



February 15, 2008

*Business Continuity for the 21st Century
Human Services Industry*

Thursday, February 28th - 8:45am - 5:00pm



RRTI is pleased to announce its latest training initiative: "Business Continuity for the 21st Century Human Services Industry". Designed for personnel in IT, Finance and Human Resource departments of human service agencies, the seminar will cover:

- Continuity versus Recovery
- Benefits of Proper Planning
- HIPAA and Business Continuity
- Anatomy of a 21st Century Continuity Plan including Analysis, Solutions and "Re"-Solutions"
- Components of developing a plan and methods of working with each component Including Operational Review, Risk Analysis, Business Impact Analysis, Cost/Benefit Analysis, Implementation, and Testing
- Reviewing a Human Services Agency Plan
- Making the Plan Work for You

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An important element of this training will be the review of a sample Business Continuity Plan designed specifically for a health care facility. Based on a fictitious short term residential facility, it will provide real solutions to risks faced by I.T., facility, staffing and business operations.

In addition, this hands-on workshop will allow attendees to study a sample Continuity plan and modify it for their own organization.

Presenter Geoff Turner has been a Certified Business Continuity Professional (CBCP) since 1997. Geoff's 25 years in computers, his Computer Science Degree and life experience has made him uniquely familiar with the health care and related industries. Mr. Turner is currently President & CEO of Tech Valley Continuity LLC and serves as Director of Business Continuity for Tribune Medical Services. Mr. Turner currently serves as the President of the Association of Contingency Planners (ACP) NY Capital Region Chapter. He presents at conferences regionally and nationally.

The training will be held at the RRTI Training Center at 155 Washington Avenue; Suite 410; Albany, NY. For more information, contact Stacie Muscolino at Stacie@nyrehab.org



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Twice a month, RRTI offers The Training ReSource to professionals in the field. This publication highlights products and services available to you and your staff from RRTI and others in the field. It also focuses on research presented in the field. If your agency has news that fits this venue, please feel free to share it with RRTI and other professionals. Submit articles and other news directly to Anita at anita@nyrehab.org.

SOS Training: Overview of DD, Consumer Rights, Abuse

Tuesday, March 18th - 8:45am - 5:00pm



RRTI is once again offering training for new agency employees serving adults with Developmental Disabilities. **New Employee Training: An Overview of DD, Consumer Rights, and Abuse & Incident Reporting** - will be held on **March 18th in Albany at the RRTI Training Center**. This course will help agencies comply with NYS OMRDD regulations for new employees. Your staff will be provided with a better understanding of the needs of individuals for whom they provide services.

Taught by **Barbara Berberich**, an OMRDD SCIP-R Certified Instructor with over 20 years experience in the field, the training will cover:

- The characteristics of individuals with DD
- Consumer rights
- Abuse identification and prevention
- Laws, regulations, policies and procedures governing protection from abuse, including “Jonathan’s Law”
- Incident and abuse reporting procedures

New employees serving adults with Developmental Disabilities including Direct Care staff, Day Program staff, Vocational staff and Job Coaches, Service Coordinators, Aides, Nurses and Transportation Providers should attend this important training.

For Registration information, go to www.rti.org or email Stacie at stacie@nyrehab.org.

The Leader Within You with Judi Clements

Tuesday, April 8th - 9:00am - 4:00pm



Have you ever thought about becoming a supervisor or have you recently become one? What will it take to be successful? RRTI is pleased to announce that Judi Clements, a veteran trainer and public speaker, will give you a crash course in how to be a better communicator and leader. By looking inside yourself and assessing your own talents and abilities, you will begin to see how these qualities fit into the world of supervision and leadership.

Judi Clements, who has offered training, coaching and keynotes for over 20 years, will focus on:

- The characteristics of effective leaders
- The distinguishing roles of supervision
- Self-assessment
- Handling the challenges of supervising peers and friends
- Establishing supervisory authority and rapport with employees
- Avoiding common traps
- Developing a positive communication climate to enhance productivity
- Differentiating “hearing” from “listening” and how to use “active listening”
- Overcoming destructive defensiveness and conflict

This training is designed for direct support professionals, supervisors, managers, job coaches, financial staff, and anyone else who wants to find the leader within.

To register for this class, contact Stacie Muscolino at Stacie@nyrehab.org or 518-449-2976

RRTI Events

February 28, 2008

Business Continuity for the 21st Century

RRTI Training Center

8:45am-5pm

March 18, 2008

Overview of DD, Consumer Rights, Abuse & Incident Reporting

RRTI Training Center

9am-5pm

March 26, 2008

Introduction to Supporting Individuals in the Community: “What Do Parents Have to Deal With?”

RRTI Training Center

9am-1pm

April 3, 2008

Research Institute: PTSD

Various Videoconference sites around New York State

April 8, 2008

The Leader Within You

Holiday Inn—Wolf Road, Albany

9am-4pm

May 13-14

Trainers’ Institute: “Developing the Trainer’s Toolbox-Talent, Technique, Technology”

Century House, Latham, NY

SAVE THESE 2008 DATES

June Management Meeting

June 5-6, 2008

Annual Leadership Training Summit

September 15-17, 2008



RRTI Research Institute: Post-Traumatic Stress Disorder

Thursday, April 3rd - 9:00am - 2:00pm

Following the success of the Research Institute on the Health of Women with Developmental Disabilities which was attended by well over 200 participants, RRTI will soon hold its second Research Institute on April 3, 2008 at videoconference sites around NYS. Post-traumatic stress disorder will be discussed by internationally known speakers. This 5-hour videoconference will provide the most recent research on the assessment and treatment of post-traumatic stress disorder in children, adults, families, veterans, refugees and individuals with developmental disabilities. Emphasis will be on recent research findings. The presenters will share information about how to apply research findings in the fields of health care, mental health, and social services. Professionals in state agencies, community-based organizations, social service agencies, and mental health facilities are encouraged to attend this important and timely Research Institute. Our presenters and their presentations are described here.



Jack Saul, PhD, is the founding director of the International Trauma Studies Program and Assistant Professor of Clinical Population and Family Health at Columbia University's Mailman School of Public Health. His presentation will be Beyond PTSD: Responding to the Challenges of Relational Trauma. Traumatic stress and loss not only affect individuals, but often seriously disrupt relationships in families, organizations, and communities. It is through the repair and strengthening of these relationships that corresponding avenues to recovery and resilience are found. Dr. Saul will describe a model that goes beyond clinical approaches to PTSD and incorporates family support, community organizing, social action, ritual, media, and art, in a comprehensive response to recovery.

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Introduction to Supporting Individuals in the Community: What do Parents Have to do With it?

Wednesday, March 26th - 9:00am - 1:00pm



"The best outcomes for children and families happen when parents and professionals work as partners with mutual respect and shared decision making power."

RRTI is proud to announce a new half day training seminar in partnership with *Parent to Parent of New York State*. In this workshop, we will examine the key elements of parent/professional collaboration and look at some of the factors that get in the way of creating successful working relationships. The discussion will include strategies for effective communication as well as barriers to listening. We will also examine how our ability to develop partnerships can be challenged by differences in perceptions and experiences.

The training is designed for staff working with individuals with developmental disabilities and their families in residential and day programs, service coordinators, job coaches, teachers, guidance counselors and counselors.

The workshop will be led by Janice Fitzgerald, Executive Director of *Parent to Parent of NYS* and Mary Jo Hebert, Capital Region Coordinator of *Parent to Parent of NYS* and a Parent Educator. Both presenters have professional and personal experience in the area of advocacy and support of children with a disability and will share their expertise and personal stories.

Understanding Medicaid Service Coordination and accessing services through OMRDD will be discussed. To this end, *Parent to Parent* has developed a guide to help families gain an understanding of the service system that provides supports to people with disabilities.

The training will be held at the RRTI Training Center on March 26, 2008 from 9am-1pm. For more information or to register, please contact Stacie Muscolino at 518-449-2976 ext. 105 or stacie@nyrehab.org.

Call for Presentations

APSE 2008: The Winner's Circle ... Everybody Works! Everybody Wins!

If you are interested in sharing your knowledge and promoting discussion regarding the employment of people with disabilities at a national forum, the 19th Annual APSE Conference, being held in Louisville, KY from July 9th-11th, 2008, provides a great opportunity to do so. If you are a professional, individual, family member, or businessperson with information and ideas to share, please submit your conference session proposal(s) by the February 15th deadline.

To submit a proposal, go to the APSE website. APSE: The Network on Employment is a membership organization focused on improving and expanding integrated employment for persons experiencing disabilities. If you have any questions please contact Celane McWhorter at celanem@yahoo.com, or David Hoff at 617-287-4308; david.hoff@umb.edu

Research

Gene Variants Protect Against Adult Depression Triggered by Childhood Stress Finding Could One Day Help Identify People at Risk

Certain variations in a gene that helps regulate response to stress tend to protect adults who were abused in childhood from developing depression, according to new research funded by the National Institute of Mental Health (NIMH), part of the National Institutes of Health. Adults who had been abused but didn't have the variations in the gene had twice the symptoms of moderate to severe depression, compared to those with the protective variations.

"People's biological variations set the stage for how they respond to different environmental factors, like stress, that can lead to depression," said NIMH Director Thomas R. Insel, M.D. "Knowing what those variations are eventually could help clinicians individualize care for their patients by predicting who may be at risk or suggesting more precise avenues for treatment."

Almost 15 million U.S. adults have major depression. The new report adds to evidence that a combination of gene variations and life experiences promote the disorder or protect people from it. Variations in many genes are thought to be involved, but few of them have been identified.

Results of the study were published in the February 4 issue of the *Archives of General Psychiatry*, by Kerry J. Ressler, M.D., Ph.D., of Emory University, Rebekah G. Bradley, Ph.D., of the Atlanta VA Medical Center, and others.

The study also supports previous evidence that a stress hormone, corticotropin-releasing hormone (CRH), plays a role in depression. The variations are in a gene that makes a receptor for the hormone. Receptors are proteins that act as binding sites, in or on cells, for chemical messengers that affect cell function. The receptor for CRH is called CRHR1.

CRH and its receptor are part of a larger hormone system that regulates the response to stress, in part by helping to regulate neurotransmission – the chemical messages through which brain cells communicate with each other. Extreme stress in childhood caused by factors such as abuse can hyperactivate the system, increasing risk of depression in adulthood.

"Our results suggest that genetic differences in CRH-mediated neurotransmission may change the developmental effects that childhood abuse can have on the stress hormone system – developmental effects that can raise the risk of depression in adults," said Ressler.

To conduct their research, scientists interviewed 422 adults, mostly African American, and tested their DNA. About one-third of them had the variations in the CRHR1 gene that appear to be somewhat protective if early-life stress has occurred. Of the

people in the study who had a history of child abuse, those with certain variations had only about half the symptoms of moderate to severe depression as those who had more common variations in the same gene.

The finding was strengthened when the researchers repeated the study in 199 white adults and came up with similar results. In addition to racial differences, the two groups differed socioeconomically. The combined findings suggest that the gene variations are protective across the ethnic groups and socioeconomic levels.

Additional research funding from the National Institutes of Health was provided by the National Center for Research Resources and the National Institute on Drug Abuse. Emory University, the Emory and Grady Memorial Hospital General Clinical Research Center, and the Burroughs Wellcome Fund also contributed.

Research-based Principles May Help Improve MH Recovery Following Mass Trauma

Experts on trauma-related research and medical practices from around the world recently identified five principles to guide mental health care efforts immediately or shortly after a mass trauma, such as a natural disaster or terrorist attack. In a related commentary, NIMH scientist Farris Tuma, Sc.D., MHS, discusses how these principles may help determine effective mental health care for large numbers of people following an emergency, and how best to deliver it. The article and commentary were published in the Winter 2007 issue of *Psychiatry: Interpersonal and Biological Processes*.

Treatments for mass trauma survivors are difficult to study using traditional research methods, such as randomized clinical trials. As a result, there has been a general lack of research-based evidence to help communities and agencies plan for mental health care following a disastrous event. In fact, recent studies show that some current treatments that are commonly used after mass traumas, such as psychological debriefing, may not be helpful in reducing distress or the risk for post-traumatic stress disorder (PTSD) and other long-term, trauma-related illnesses. In some cases, these treatments may actually increase distress and risk.

To help address these issues, Stevan E. Hobfoll, Ph.D., of Kent State University and Summa Health System, and colleagues called together researchers and clinicians from around the world with expertise in a broad range of areas, including trends and practices in response to disaster, terrorism, or war, the study and treatment of trauma survivors, and other related fields. The panel reviewed existing research, and then determined five key principles of

effective mass trauma mental health care, which involve promoting

- a sense of safety
- calm
- a sense of being able to solve problems for oneself or as part of a group (such as family or any school, religious or community group that the person can identify with)
- connectedness to social support, and
- hope.

The article defines these five aspects, describes how they are disrupted after a mass trauma, examines types of existing mental health interventions that may be useful, and also provides examples of actions by individuals, the community, and the media that may help or hinder recovery and resilience among survivors. In addition, the authors discuss how different types of trauma, location, and culture may require different mass trauma responses. Nevertheless, the five principles and associated methods of intervention and helpful personal, community, and media actions may be useful to those who set emergency policies and design intervention strategies to develop plans that are sensitive and responsive to mental health outcomes following a mass trauma.

Faster-Acting Medications for Bipolar Disorder's Manic Phase May Be Feasible *New Research Pinpoints Potential Molecular Target in Brain Cells*

Scientists may be able to develop faster-acting medications for the manic phase of bipolar disorder, new research shows.

Current medications take several days to weeks to work, during which the extreme mood shifts of the disease may cause patients to engage in harmful behaviors, such as risky health behaviors or spending sprees. Bipolar disorder, also called manic-depressive illness, affects about 5.7 million Americans age 18 and older in any given year.

The faster medications would be aimed more directly at a molecular site on brain cells that current medications, such as lithium and valproate, reach through a slower, roundabout route. By targeting the site with a protein fragment they designed, NIMH scientists reduced manic-like behaviors and associated brain changes in rats. Jing Du, Ph.D., Husseini Manji, M.D., and colleagues published their results in the January 2 issue of *The Journal of Neuroscience*.

With further research, the molecular site could become a target for new medications for humans, or could point the way to other targets for new treatments, the scientists say. The site is an amino acid, serine 845 (S845), in the GluR1 subunit of the AMPA receptor. (See "About the Science.")

The researchers also pinpointed a region of the brain that appears

to be involved in mania: the CA1 region of the hippocampus, which feeds stored memories to the prefrontal cortex, the "active-thinking" part of the brain.

Perspectives of people with disabilities on employment, vocational rehabilitation, and the Ticket to Work program

Published in the *Journal of Vocational Rehabilitation* (Volume 27, Number 3/2007) This study was based on twelve focus groups of 74 working-age adults with disabilities. According to the abstract, the major employment barriers encountered were negative employer attitudes, transportation problems, and inadequate educational qualifications. Vocational Rehabilitation Counselors were criticized for being unresponsive and non-collaborative. Few had more than passing awareness of the Ticket to Work program and many feared they would lose benefits by participating in the program. Only the abstract is freely available. The complete report can be purchased online for \$25. See: <http://iospress.metapress.com/app/home/contribution.asp?referrer=parent&backto=issue,6,6;journal,1,48;linkingpublicationresults,1:103174,1>

Webcasts

A Corporate Perspective on Collaborative Partnerships with Beth Butler

Date: 3/18/2008, 2:00pm ET

Beth Butler is Wachovia's Disability & Accommodations Consultant. As an attorney who happens to have a disability, her passion goes far beyond simply advancing Wachovia's business and diversity strategies! Her work ties directly to Wachovia's corporate commitment to conduct business without barriers. In this webcast, participants will gain valuable information on why it is important to build partnerships with businesses in the community. In addition, the presenter will share examples and ideas on how rehabilitation professionals can build partnerships and what businesses expect from rehabilitation. For more information, go to <http://www.crp-rcep.org/training/webcastDetails.cfm/111>

Supported Employment and Mental Illness: Addressing the Secondary Issues with Deborah Becker

Date: 4/8/2008, 2:00pm ET

Supported employment is designed to assist individuals with disabilities who are interested in working, regardless of substance abuse, treatment non-adherence, symptoms, and homelessness. However, employment specialists often struggle with assisting individuals who have these challenges. This webcast will address these secondary issues of mental illness and give specific strategies for providers to use for assisting individuals in finding and keeping employment. For more information, go to <http://www.crp-rcep.org/training/webcastDetails.cfm/112>

In the News

U.S. Secretary of Labor Elaine L. Chao calls for 2008 New Freedom Initiative Award Nominations

U.S. Secretary of Labor Elaine L. Chao has called upon nonprofit organizations, small businesses, corporations and individuals that have demonstrated exemplary and innovative efforts in advancing the employment and workplace environment of people with disabilities to submit entries for the 2008 Secretary of Labor's New Freedom Initiative Award.

"The New Freedom Initiative Award celebrates innovative efforts to advance accessibility to the workplace for Americans with disabilities," said Secretary Chao. "The New Freedom Initiative Awards ceremony is an opportunity to showcase worthy organizations that are welcoming Americans with disabilities into the workplace."

The annual award recognizes public-private partnerships and programs that have had a positive impact on the employment of people with disabilities through access to assistive technologies, the use of innovative training, and hiring and retention techniques. It also recognizes organizations, businesses and individuals that develop comprehensive strategies to enhance the ability of Americans with disabilities to enter and advance within the workforce of the 21st century.

Additional information on the award and specific nomination criteria are available in the Jan. 29, 2008, edition of the Federal Register and at www.dol.gov/odep. Questions may be addressed to the Labor Department's Office of Disability Employment Policy (ODEP), Division of Policy Communication and Outreach, at 202-693-7880. The deadline for receipt of nominations is May 30, 2008.

Funding Announcements

Telemedicine Demonstration For People with DD Who Are Aging

The New York State Developmental Disabilities Planning Council (DDPC) is announcing the availability of funding in the amount of \$100,000 to establish one fifteen-month telemedicine demonstration project for people with developmental disabilities who are aging and who may have multiple medical conditions. The DDPC will assist OMRDD to demonstrate the efficacy of telemedicine approaches to assist individuals who are aging within the OMRDD system. The intent is to increase the availability of and access to necessary health care services through prevention and health care monitoring, particularly to persons with multiple medical conditions. The question that the DDPC wants addressed is: *"What is the benefit, value and impact of telemedicine in keeping individuals who are aging in the most home and community based setting possible?"*

Eligible applicants include any community based organization that provides medical care, residential and/or day services to individuals who are aging with DD. A community organization could also apply in partnership with a medical care provider. Applications may also include a local or regional consortium of such medical care and developmental disability service providers. While the target service population is individuals with DD who are aging, other individuals may also be served. The DDPC encourages project applicants that serve individuals typically considered as unserved or underserved in their health care needs.

Questions regarding this specific RFP must be submitted by mail

to the DDPC Program Planner noted below, or by email to nrose@ddpc.state.ny.us by no later than **March 10, 2008**. All submitted questions should be identified as either Program or Fiscal related. A Questions and Answers summary will be posted to <http://www.ddpcb2b.com/rfp/default.aspx> and applicants are encouraged to go to that website first to see if their questions have already been addressed prior to the submission of such questions.

All interested applicants should submit a one-page letter of intent by March 3, 2008. A letter of intent is requested to assist the DDPC in identifying the interest and potential applicant pool for this grant. In some instances, additional information may be made available to all potential applicants who have expressed interest in this funding opportunity. Letters of intent should be forwarded to Nicholas Rose, DDPC Program Planner, at the address listed below. Letters of Intent are preferred, but not required for applications to be accepted for this RFP.

All final grant applications must be delivered to the DDPC office by close of business (5:00pm) on March 17, 2008. No applications will be accepted after this deadline. By this deadline date, the applicant must deliver an *original* completed and signed application package, six print copies, and an electronic copy to the attention of: Sheila M. Carey, Executive Director NYS DDPC; 155 Washington Ave. 2nd Floor Albany, NY 12210 Attn: Telemedicine Demonstration. For more information contact Nicholas Rose, Program Planner or Dr. Jane Muthumbi, Research Assistant, at 1-800-395-3372 (NYS only TDD/TDY), by Fax at 518-402-3505, or by email at nrose@ddpc.state.ny.us or jmuthumbi@ddpc.state.ny.us, or at the address noted above.

Related Industry Conferences and Events

2/14-17/08

Autism Today Biennial Conference 2008

Autism Through the Lifespan

Caribe Royale Hotel; Orlando, FL

For more information, <http://www.epliveonline.org/>

4/21-24/08

Easter Seals Project Action

2008 Mobility Planning Services Institute

Renaissance Washington Hotel; Washington, DC

For more information, <http://www.projectaction.org/> or 202-347-3066 (Washington, D.C.); 800-659-6428 (toll-free); 202-347-7385 (TDD)

4/22-23/08

NYAPRS 4th Annual Executive Seminar on Systems Transformation

Innovative Strategies in Program, Practice and Funding That Promote Wellness and Recovery

Crowne Plaza; Albany, NY

For more information, go to www.nyaprs.org or call 518-436-0008

4/27-29/08

Empire State APSE Supported Employment Training Institute

Crowne Plaza, Lake Placid

For more information, contact Wendy Quarles; 716-829-2875 or wquarles@buffalo.edu

5/15/08

NYS Interagency Partnership on Assistive Technology

New York State Governor's Assistive Technology Expo

Empire State Plaza Convention Center

For more information, contact Michelle Murray; 518-388-0690 or go to www.atexpo2008.com

5/21-22/08

Vision Rehabilitation and Employment Institute 2008

Albany, NY

For more information; wquarles@buffalo.edu

7/9-11/08

APSE 2008: The Winner's Circle...Everybody Works! Everybody Wins!

9/24-26/08

NYAPRS 26th Annual Conference

Integrating Our Services, Integrating Our Lives

Nevele Grand; Ellenville, NY

For more information, go to www.nyaprs.org or call 518-436-0008

RRTI Research Institute: PTSD (Continued from page 3)

Richard Kagan, PhD is the Director of Psychological Services at Parsons Child and Family Center. He will present Real Life Heroes: Rebuilding Safety and Trust with Traumatized Children. Traumatic stress and loss not only affect individuals, but often seriously disrupt relationships in families, organizations, and communities. It is through the repair and strengthening of these relationships that corresponding avenues to recovery and resilience are found. Dr. Kagan will describe a model that goes beyond clinical approaches to PTSD and incorporates family support, community organizing, social action, ritual, media, and art, in a comprehensive response to recovery.

Anne DesNoyers Hurley, PhD is an Associate Clinical Professor of Psychiatry at Tufts University School of Medicine. Her presentation will be on the Diagnosis and Treatment of Adults with Intellectual Disability and PTSD. The diagnosis of psychiatric disorders in people with intellectual disability is challenging for several reasons. Most cannot verbalize required symptoms of the condition so that patients often do not meet diagnostic criteria. Further, due to developmental delay, presentation of adults may be more like that of young children.

This presentation will discuss atypical features such as aggression, the process of collecting information from the patient and from third parties, and the process of the determination of "trauma," including how trauma may be related to the developmental delay. Dr. Hurley will discuss cognitive behavioral therapy techniques and behavioral exposure used with modifications based on developmental delay, as well as the use of pharmacotherapy for comorbid disorders such as major depression.

Our fourth presenter will be **Charles Kennedy, PhD**. Dr. Kennedy is Lead Psychologist and Program Coordinator of the PTSD Program at Albany Veteran's Administration Medical Center, Clinical Supervisor of Addiction Therapists, and Co-Leader of the Psychiatric Crisis Team, emphasizing evidenced-based trauma processing techniques and experiential group methods. His presentation will be Treatment of PTSD which will provide a synopsis on the history and symptoms of PTSD, followed with a discussion of evidence-based treatment methods of individual trauma processing, experiential group therapy methods, and attachment theory-based family interventions.

Registration is now available at www.rtti.org or contact matt@nyrehab.org.