



Alliance for the Betterment of
Citizens with Disabilities

Empowering People: Providers Shaping Policies

ABCD Response to “Hidden at Home.”
A series of articles published in NorthJersey.Com
May 6, 2025

DDD providers are charged with finding the balance between their responsibility to respect and uphold the individual’s privacy and human rights while ensuring the individual’s health and safety. Due to privacy and human rights laws, providers are unable to respond to information regarding individual cases which may result in the presses reporting and public narrative to be skewed, which for the purpose of healthy public debate, is an unfortunate consequence.

One inaccurate statement that ABCD can respond to in North Jersey. Com’s recent article, *NJ group home residents face neglect, abuse and despair in flawed system* is that DHS, “is pressing the state Legislature for ‘more enforcement tools’ including in recently crafted bills that are hotly contested by group home companies.” In fact, ABCD clearly communicated in a 90-minute conversation with the article’s reporters that it supports 6 of the 7 proposed bills affecting our members. ABCD opposes only one of those bills, not because we reject accountability, but because we believe that that bill will not address the issues DHS aims to solve.¹ We have provided a rationale for our opposition, along with an alternative solution, which we have made public.²

During the 12-year period in which the reporters “found nearly 50 cases since 2013 in which vulnerable group home residents died amid alarming questions about their care and supervision,” group homes which go through rigorous licensing reviews and serve an increasingly complex population

- Served over ten thousand individuals.
- Dispensed hundreds of millions of medications.
- Cooked, served and oversaw over one hundred million meals.
- Assisted in hundreds of millions of ADLs.
- Covered over ten million overnights.
- Escorted individuals on millions of person-centered trips, visits, educational events, advocacy events, physical and creative activities, etc. in the community.

¹ ABCD reached out to the reporters who disagreed with ABCD’s position saying that they spoke to many providers. Since the statement does not mention ABCD specifically, it is not inaccurate in their opinion.

² <https://www.abcdnj.org/wp-content/uploads/2024/11/Oversight-Plan-for-Improvement.pdf>

- Ensured individuals' health, safety, privacy and human rights of the individuals they served.³

None of this minimizes the pain and seriousness of the tragedies outlined in the report. ABCD's Executive Director expressed deep concern during her interview about the incidents described and called for full investigations. Like responsible reporters we believe responses should be grounded in verified facts, not just tips or anecdotes.

Since 2022, ABCD has held that because people with intellectual and developmental disabilities are at greater risk and experience higher rates of abuse, neglect and exploitation than the public, it is wise to operate under the assumption that abuse, neglect and exploitation will not disappear and remain forever vigilant. It is for this reason, we continue to advocate for a Standing Advisory Roundtable on Abuse, Neglect and Exploitation of People with IDD comprised of stakeholders, thought leaders and experts to advise DDD on prevention, detection and accountability practices and policies.⁴

Since 2024, ABCD has supported transparency and has recommended that day and residential final reviews and agency response should be posted online, obtainable to individuals, families, and the public in addition to the creation of public quality assurance briefs for preventive care, access, choice, etc. based on the findings from NCI surveys.⁵

The transition from contract based to Fee for Service has meant profound changes to our system. Enough time has probably elapsed to review the division policies related to unusual incidents and investigations to ensure that our tools are effective, meaningful and kept pace with the times.

³ During the three years of the PHE, the fatality rate for individuals in nursing homes was not less than 8.8%, in developmental centers, not less than 4%, while in group homes the fatality rate never rose above 1.69%. *NJDHS DDD Covid-19 Dashboard*, weekly from 4/12/20-6/4/23

⁴ <https://www.abcdnj.org/wp-content/uploads/2022/06/ANE.pdf>

⁵ <https://www.abcdnj.org/wp-content/uploads/2024/01/Changing-Landscape-Quality-Assurance.pdf>