

Part I: EXECUTIVE SUMMARY

Woods Services categorically rejects the DRNY report. As our response illustrates in detail, the report is filled with allegations that are untrue, exaggerated, missing critical facts, and defamatory.

When extremist ideology trumps truth and reason, the DRNY report about Woods Services is the unfortunate result. When DRNY, an agency charged with protecting the most vulnerable in our society, violates that mission to engage in a vendetta against Woods, a non-profit nationally recognized center for excellence in serving those individuals, this report is the unfortunate result. And when an agency, which receives taxpayer funds, misuses those funds to publish a report animated by malice and replete with falsehoods and half-truths, Woods Services has no choice but to respond forcefully and correct the record.

The DRNY document is not an objective investigative report in any sense of the word. One look at the cover showing a cross-out over a Woods "safety starts with me" sign reveals this document for what it really is -- a propaganda piece, that is detached from the truth, to justify DRNY's extremist agenda.

Woods' response to the report is divided into three sections. The first is this "Executive Summary," the second is a detailed report on those actions taken by Woods to evolve and advance care practices, particularly in de-escalating physically aggressive and challenging client behaviors while ensuring their safety and that of our staff, and the third is a point-by-point response to the 34 "Proposals for Immediate Action."

In reviewing the DRNY report and our response, the reader should keep in mind these key points:

1. DRNY stands alone and isolated among all of the state disability rights organizations in the 23 states from which Woods cares for clients in its strange and solitary campaign to discredit Woods. DRNY, and only DRNY, has engaged in a year-long "offensive" consisting of intrusive inspections, massive and unreasonable demands for documents and records (all of which have been voluntarily supplied), harassment of Woods' employees, clients and their parents/guardians, and the filing of meritless administrative complaints against Woods with the NY State Department of Education. Within the last year, in addition to continuous inspections by our multiple licensing agencies (none of which found any significant deficiencies in our programs, operations or facilities), we have been visited by Disability Rights organizations from nine other states and the District of Columbia. They interviewed our residents and staff, inspected our facilities and were supplied with all of the documents and records they asked for. No other disability rights organization from any other state has filed a complaint against Woods, has disparaged Woods nor issued any type of report alleging abuse and neglect of its residents by Woods.
2. Why then is DRNY the outlier? Clearly the answer is that the staff of DRNY have a deep-seated animus against residential centers for individuals with developmental disabilities, regardless of how well they are run, regardless of whether these centers also have extensive community living and independent living arrangements and regardless of the demonstrated need for residential facilities for those without the extensive funding sources that would be required to care for them in the community. This accounts for the hostile, nasty attitudes and snide remarks made by DRNY employees (and only by them) to Woods' employees during their site visitations. It accounts for their single-minded focus on Woods. It accounts for the intensive sales pitch their employees have used to attempt to sign up our clients as their clients (it should be noted, a largely unsuccessful attempt at that).

3. As DRNY grudgingly admits, not one funder of residents from New York (or any other state for that matter) now or in the recent past has conditioned or limited their admissions into Woods programs. Indeed, much to DRNY's evident frustration, demand for Woods placements remains strong. Nor are these funders placing individuals here without adequate oversight. As a Pennsylvania provider that serves individuals from 23 states, we receive approximately 60 licensing/oversight visits annually, including eight from New York State alone in this past year. With very few exceptions, these inspections are uniformly positive, and issues spotted are minor and quickly corrected.
4. The picture of Woods painted by DRNY is massively out of kilter with reality. There are numerous allegations in this report; five of them are somewhat accurate, although cited in a misleading and sensational fashion. These five incidents occurred over a four-year timespan and none thankfully involved hospitalizations. To be clear, five instances are five too many, but it is important to keep this number in perspective. Woods employs 1,900 people to serve approximately 630 residents on a 24/7 basis, 365 days per year. Many of these residents are placed here by School Districts and other funding agencies because they cannot be accommodated by schools, at home or in group-home settings. They have severe behavioral issues, including physical aggression and self-injurious behavior.

Unmentioned in the DRNY report is that Woods vigorously enforces a zero tolerance policy with respect to any form of abuse of any of its residents. Abuse allegations are immediately reported to appropriate licensing and regulatory agencies, as well as parents and guardians and law enforcement. Woods conducts internal investigations by certified investigators of all such allegations and immediately suspends any employees accused of abuse and neglect, any employees who failed to report it and any employees who do not take active steps to stop it when they see it. When allegations are determined to be true, suspensions are converted to terminations.

5. DRNY glosses over the fact that it was made aware of these incidents because Woods self-reported and acted on them. It blithely ignores the corrective steps taken by Woods once the incidents were discovered. DRNY also cannot explain why the New York Justice Center agreed with Woods' investigative conclusions on those incidents involving New York residents and recommendations on every one of these abuse cases (other than to cast aspersions on the Justice Center itself in its report).
6. Again, because it does not fit within the fictional rendition of Woods painted by its report, DRNY ignores the recent steps taken by Woods to further protect its residents and employees from physical harm and limit use of restraints. Thus there is no mention of the significant overall reduction in restraint use over the past year through Woods' significant investment in, adoption of, and comprehensive training in the proven and nationally acclaimed Ukeru method for de-escalating aggressive behavior and minimizing use of restraints.
7. The DRNY report also throws in "kitchen sink" allegations concerning unhygienic and unsafe facilities, lack of client privacy and inadequate assistive technology. These allegations are buried toward the end of the report perhaps in the hope that they will not be examined too closely since DRNY knows or should know that they are specious. However, they are completely false and are categorically denied.

8. While the entirety of the DRNY report is an exercise in bad faith, one of the most egregiously biased sections concerns Woods' day programs. Despite DRNY's bald and unsupported allegations to the contrary, these programs operate in full compliance with applicable law, including payment of minimum wage. Moreover, the picture of the sleeping resident in the report (included almost certainly in violation of that resident's privacy rights) is highly misleading. As DRNY knows or ought to know, if a resident wishes to sleep on the job, it is his or her right to do so, and Woods has no right to demand otherwise.
9. Finally, there is a very strange disconnect in the DRNY report between the wildly inaccurate rendition of the purported problems at Woods and its relatively modest and appropriate "Proposed Immediate Actions" that appear at the end of the report. Woods suspects that this is because DRNY recognizes that the "evidence" of serious deficiencies at Woods is so lacking and suspect that only modest programmatic changes can be argued for and justified. **In any event, had DRNY ever bothered to look into the facts or simply ask, it would have known that out of its 34 proposed immediate actions, 26 of them are already fully implemented, two are implemented as far as practicable, two will be implemented shortly, one will be considered for implementation, two cannot be implemented for health, safety or compliance reasons, and one cannot be implemented because it is inconsistent with the very regulation it cites to.** Thus, far from being a "rogue" provider operating outside best practices, Woods, due to its own commitment to continuous improvement, had already adopted in whole nearly 80% of the DRNY's Proposed Immediate Actions and will adopt in whole or in part over 91% of the proposed Actions. A point-by-point discussion of Woods' pre-existing compliance with these proposed actions is set forth in Part III of our Response.

In sum, it is more in sorrow than anger that Woods is compelled to respond forcefully to the falsehoods and misstatements in the DRNY report. Sorrow because if DRNY were truly concerned about the welfare of the New York residents here, it would work with centers of excellence like Woods to enhance their residents' opportunities, secure their funding and ensure adequate facilities in New York existed for those who wish to return home. Sorrow because instead of wasting its time publishing sensationalist propaganda pieces, DRNY could be investigating those "bad actors" serving New York residents that are truly providing substandard care and committing fraud and abuse in the process. However, in spite of its unfounded attacks on Woods, we remain ready to work cooperatively with DRNY to find ways to enhance the lives of those who depend upon us and are entrusted to our care.

Part II: WOODS SERVICES' COMMITMENT TO CONTINUOUS IMPROVEMENT

Woods Services is a nonprofit multi-service health and advocacy organization that provides innovative, comprehensive and integrated educational, vocational, medical and behavioral health services to children and adults in the intellectual/developmental disability, child welfare, behavioral, and brain trauma communities who have very complex and intensive medical and behavioral needs.

Woods' Mission:

Woods supports children and adults with disabilities or challenges to achieve their highest potential and independence through innovative and individualized approaches that promote learning and personal fulfillment.

One of the great strengths of Woods Services is its ability to meet the service needs of a diverse group of individuals who present multiple challenges. Woods serves individuals with intellectual disability, emotional disturbance, pervasive developmental disorders, autism, cerebral palsy, neurological disorders, challenging behaviors, complex medical issues, sensory impairment, physical disabilities, acquired brain injury, and conditions associated with advanced age.

As a leader in the field for over 100 years, Woods has always strived to provide best-practice approaches to treatment and habilitation. The Woods team works continually to maintain a cultural of excellence by assessing our internal environment, our performance in a variety of identified areas, and our overall impact to those we serve. Through our ongoing review processes, we quickly identify areas for improvement and then take steps to ensure we maintain the high standards we have set for ourselves and that our funders rightfully demand. Over the past year, two critical areas of our self-evaluation have concentrated on issues related to the prevention of abuse and the reduction of physical restraint interventions in response to situations when those we serve present behavior that is dangerous to themselves and others. Our obligation to ensure a therapeutic environment where consumers are treated with dignity and respect is and always will be our top priority!

Through our program review process, we identified trends that deviate from the quality of care we demand of ourselves. In the latter part of 2016, we took immediate and aggressive action in response to five confirmed incidents over a four-year timespan; and also because the use of restraints during behavioral incidents was decreasing, but in our view was not decreasing fast enough despite our intensive efforts at positive practices to behavioral support. The action we took began with extensive research to identify state-of-the-art, evidence-based approaches that would direct our methods of treatment. In our search to better understand and address issues that may lead to incidents, we conducted focus groups among our internal and external stakeholders. The process involved our staff who provide direct service from all levels of the organization and some of our key placing agencies. Because of our process of self-assessment and the valuable input we received, we identified certain weaknesses in our approaches, support mechanisms were not effective enough, and oversight procedures with gaps. These findings led us to the implementation of two strategic initiatives that set our present and future course.

In June 2017, Woods partnered with Grafton Integrated Health Network, Inc. who developed unique and award-winning management tools and techniques to create trauma-informed treatment environments for individuals receiving services for intellectual, developmental, or psychiatric disabilities and has virtually eliminated the use of restraints in its residential treatment and school programs.

Woods engaged Grafton to provide training and technical assistance in the implementation of their Ukeru Method. Ukeru is a restraint-free crisis management system that is recognized as a best practice in restraint reduction by the Substance Abuse and Mental Health Services Administration (SAMHSA). This nine-month engagement began with a three-day assessment of Woods' organizational culture, strengths, and weaknesses. The assessment served as the basis of our implementation plan, which includes training, new systems and practices, the identification and monitoring of key performance indicators, and ongoing consultation and support.

In July, more than 1,100 Woods employees attended introductory sessions and in August, 25 employees received intensive training and became certified as instructors/champions. Implementation of the Ukeru Method at Woods is well underway. Through implementation of the Ukeru model we are on our way to creating a sustainable culture of comfort versus control. This culture will ensure that the individuals we

serve are guaranteed a therapeutic environment that is safe, structured and engaging that will provide each client with the tools they need to achieve their highest potential.

Building upon our longstanding employee education programs, we have implemented the following additional actions and strategies to prevent incidents and to drastically reduce or eliminate the use of restraints:

1. Hired 23 Staff Mentors to support our direct support professionals in their professional growth and development towards achievement of our standard of care.
2. Developed and implemented an employee education program titled Abuse Prevention that gives our staff the tools to understand factors that can create an abusive response, how to avoid them, and strategies to work together as a team to ensure a safe and therapeutic milieu in all program areas.
3. Instituted counseling sessions and other employee assistance programs to ensure our staff are fully equipped to provide the individuals we serve a supportive learning environment where each person is treated with dignity and respect.
4. Introduced an initiative to create and maintain a culture of safety in all homes and program areas that is reinforced regularly in staff meetings and other communications.
5. Created and implemented a student curriculum in Abuse Awareness and Reporting for our school-aged clients.
6. Instituted regular open forum discussion opportunities for our staff to communicate issues and concerns to their program administrators.
7. Installed surveillance cameras in select locations and are evaluating whether additional cameras are appropriate and feasible.
8. Assessed and improved salaries for critical staff positions to decrease vacancies and the need for overtime.
9. Enhanced our employee benefits program by introducing additional programs to reinforce our commitment to support those who support the individuals in our care. These include a new 403(b) plan with a company contribution and employer match, a new health plan with zero co-pays for primary care office visits and no payroll deduction for single coverage, a student loan repayment program, financial literacy workshops, and on-site cohort education programs.
10. Conducted root-cause-analysis sessions to thoroughly assess mistakes made and identify learning opportunities for the future.
11. Increase the number of front line supervisory staff, including additional staff in four of our residential areas and one in our adult habilitation program.
12. Instituted varied work schedules for our residential management team to ensure visibility and oversight across all shifts.

13. Developed and implemented enhanced training and supervision for new employees that continues throughout their first six months on the job.
14. Developed and began implementation of a school-wide Positive Behavior Support Program in our three schools.
15. Secured the assistance of an expert in the field of Applied Behavior Analysis to provide training to our clinical and education staff in Functional Behavior Assessment and Behavior Support Plan development to include teaching of adaptive replacement behaviors.
16. Continued the expansion of our social enterprises into the community as integrated employment opportunities for the individuals we serve by opening Yellow Daffodil, a flower and gift shop in the Langhorne community and BeechTree Enterprises, a production center where hand lotions, sanitizers, and soaps are produced for online and retail sale.
17. Expanded our clinical support to residential and education programs with the hiring of six additional Board Certified Behavior Analysts.
18. Created, trained and implemented policies and procedures, including the Use of Time Out/Alternative Rooms in our education programs, New York Standards for the Protection of Individuals, and Reporting Requirements for New York Funded Individuals.
19. Re-trained our staff in our Corporate Compliance Policy that includes a hotline whereby everyone is encouraged to anonymously report observed or suspected abuse or mistreatment without the fear of retribution. Information regarding corporate compliance is posted in all residences and program areas.
20. Hired an experienced investigator to ensure timely and thorough response to all suspected incidents of abuse or neglect.

Woods is a leading multi-service provider and advocacy organization that specializes in meeting the needs of individuals with intellectual and developmental disabilities and the most complex behavioral, psychiatric, and medical challenges.

The individuals who are served at Woods have experienced multiple unsuccessful treatment options resulting in their need to seek the quality clinical support and treatment available at Woods. For this reason, New York and twenty-two other states have identified Woods as the provider of choice when faced with the need to support an individual who cannot be safely supported elsewhere. At Woods, those individuals who have failed in so many other systems of care are finally able to experience the joy of success.

Part III: WOODS POINT-BY-POINT RESPONSE TO DRNY PROPOSED IMMEDIATE ACTIONS

1. Establish meaningful processes to ensure that physical restraints are not to be used "in a punitive manner, for the convenience of staff persons or as a program substitution," and refrain from utilizing restraints in non-emergency situations.

Response: **Already in effect.** Woods has always trained staff that restraints are only

to be used in emergency situations and never in a punitive manner or as a program substitution. Following the inspection by New York SED last year, Woods modified all behavior support plans and adopted language that is consistent with NY education standards. In revising the plan we also retrained all staff in its implementation.

Additionally, in June 2017, Woods contracted with Grafton Integrated Health Network for the purpose of adopting their nationally acclaimed Ukeru program. This program is a trauma-informed approach to de-escalating challenging behavior without utilizing restraints. Staff are currently being trained in the Ukeru approach with the intent to include all programs within the next few months.

2. Take immediate steps to comply with OPWDD's *Strategies for Crisis Intervention and Prevention-Revised* for all OPWDD-funded adults at Woods.

Response: **Already in effect.** Woods developed its SMART program after extensive research of curriculum of other providers and in consultation with outside experts. This program was adopted specifically because it includes the safest procedures that Woods was able to identify. The SMART program is reviewed at least annually by our licensing agencies as well as numerous funders, including OPWDD.

3. Obtain informed consent from service recipients or their legal guardians for physical restraints, and human rights restrictions.

Response: **Already in effect.** Woods will continue to secure consent for all behavior support plans that include restrictive procedures as defined by the Pennsylvania 3800 and 6400 regulations. Consent will continue to be obtained from consumers if consumers are legally competent to consent, or if not, legal guardians, and if necessary "next of kin".

4. Hire an independent consultant to assist with developing meaningful processes to reduce and eliminate the use of physical restraints.

Response: **Already in effect.** In June 2017, Woods contracted with the Grafton Integrated Health Network for the purpose of adopting their nationally acclaimed Ukeru program. This program is a trauma-informed approach to de-escalating challenging behavior without utilizing restraints. Staff are currently being trained in the Ukeru approach with the intent to include all programs within the next few months.

5. Hire an independent consultant to assist with developing an appropriate positive behavioral intervention system.

Response: **Already in effect.** See #2 and #4 above. In addition to our contract with Grafton, a behavioral consultant was secured to work with staff to develop a school-wide positive behavior support program.

6. Implement IEPs, BIPs, and BSPs as written before imposing restraints. If

restraints are consistently needed, the FBA and BIP must be reviewed and revised.

Response: **Already in effect.** See items # 1 and # 4 above.

7. Designate one or more staff (administrator, school psychologist or behaviorist) in each school building to periodically review all Emergency Intervention Forms to identify developing patterns of behavior and ensure that FBAs and BIPs are current, accurate and consistently followed.

Response: **Already in effect.** The Education Director in each school building reviews all Emergency Intervention Forms, FBAs and BIPs. In addition, team clinicians review behavioral data monthly and conduct periodic observations and may, at any time, request an emergency team meeting to revise the BIP. An incident review management system is in place in the Mollie Woods and Woodlands programs to review trends and program-wide areas of concern.

8. Require a timely team meeting which includes the school psychologist, teacher, parent and CSE administrator to review and modify, as needed, the most recent FBA, BIP and IEP whenever an emergency intervention is used on a student more than three (3) times in a three (3) week period.

Response: **Already in effect.** Woods holds team meetings as requested. All internal and external team members are invited to participate. However, Woods personnel cannot mandate the attendance of CSE administrators.

Documentation and Reporting:

9. Complete and submit an OPWDD 147: Reportable Incidents and Notable Occurrences, for all OPWDD funded individuals, as they are required to do so, when necessary.

Response: **Already in effect.** Since 2013 Woods has filed OPWDD required Reportable Incident reports. In addition, the Regional Compliance Officer at OPWDD is notified by telephone of an incident as soon as possible.

10. Whenever an emergency intervention is utilized on a New York student, report this intervention in accordance 8 NYCRR 200.22(d).

Response: **Already in effect.**

11. Maintain records regarding the use of emergency interventions in accordance with 8 NYCRR 200.15(f)(1)(b).

Response: The regulation cited is not consistent with the topic of item #11 (emergency interventions). This inconsistency needs to be reconciled by DRNY.

However, Woods does maintain records of the use of emergency interventions in accordance with 8 NYCRR 200.22 (d)(4).

12. Comply and enforce reporting policies for staff regarding allegations of abuse and neglect.

Response: **Already in effect.** Woods employees are trained in Abuse Prevention, Abuse Policies, and Reporting annually. In addition, Woods created a reporting policy specific to the NY reporting requirements in April 2017, and all staff have been trained on this policy. All employees are held accountable and instructed that failure to report suspected abuse will result in termination of employment. These requirements and policies are strictly enforced.

13. Create an incident review committee and send annual incident trend reports to OPWDD which it is required to do pursuant to 14 NYCRR § 624.7(a).

Response: **Partially in effect.** Woods already has an Incident review Committee and is certainly willing to discuss an expansion of its reporting if required or desired by OPWDD.

Abuse and Neglect:

14. Implement the Justice Center's corrective action plans, as instructed.

Response: **Already in effect.**

15. Investigate all allegations of abuse and neglect. This includes interviewing all witnesses, interviewing the service recipient, and gathering all evidence in a timely manner.

Response: **Already in effect.** Woods certified investigators will continue to complete thorough investigations in response to allegations or suspected abuse and/or neglect. All investigations will be reviewed by a member of the administrative team before finalization. Woods investigators undertake their investigations based on the training that they receive through the Pennsylvania Certified Investigator Training Program. They are recertified every three years. .

16. Incorporate reporting obligations, including reporting to the Justice Center, for all allegations of abuse and neglect.

Response: **Already in effect.** Woods policies were revised in April 2017 to include the notification requirements to the Justice Center. Staff receive extensive training in these policies annually.

17. Any time an injury occurs to a resident, investigate the injury as a possible instance of abuse and/or neglect.

Response: **Already in effect.** All injuries are assessed to determine their cause.

18. Create an anonymous ethics hotline which will allow service recipients, family members, and staff to report concerns, without fear of retaliation.

Response: **Already in effect.** Woods corporate compliance reporting hotline is in place. Information on how to anonymously report is posted throughout the Woods' homes and program areas as well as provided to each employee via the employee handbook, during new hire orientation and annually during all shift training. Incidents are further reviewed by the standing Woods' Compliance Review Committee.

Day Services:

19. Assist individuals whom are interested in pursuing competitive integrated employment by referring them to the federally funded Pennsylvania Office of Vocational Rehabilitation.

Response: **Already in effect.** Woods clients are registered with the Pennsylvania Office of Vocational Rehabilitation (OVR) and receive career counseling and other job readiness services. Woods vocational staff will continue to assist individuals who are interested in pursuing competitive integrated employment in collaboration with Pennsylvania OVR.

20. Conduct accurate time studies for its sheltered workshop with a nexus between an individual's disability and why they are being paid a substandard minimum wage.

Response: **Already in effect.** Time studies are completed for any piece rate job before any job is presented to employees of the workshop. Those clients earning substandard hourly rate time studies are conducted every six months. Woods is in full compliance with legal requirements.

21. Compensate the individuals with a disability at minimum wage during down time in the workshop when there is not enough work for them to do.

Response: **Already in effect.** During instances where contract work is not available, alternate work duties are completed by workshop employees. If an employee decides to not complete the work or to refuse the alternate duties, that decision is respected.

22. Reimburse all sheltered workshop employees who were illegally paid a substandard minimum wage.

Response: **Already in effect.** The implication of this proposed action that Woods illegally pays sub-minimum wage is totally false and categorically denied. Woods is fully compliant with all applicable laws in this regard.

23. Woods must provide meaningful treatment and community based opportunities for individuals attending its day program

Response: **Already in effect.**

24. Woods should create a "without walls" day program which would allow individuals to have a personalized, community based day habilitation experience.

Response: This is not feasible, safe, or legally required.

25. For individuals who do not want to attend Woods' day program, explore one-on-one community based opportunities for these individuals, rather than having these individuals spending their day at their residence without programming.

Response: Woods will be happy to explore this program option for any individual who does not want to attend a structured day program.

Quality of Life:

26. Immediately discontinue its mandatory seclusion time from 3pm to 4pm for students.

Response: **Already in effect.** This proposed action is based on a false premise. Woods does not use any form of seclusion. However the practice of giving students "down time" upon shift change is no longer in effect.

27. Hire an independent consultant to assist with person center planning, developing community integration opportunities, independent living programming and campus accessibility for service recipients and visitors. Service recipients, at a minimum, should have one meaningful outing into the community every week and have input in selecting this outing. Van rides do not count as an outing.

Response: This proposal is unnecessary, and Woods does not accept it. We take a person-centered approach in the planning of each individual's service plan. Additionally our clients are engaged in daily activities.

28. Develop an independent Human Rights Committee in accordance with OPWDD regulations.

Response: Agreed to. Although not a legal requirement, this is a worthwhile proposal and Woods will establish such a committee.

29. Provide all eligible service recipients with assistive technology and augmentative communication devices.

Response: Agreed to. Treatment teams will review the need and appropriateness for additional assistive devices and in consultation with therapists ensure those consumers deemed in need are provided the technology.

30. Develop appropriate protocols to monitor that facilities are sanitary and safe.

Response: **Already in effect.** Routine inspections of all facilities are completed. Any identified sanitary and/or safety issues are promptly and fully addressed by housekeeping and maintenance staff.

31. Ensure residents are afforded privacy in their bedrooms, and while using the restroom. All bathrooms and bedrooms should have locks on them.

Response: Implementation insofar as possible. Woods staff have been trained in privacy expectations. Placing locks on all bedroom and bathrooms is contrary to regulations and cannot be done as it would place our consumers at risk of physical harm.

32. Educate staff that all residents must have access to their attorneys.

Response: **Already in effect.** All staff have been re-educated that residents have the right to communicate with persons of their choice, including attorneys.

33. Discontinue any searches of an individual's belongings without their consent, or in accordance with their behavioral plan.

Response: **Already in effect** except for those searches that must be undertaken in response to safety concerns. Such searches are always completed in accordance with Woods' stringent privacy policies.

34. Never deny food to residents for non-compliance.

Response: **Already in effect.** DRNY's implication that food is withheld is totally false and categorically denied.

END