NEW YORK STATE | Office for People With Developmental Disabilities

KATHY HOCHUL
Governor

WILLOW BAER
Commissioner

October 29, 2025

VIA USPS CERTIFIED MAIL & EMAIL

Russell D'Amico, Executive Director
Menorah Park Group Residences, Inc.
4101 East Genesee Street
Syracuse, New York 13214

Frances Ciardullo, President, Board of Directors
[redacted]

Re: Agency Placement on Early Alert

Dear Mr. D'Amico and Ms. Ciardullo:

The purpose of this letter is to formally notify you that Menorah Park Group Residences, Inc. was placed on Early Alert effective 10/17/2025, due to systemic regulatory compliance concerns identified by the Bureau of Program Certification (BPC).

To ensure that individuals with developmental disabilities in New York State receive appropriate services and protections, the Office for People With Developmental Disabilities (OPWDD) established the Early Alert Committee. The purpose of the Early Alert process is to monitor the performance of providers that have not maintained compliance with applicable laws and regulations that may affect the health and safety of individuals receiving services.

OPWDD has placed your agency on Early Alert status due to the following concerns identified by BPC:

• 45-day letters were issued to the agency's one four-person home (Individual Residence Alternative) on November 5, 2024, January 13, 2025 and March 12, 2025, the identified deficiencies were in the area of health services and supports.

• Background check deficiencies were identified in the surveys conducted on November 5, 2024, and January 13, 2025. The agency has a small number of employees for this home and the inability to correct the deficiencies prior to the January 13, 2025, revisit was indicative that the agency lacked processes to ensure all required background checks were completed.

• On June 17, 2025 – July 2, 2025, a full and a partial Person-Centered Review were completed for two individuals. Both reviews resulted in Statements of Deficiencies (SOD) in the following areas: the planning process, delivery of services and supports, individual rights, safeguard planning and delivery, health services,

and behavior services. Two unacceptable Plans of Correction were provided by the agency for each of the SODs issued.

• On September 15, 2025 – September 18, 2025, an Agency Review resulted in the issuance of an adverse action SOD in the areas of agency procedures regarding rights protections, workforce, environmental safety and incident management.

In addition, there are significant concerns in the area of incident management including:

• Earlier in the 2025 calendar year, staff from BPC identified that incidents had not been reported as required. It was verified during the Agency Review that the agency lacked a process for ensuring that staff were notified of the agency's policies and procedures for incident reporting.

• During the September 2025 Agency Review, it was determined that the agency did not have an Incident Review Committee (IRC), thus failing to meet all of the IRC requirements.

• The agency has failed to enter required reporting updates in the Incident Reporting and Management Application (IRMA). Incident Management Unit (IMU) staff have contacted agency management, including the Executive Director, on numerous occasions regarding this concern, yet no significant progress has been made by the agency despite IMU's support.

• In addition, incident notifications are not being made within the regulatory timeframes, this concern was addressed with agency management, during BPC's completion of the Agency Review.

• The agency is currently responsible for the completion of three investigations (mistreatment, an allegation of neglect, and conduct between persons receiving services). Two of these incidents were reported in June 2025 and one was reported in August 2025. During the 2025 Agency Review, it was discovered that the agency does not have a trained investigator, nor has the agency contracted with an outside entity, to ensure investigations are completed.

Based on the above concerns identified by BPC and IMU from November 2024 - September 2025, the agency has demonstrated its lack of familiarity with OPWDD regulatory requirements related to incident management, staff training, oversight of health services and supports, planning and implementation of safeguards, behavior supports, and the overall operation of OPWDD certified residential settings. The survey findings included repeat deficiencies being issued in the same areas of concern previously identified, despite extensive guidance and resources being provided by BPC during this time. Extensive supports included BPC communications, offering guidance and resources via emails and/or in meetings with the agency, on at least, seventeen occasions. The failure of the agency to remediate the identified concerns and its lack of effective systems, continues to place the individuals' receiving services from the agency, at serious risk of harm and negative outcomes.

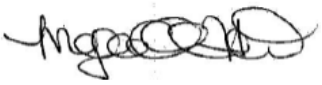
While on Early Alert, OPWDD will monitor the agency's progress in remediating areas of non-compliance and will determine when the agency has demonstrated that compliance has been systemically achieved and has effective systems in place to maintain on-going compliance. During this time, OPWDD will not consider any agency requests for expansion of services and suspend any expansion that is in process.

Representatives from OPWDD will meet with the agency's leadership and Board of Directors to further discuss these concerns, the Early Alert process, and OPWDD's expectations.

As a reminder, the Commissioner may revoke, suspend, or limit an operating certificate at any time upon a determination that the provider has failed to comply with the terms of its operating certificate or with the provisions of applicable statutes, rules, or regulations. (See Mental Hygiene Law (MHL) §16.17[a]). Accordingly, OPWDD reserves the right to pursue further action at any time it determines the health and safety of individuals requires such actions, or should systemic regulatory non-compliance be identified.

If you have any questions prior to the meeting, please contact Chad Mitchell, Regional Director, Bureau of Program Certification at: Chad.M.Mitchell@opwdd.ny.gov.

Sincerely,



Megan O'Connor-Hebert
Deputy Commissioner
Division of Quality Improvement

cc: Agency Board of Directors
Willow Baer, Commissioner
John Barbuto, Executive Deputy Commissioner
Deborah Ellis, Chief of Staff
Eileen Haynes, Deputy Commissioner and General Counsel
Joshua Olsen, Deputy General Counsel
Abiba Kindo, Deputy Commissioner, Service Access, Program Implementation & Stakeholder Support
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