

CHS Services for Patients with Hearing/ Vision Impairment and/or Intellectual and Developmental Disabilities

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CHS Audiology and Optometry Services

To serve patients with hearing and/or vision impairment, CHS:

- Assesses hearing and vision during intake
 - CHS nurses ask patients whether they have ever worn hearing aids and/or glasses and if they have those devices with them
 - Medical staff then review with patient and conduct a physical exam
- Offers audiology and optometry specialty services
 - Appointments expedited for patients who have lost or are missing hearing aids
 - Routine screening services provided for all patients and those with diabetes and other chronic disease
 - Coordination of services with Ophthalmology at Bellevue and Elmhurst hospitals
- CHS adds patients requiring assistive devices to a list which is provided to DOC daily
 - Other patients may be referred to CHS by DOC's Disability Rights Coordinator



CHS Audiology and Optometry Services (cont.)

To serve patients with hearing and/or vision impairment, CHS:

- Provides assistive devices
 - 1,618 pairs of glasses purchased YTD in 2024
 - 162 hearing aids purchased in 2023
- Provides ASL interpreters upon request in coordination with DOC ADA coordinator
- May receive specialized care coordination from Medical Complex Care Services (MCCS) or other specialized teams
 - MCCS coordinates with DOC on discharge planning
 - Elder Services will advocate for patients with age-related hearing or vision impairments
- Works with DOC so that patients with vision or hearing impairments that are not fully correctable are housed in the ADA unit in NIC



CHS Audiology and Optometry Services (cont.)

Audiology Referrals and Scheduled Visits

	YEAR	
	2023	2024 YTD (to 9/30/24)
Patients referred to specialist ¹	208	164
Total on-site visits scheduled	435	323

Optometry Referrals and Scheduled Visits

	YEAR	
	2023	2024 YTD (to 9/30/24)
Patients referred to specialist ¹	2084	1825
Total on-site visits scheduled	7016	5074

[1] Incarceration-level, based on earliest date of referral within incarceration since start of current electronic health record.

Cognitively Impaired Individuals

- Neurodevelopmental disorders most prevalent within the CHS patient population include:
 - Intellectual disabilities
 - Autism spectrum disorders
 - Learning disorders
- Neurocognitive disorders most prevalent within the CHS patient population include:
 - Major neurocognitive disorder
 - Mild neurocognitive disorder



Cognitively Impaired Individuals

- CHS' medical intake includes screening questions regarding involvement with Office for People with Developmental Disabilities (OPWDD); all these individuals are seen by Mental Health
- Beyond intake screening questions, neurodevelopmental disorders are identified through multiple sources:
 - Receiving notification from OPWDD, legal team, or community collaterals
 - Mental health staff concern about patient presentation, functioning, or difficulty
 - Information obtained from PSYCKES, special education records, IEP, and other collateral sources
 - Patients are assessed for evidence of cognitive or intellectual deficits during all mental health intake assessments
- Patients are also assessed for evidence of cognitive or intellectual deficits during all mental health clinician and psychiatric provider follow-up visits



Cognitively Impaired Individuals

- Receive specialized clinical services according to clinical need:
 - Higher-needs patients with neurodevelopment disorders may be housed on the PACE Neurodevelopmental Unit or our PACE dorm unit, both offering a smaller census setting with more structure than standard PACE units
 - Patients with co-morbid NDD and medical/infirmity need are housed on a Medical-PACE unit in NIC
- Patients on mental health therapeutic housing units receive:
 - Ongoing individual and group support from mental health treatment aides
 - Individual care from mental health clinicians and psychiatric providers
 - Regular group interventions with creative arts therapists
- Patients receive broadened scope of care in regards to discharge planning services (i.e. OPWDD-specific services, such as specialized care coordination, community habilitation, employment)
 - CHS communicates w/ OPWDD regarding notification/inquiries
 - CHS Social Work Re-entry has specialized IDD and AOT Clinical Coordination

