

**County:** Onondaga

**Year:** 2007

**Selected Outcome**

**Topic:** In Home Res Habilitation Services

**Tracking Number:**

(This is not a ranking number)

**Outcome Statement:**

To increase the capacity of In Home Residential Habilitation Services. Enhancement will be met through more availability of hours, and a more intensive support that works with family members as well.

**Target Population, Identification of Data Sources and Qualification of Need (exact number of people to be served is not required):**

All. This topic was consistently noted in all of the forums and focus groups.

**Preliminary Strategies and Action Steps:**

**Project Timeline of Resolution:** 1-2 years

**Responsible Parties:** DSO/Local Providers.

**SECTION 4:**

**Statement of Selected Outcomes**

**(Complete separately for each of five to eight of the most important outcomes)**

**County:** Onondaga

**Year:** 2007

**Selected Outcome**

**Topic:** Advocacy

**Tracking Number:**

(This is not a ranking number)

**Outcome Statement:**

Services for individuals will improve through a reinvigoration of a strong, coordinated advocacy initiative.

**Target Population, Identification of Data Sources and Qualification of Need (exact number of people to be served is not required):**

This issue was addressed at the County Forum and at several small focus groups.

**Preliminary Strategies and Action Steps:**

**Project Timeline of Resolution:**

**Responsible Parties:** Existing advocacy organizations and groups.

**01 Assurance**

Pursuant to Article 41 of the Mental Hygiene Law, and as Director of the Local Government Unit, I hereby assure and certify that directors of district developmental services offices, directors of community mental health centers, voluntary agencies, other providers of services, and consumers and consumer groups have been formally invited to participate in, and provide information for, the local planning process relative to the development of the 2007 Local Services Plan.

11/19/07  
Date

David S. Bruneel  
Commissioner/Director  
Local Government Unit

**02 Assurance**

Pursuant to Article 41 of the Mental Hygiene Law, I hereby assure and certify that the Community Services Board has provided advice to the Director of Community Services and has participated in the development of the 2007 Local Government Plan. Additionally, I assure and certify that the full Board has had an opportunity to review and comment on the contents of the plan and has received the completed document. Any disputes which may have arisen, as part of the local planning process regarding elements of the plan, have been or will be addressed in accordance with procedures outlined in Mental Hygiene Law Section 41.16(c).

**For Policy Boards:**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chairperson  
Community Services Board

**Or:**

**For Advisory Boards:**

11/19/07  
Date

David S. Bruneel  
Commissioner/Director  
Local Government Unit

**03 Assurance (For Policy Boards Only)**

Pursuant to Article 41 of the Mental Hygiene Law, I assure and certify that the Community Services Board meets regularly during the year, has established by-laws for its operation, has defined the number of officers and members that will comprise a quorum, and has membership which is broadly representative of the age, sex, race and ethnic characteristics of the area served. Additionally, I assure and certify that the Board has established procedures to insure that all meetings are conducted in accordance with the Open Meetings Law, which requires that meetings of public bodies shall be open to the general public, that advance public notice of meetings shall be given, and that minutes shall be taken of all meetings and be available to the public.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chairperson  
Community Services Board.

**04 Assurance**

Pursuant to Article 41 of the Mental Hygiene Law, I, as Chairperson of the Subcommittee for Mental Retardation and Developmental Disabilities, assure and certify that the Subcommittee for Mental Retardation and Developmental Disabilities has provided advice and input to the Community Services Board and to the Director of Community Services relative to the development of the 2007 Local Services Plan as such plan relates to the field of services for those individuals represented by this subcommittee.

Additionally, I assure and certify that the Subcommittee has had an opportunity to review and comment on the contents of the plan and has received the completed document. Any disputes which may have arisen, as part of the local planning process regarding elements of the plan, have been or will be addressed in accordance with procedures outlined in Mental Hygiene Law Section 41.16(c).

11/15/07  
\_\_\_\_\_  
Date

Stephen Renell  
\_\_\_\_\_  
Chairperson  
Subcommittee for MR/DD

**05 Assurance**

On behalf of the Commissioner of the New York State Office of Mental Retardation and Developmental Disabilities, I, as director of the DDSO assure and certify that the development process and content, with the exceptions as noted below, of the 2007 Local Government Plan for \_\_\_\_\_(county) are in compliance with the requirements of Article 41 of the Mental Hygiene Law, and that they indicate that reasonable and appropriate efforts are being made to extend or improve local mental retardation and developmental disabilities services in accordance with statewide priorities and goals.

Exceptions – Parts of Plan Not Approved: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
DDSO Director for:

\_\_\_\_\_  
DDSO