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On some pages, you will be instructed to select check boxes. To do this, place the cursor in the box and click.

The entire plan should be completed using the electronic County Plan document and be sent via e-mail. The following must be sent as separate documents in the same e-mail:

- Appendix A (signature page): Fill in the name of the county in the spaces indicated. Then print out the page so it can be signed by the appropriate officials. Scan it and send it via e-mail along with your plan or you may fax the page to 518-474-9452, attention Kristin Gleeson.
- Appendix H (Memorandum of Understanding Between the District Attorney’s Office and Child Protective Services): This must be sent as an electronic document with your Plan, or you may include a narrative on the page provided.

Note: Because the document is protected, you will not be able to use the direction (arrow) keys, the “Page Down” key, or the “Page Up” key to move around in the document. Use the slide bar on the right side of the document window.

If you need help working with the form, please contact Welfare Research Incorporated at 518-432-2363 or e-mail nwebber@welfaresearch.org.

County Child and Family Services Plan

January 1, 2012 – December 31, 2016

Tompkins County

This Child and Family Services Plan contains county outcomes and strategies that respond to community needs. Specifically, the plan identifies Local Department of Social Services (districts) strategies in the areas of adoption, foster care, preventive, protective and other services for children, and protective and other services for adults. The plan also identifies Youth Bureau strategies for youth development and services for youth. In addition, it contains a description of public participation in the development of the Plan as well as estimates of expenditures and program information.

Maryanne Banks (607) 274-5297

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APPENDIX A
Plan Signature Page

We hereby approve and submit the Child and Family Services Plan for Tompkins County Department of Social Services and Youth Bureau for the period of January 1, 2012, through December 31, 2016. **We also attest to our commitment to maintain compliance with the Legal Assurances as outlined in Child and Family Services Plan Guidance Document.**

Commissioner
County Department of Social Services

Date

Executive Director
County Youth Bureau

Date

Chair
County Youth Board

Date

I hereby approve and submit the PINS Diversion Service section of the Child and Family Services Plan for Tompkins County Probation Department for the period of January 1, 2012, through December 31, 2016.

Director/Commissioner
County Probation Department

Date

Chair
County Youth Board

Date

Enclosed is the Child and Family Services Plan for Tompkins County. My signature below constitutes approval of this report.

Chief Elected Officer
(or Chairperson of the legislative body
if the county does not have Chief Elected Officer)

Date

WAIVER

Complete and sign the following section if a waiver is being sought concerning the submission of Appendix I - Estimate of Clients to be served.

Tompkins County requests a waiver to 18 NYCRR 407.5(a)(3), which requests a numerical estimate of families, children, and adults requiring each service listed in Section 407.4 of this same Part. Therefore, Appendix I is not included in this Plan submission. I assert that the level of service need and utilization for the full array of services encompassed by the Child and Family Services Planning Process was taken into consideration as part of the Tompkins County Child and Family Services Planning Process.

Commissioner
County Department of Social Services

Date

APPENDIX B-1

List of Required Interagency Consultation – Protective Services for Adults

In the development of the Protective Services for Adults component of the Annual Implementation Report, Section 34-a (4) and Sections 473(2) (a) and (b) of the State Social Services Law requires that districts consult with other appropriate public, private and voluntary agencies in order to ensure maximum local understanding, coordination, and cooperative action in the provision of appropriate services to protective services clients. These include, but are not limited to: aging, health, mental health, legal and law enforcement agencies. List the interagency consultation in the chart provided below:

Agency Type	Agency Name	Dates or Frequency of Meetings*
Aging	Tompkins County Office for Aging	Monthly
	Aging Services Network	Monthly
	Health Planning Council Long Term Care Committee	Monthly
	NY Connects	Monthly
Health	Tompkins County Health Department	Monthly
	Tompkins County Health Planning Council	Monthly
	Cayuga Medical Center Discharge Planning	Yearly
Mental Health	Tompkins County Mental Health Department	Monthly
	Tompkins County Mental Health Association	Monthly
Legal	Tompkins County District Attorney	Monthly and as needed
Law Enforcement	Tompkins County Sherrif's Department	2 times a year
	Ithaca Police Department	Yearly
	Tompkins County Family Court	Yearly

County Child and Family Services Plan

Agency Type	Agency Name	Dates or Frequency of Meetings*
Other:	Homeless Housing Taskforce	Bi-Monthly
	Tompkins County Housing Continuum of Care	Monthly

*List either dates of meetings or frequency (e.g., every third Wednesday of the month)

Detailed meeting information does not need to be included in the county plan, but districts are directed to maintain meeting agendas and/or minutes for a period of five years.

APPENDIX B-2

List of Required Interagency Consultation – Child Protective Services

In the development of the Child Protective Services component of the Annual Implementation Report, Section 34-a(4) and Section 423 of the State Social Services Law requires that districts consult with local law enforcement agencies, the family court, and appropriate public and voluntary agencies including the societies for the prevention of cruelty to children. The family court judge or designated representative must be involved when the family court is consulted. List the interagency consultation in the chart provided below.

Agency Type	Agency Name	Dates or Frequency of Meetings*
Law Enforcement	Multidisciplinary Investigations Team includes law enforcement and DA	Weekly
Family Court (judge or designee)	Family Court	at least annually
	Family Treatment Court	at least weekly
	Law Guardian's office	annually
PINS Diversion lead agency	Probation	at least weekly
Public/Private Agencies	Advocacy Center	monthly
	Contracted providers of preventive services	at least annually
	FAR Advisory Board	quarterly
	Alcohol & Drug Council	2 times /year
	Mental Health, Health Dept, schools.	at least quarterly

*List either dates of meetings or frequency (e.g., every third Wednesday of the month)

Detailed meeting information does not need to be included in the county plan, but districts are directed to maintain meeting agendas and/or minutes for a period of five years.

APPENDIX B-3

List of Required Interagency Consultation – Child Welfare Services

In the development of the Preventive, Foster Care, and Adoption Services for children component of the Annual Implementation Report, Section 34-a(4) and 409-d of the State Social Services Law requires that districts consult with other government agencies, authorized agencies, and other individuals and organizations concerned with the welfare of children residing in the district. List the interagency consultation in the chart provided below.

Agency Type	Agency Name	Dates or Frequency of Meetings*
Government Agencies	County Youth Services	Monthly
	Probation	Weekly
	Mental Health Dept.	Monthly
	Health Dept.	Monthly
	SPOA	at least monthly
Authorized Agencies	Youth Advocates Program	at least annually
	William George Agency	at least annually
	Advocacy Center	Monthly
	Family and Childrens Service	at least annually
	Community Connections	at least annually
Concerned Individuals/Groups	CHAMPS	monthly
	Law guardian, Family Court	at least annually
	Foster Adoptive parent support group	annually
	Early Childhood Development Workgroup	monthly
	Coalition for Families	monthly

*List either dates of meetings or frequency (e.g., every third Wednesday of the month)

Detailed meeting information does not need to be included in the county plan, but districts are directed to maintain meeting agendas and/or minutes for a period of five years.

APPENDIX B-4

List of Required Interagency Consultation – Child Care Services

Section 34-a(4) and 409-d of the State Social Services Law requires that, in the development of the Preventive, Foster Care, and Adoption Services for children component of the Annual Implementation Report, districts must consult with other government agencies, authorized agencies, and other individuals and organizations concerned with the welfare of children residing in the district. List the interagency consultation in the chart provided below.

Agency Type	Agency Name	Dates or Frequency of Meetings*
Government Agencies	Tompkins County Youth Services Department	1x year
Other Public/Private/Voluntary Agencies		
Concerned Individuals/Groups		
Child Care Resource and Referral Agencies	Child Development Council	1x month or as needed

*List either dates of meetings or frequency (e.g., every third Wednesday of the month)

Detailed meeting information does not need to be included in the county plan, but districts are directed to maintain meeting agendas and/or minutes for a period of five years.

APPENDIX B-5*

List of Required Interagency Consultation – Runaway and Homeless Youth

List the interagency consultation in the chart provided below.

Agency Type	Agency Name
Department of Social Services	-DSS Special Services Unit
	-Adolescent Foster Care Unit
	- DSS Planner
RHYA Providers	- Bridges for Youth & Families
	- Learning Web Youth Outreach
Other Public, Private and/or Voluntary Agencies	- Mental Health Department
	-Alcohol and Drug Council
	-Probation Dept
	-Cayuga Addiction Recovery Services
	-Human Services Coalition: Continuum of Care Committee -Housing Task Force -Teen Pregnancy/Parenting Program

*This Appendix is required only if the county receives RHYA funding.

APPENDIX B-6

List of Required Interagency Consultation – Youth Development

List the interagency consultation in the chart provided below.

Agency Type	Agency Name	Dates or Frequency of Meetings*
Taskforce	Homeless and Housing Task Force and Continuum of Care	Monthly
	Family Court Advisory Council	Monthly
	Criminal Justice Advisory Council	Monthly
Coalition	Community Coalition for Healthy Youth	Monthly for board; 6 committees also typically meet monthly
	Coalition for Families	Monthly
	Human Services Coalition	Monthly
Youth Board	Tompkins County Youth Services Board	Monthly
	Tompkins County Human Services Cabinet	Monthly
Parent	Ithaca Public Education Initiative	Monthly Sept. - June
	Expediter (our county's CCSI network)	Monthly
Youth	Youth transportation access committee	Monthly
	Youth employment council, WIB, WIA, Summer Youth Employment providers	Monthly
	Recreation Partnership and Municipal Recreation Directors	Monthly for Rec. Partnership; quarterly for rec. directors
Community Providers	9 local youth commissions & community councils	Most meet monthly, some slightly less frequently
	CHAMPS (Child and	Monthly

	Adolescent Alliance for Mental Health Planning and Services)	
	Health Planning Council Community Health and Access Committee	Monthly
Municipal Youth Board	Ithaca Youth Bureau Advisory Board	Monthly

*List either dates of meetings or frequency (e.g., every third Wednesday of the month)

Detailed meeting information does not need to be included in the county plan, but districts are directed to maintain meeting agendas and/or minutes for a period of five years.

APPENDIX C

List of Data Sources Used In Needs Assessment

Instructions: The list below contains common data sources often used in county planning. Please check all sources your county has used in the needs assessment performed for this plan. The list is not all-inclusive – if you have other sources of data, please indicate those as well.

Source	Check all used
1. NYS Touchstones Kids County Data Book	<input checked="" type="checkbox"/>
2. Kid’s Well-being Indicators Clearinghouse	<input checked="" type="checkbox"/>
3. Monitoring and Analysis Profiles	<input checked="" type="checkbox"/>
4. Child Care Review Service	<input checked="" type="checkbox"/>
5. U.S. Census Data	<input checked="" type="checkbox"/>
6. OCFS Data Warehouse Reports	<input checked="" type="checkbox"/>
7. OCFS CFSR Data Packets	<input checked="" type="checkbox"/>
8. Adult Services Automation Project (ASAP)	<input type="checkbox"/>
9. Quality Youth Development System (QYDS)	<input checked="" type="checkbox"/>
10. Child Trends Data Bank	<input checked="" type="checkbox"/>
11. Prevention Risk Indicator/Services Monitoring System-PRISMS (OASAS)	<input type="checkbox"/>
12. NYS Department of Health	<input checked="" type="checkbox"/>
13. Surveys	

a. Communities That Care	<input type="checkbox"/>
b. Search Institute Survey	<input type="checkbox"/>
c. TAP Survey	<input type="checkbox"/>
d. United Way (Compass Survey or other)	<input checked="" type="checkbox"/>
e. Other (specify)	<input checked="" type="checkbox"/>
14. YASI Data	<input type="checkbox"/>
Other Data Sources (specify)	
15. JDAS	<input type="checkbox"/>
16. CU Program on Applied Demographics	<input checked="" type="checkbox"/>
17. 2008 & 2010 NY Youth Development Survey (Tompkins Results)	<input checked="" type="checkbox"/>
18. 2010 Independent Living Survey	<input checked="" type="checkbox"/>

Child and Family Services Plan Program Narrative

I. Outcome Framework/Mission/Vision

1. If the district has one, please enter the district’s outcome framework, mission, and/or vision. (If your district does not have this, leave this area blank.)

The Tompkins County Youth Bureau, renamed the Tompkins County Youth Services Department in 2003, was created in 1977 to plan, facilitate and coordinate youth services within Tompkins County. We are a department of Tompkins County government. County Youth Services Director, Amie Hendrix, is directly responsible to the Tompkins County Administrator, Joe Mareane, who, in turn, is responsible to the Tompkins County Legislature. (A county government organizational chart is included in Section VI as Appendix C.)

Mission: The Tompkins County Youth Services Department invests time, resources and funding in communities to enable all youth to thrive in school, work and life.

Vision: We are committed to creating, facilitating and shaping desirable future realities for and with youth. It is our vision that staff, together with collaborative partners, accomplishes our work in alignment with these core values:

- Empowerment
- Fairness
- Innovation
- Integrity
- Organization
- Stewardship

Tompkins County Social Services Department's mission is to efficiently provide benefits and services for the residents of Tompkins County that both care for those unable to meet

their needs and encourage opportunity for independence. Our vision is to have everyone in this community--particularly our clients--know this is a place where every effort will be made to help them, and where every individual will be treated fairly and with respect, and to have a superbly well-trained staff who are proud of their agency and their skills, and who share a common sense of privilege at doing this important work.

The framework of practice in Child and Family Services at the Department of Social Services is consistent with the OCFS framework. It includes values and principles of safety, family preservation, child and family development, embracing diversity, belief in potential for change, and practices such as family centered casework, building on strengths, community based care through partnerships, partnerships with the community, and use of authority when necessary and appropriate to assure safety while seeking to maintain a helping relationship. Services are developmentally appropriate, family centered, community based, locally responsive, evidence and outcome based.

2. Describe your district's demographic, economic, and social characteristics.

Located in the Finger Lakes Region of Upstate New York, Tompkins County includes a population of 101,564 living in urban, suburban and rural landscapes with an uncommon mixture of beautiful natural features, farms, a vibrant urban center, internationally renowned academic institutions, and pockets of urban and rural poverty. Tompkins County encompasses 476 square miles around the southern end of Cayuga Lake and includes one city, nine towns and 6 villages with a total population of 101,564. Fifty eight percent live in an urban/suburban area; 42% live in a rural area.

We work in a community that offers both opportunities and challenges. Tompkins County is home to three institutions of higher education: Cornell University, Ithaca College, and Tompkins Cortland Community College. Total enrollment is nearly 30,000 students (28% of the County's and 58% of the City of Ithaca's total population). The large concentration of college students has unique impacts on our school-age population.

The population increased by 5.2% from 2000 to 2010. The largest age group in Tompkins County is aged 18-24 due to our three colleges. The ethnic diversity of Tompkins County includes a white majority (82%), 4% are Black/African American, 9% are Asian/Pacific Islander, 4% are Hispanic, and 3% are 2 or more races. Our rural towns are over 93% White.

The County is one of great contrasts; while 92% of adults aged 25+ have a high school degree or higher, and the median family income for families with children under 18 is higher than the state average, a significant proportion of the population does not experience economic wellbeing. For example, 35% of youth attending public school receive free or reduced lunch; rates have increased by over 100% in one school district over a 2 year period. Others have increased between 10-25% in the same time period. Overall, 15.9% of children and youth aged 0-17 are living below poverty.

Ninety percent of youth earn Regents Diplomas, while 2% do not complete high school. Post high school, 88% intend to attend a 4 or 2 year college, 8% intend to work or join the military, while 5% have no plan.

II. Planning Process

1. Describe the district’s planning process and how that consultation informed your district’s needs assessment, priorities, and outcomes.

The planning process is ongoing throughout the year in several forums. See prior Appendices. The Human Services Cabinet meets monthly and includes the Youth Services Director, the DSS Commissioner, the Mental Health Commissioner, the Probation Director, the Health Department Director, and the Director of the Office for the Aging. The Youth Services Board meets regularly to guide youth development planning. The FAR Advisory Board which includes community volunteers, school representatives, providers, family advocates, and youth meets quarterly. Meetings were held with Child Welfare staff. A public hearing was held 9/12/11.

The Tompkins County Youth Services Department has begun the implementation of a County-Wide Needs Assessment. This process began in May of 2011 and the data collection will conclude in December. This process involves working with multiple agencies, organizations, schools and communities to identify the needs. The overall goal of the Tompkins County Youth Needs Assessment is to increase the understanding of what the needs, gaps and current standing are of young people throughout Tompkins County. This assessment will allow us to:

- Rebrand human and community development in ways that connect with people
- More systematically commit to making the case for community and human development.
- Develop ways to engage our broad constancies in understanding the important issues around youth and being able to articulate those in an understandable manner.

At this time this assessment is currently underway. This assessment will guide future priorities and outcomes.

III. Self Assessment

1. Describe successes and achievements the district has experienced since the last plan update in each of the program areas listed below.

Child Protective Services

Despite an inability to fill some positions when staff were out, caseload sizes typically remain within the standard. Despite a decrease in funding for Family Treatment Court the service continues. Family Assessment Response has been well received by most of our community, families, and staff, and our practice continues development, with the assistance of our community and our FAR Advisory Board. Over 60% of CPS reports receive the Family Assessment Response. An OCFS--SUNY historical comparison study shows statistically significant difference in the need for government intervention for Tompkins County families who received the family assessment response and a difference,

	<p>although not statistically significant in the need to file neglect or abuse petitions in Family Court. Family Assessment Response continues to work to develop a partnership and teamed response with Domestic Violence and Substance Abuse service providers. CPS now has access to a CASAC, on site, to assist with assessments and engagement. People involved with CPS and Child Welfare Services have access to Community Connections, parent mentors who work to improve communication between parents and CPS. Despite no increase in funding in several years, Franziska Racker Centers continues to provide Family Team meetings for families involved with Child Welfare. Timeliness of CPS safety assessments is increasing. Hundreds of families involved with CPS are being assisted with emergency and basic needs not available elsewhere in our community (eg. trash tags, trash removal, recreational activities for children, laundramat expense, housing repair, car insurance, ect) through a grant from the Casey foundation and continued funding from OCFS (through 6/30/12)</p>
<p>Child Preventive Services</p>	<p>Despite reductions, some effective preventive services such as YAP, TAP, DAP, Facilitated Visitation, Community Connections, Family Team Meetings, Diversion, Respite, MST, and some COPS programs-- Family Support Services, Parenting Skills workshops, Advocacy Center Youth Services, and the Primary School Family Support Program continue to be available to people receiving preventive services. Concrete services such as transportation, housing, employment, day care are available in some situations. Child Welfare now has access to a CASAC, part time, on site, to assist with assessments, engagement, and goal setting.</p>
<p>Foster Care</p>	<p>Despite a dramatic increase in the number of children in foster care without an increase in staff or community services, we have been able to near the target contact rate with children in foster care. (87% v. 90%). We have been able to continue Family Team Meetings and Life Skills Services. Although funding was eliminated for foster and adoptive parent support group, volunteers continue the support.</p>
<p>Adoption</p>	<p>We have seen an increase in the number of children moving to adoptions without an increase in staff and we have been able to come nearer to the monthly</p>

	<p>contact rate with children in foster care awaiting adoption.</p>
<p>Detention</p>	<p>Detention use reduced by 50% from 2005 to 2010. Because of a small allocation through the Supervision and Treatment Services for Juveniles Program we will be able to increase or enhance some services (through 3/31/12) in order to decrease use of detention and residential services. These include MST contingency management, Electronic Monitoring, and Youth Advocates Program.</p>
<p>Youth Development</p>	<p>MUNICIPAL YOUTH SERVICES SYSTEM (MYSS) In 2010, 3001 youth were served by MYSS.</p> <p>As budget reductions occurred in 2010 and 2011 it was important for CYS staff to provide information to all the local MYSS members and a Primer on the system was developed.</p> <p>To further evaluate the system all of the local volunteer group members were pulled together for a MYSS/Commission meeting facilitated by Denise Dyer from OCFS. This meeting allowed the groups to discuss what was working in their communities and strategies for going forward.</p> <p>All municipal planning groups have held ongoing meetings.</p> <p>Due to funding reductions, CYS staff have helped many municipalities write and receive grants from United Way grants and other foundations.</p> <p>In 2011, a process which will cause a restructuring of the MYSS structure has begun in response to the reduced funding levels. Working with communities that attend the same school district (Ithaca City School District) this reorganization has begun and is at its infancy stages.</p> <p>With less available funding the MYSS has faced challenges of ways to provide services and how commissions/volunteer groups will operate. New protocols are being established to help define how MYSS will operate as communities look to provide services.</p> <p>YOUTH EMPLOYMENT</p> <p>CYS staff continued to provide coordination to 4 main providers of summer youth employment.</p>

Approximately 250 youth received jobs in summer 2011. We will continue to meet with staff from agencies to brainstorm ways in which youth can receive employment skill training, although with lack of funds youth participation may be voluntary.

Our CYS contract with JobLink came to a close in 2011.

CYS staff worked with JobLink to prepare workshops to assist students with achieving the National Work Readiness Credential.

RECREATION PARTNERSHIP

In 2010, the Recreation Partnership served 3,688 youth.

AGENCIES

In 2010 TCYS funded agencies served 1,749 young people.

All funded agencies were monitored and met their outcomes.

With the help of CYS Bridges for Youth and Families applied for the Federal BASIC Center grant.

The Youth Board's Resource Allocation Committee met and prepared their funding recommendations for 2012.

COPS funding has been an important source of funding for several of the programs for which CYS provides some match. The \$ loss offers an ongoing challenge.

COMMUNITY COALITION FOR HEALTHY YOUTH

Hosted an annual retreat

Members of CCHY participated in the CADCA Academy graduation; where they learned they were nominated for national award.

Drug Collection events were co-sponsored by CCHY.

Youth trained in the national Above the Influence campaign marched in Ithaca Festival Parade and developed a calendar of their photographs depicting the behaviors that they are above the influence of.

CCHY coordinated with TST BOCES to administer the Youth Development Survey in all of the

Tompkins County School districts. From that survey there have been many presentations as well as a document that summarizes the highlights of this survey.

The renewal grant for CCHY was submitted.

CCHY worked with the Sheriff and District Attorney to develop radio ads about not providing alcohol to underage youth.

CCHY explored the following grants: DFC mentoring; SPF/SIG; EUDL

COUNTY YOUTH SERVICES DEPARTMENT (CYS)

The Youth board grew with new membership and developed a new committee structure.

CYS worked in conjunction with the Youth Board to develop the CYS Mission, Vision and Values.

CYS collaborated with the Community Foundation of Tompkins County to provide a forum for school nurses and nurse practitioners to come together to be celebrated and listened to about trends in their environments.

A new guide to family court "Family Court and You Guide" was developed with the assistance of CYS staff.

TST BOCES and CYS co-wrote a grant funded by NYS DOL to promote 21st Century Learning Skills knowledge between STEM teachers and the workplace. A successful pilot was held in 2010 with 5 teachers and 4 worksites. During 2011, the Educator in the Workplace Project included 11 teachers participated at 5 worksites. The Educator in the Workplace grant was awarded and the first year of programming was completed in July 2011

Monthly youth worker brown bag lunches were held & a brochure was developed to support these.

A CYS annual report & agency brochure were developed and distributed.

CYS and agencies advocated around PPIP & state budget.

Town & County profiles were developed and shared with local municipalities.

The 2011 Summer Camp Guide was created and distributed to all schools and agencies/organizations.

The previous Program Management Specialist Karen Coleman retired and a new half-time PMS David Sanders was hired.

The 2011 Needs assessment kicked off with an initial meeting and the formation of a steering committee. Sub-committees examining age groupings have begun to dive deeper into the needs assessment pieces and this process will continue throughout the remainder of 2011.

CHAMPS

CYS staff participated as part of the Children and Adolescent Mental Health Planning System to enable schools, youth and families to better access mental health services. The culmination of a 3 year system planning grant has brought about linkage agreements between 5 school districts and mental health services, provided training to school staff on how to recognize serious mental health issues and provides a framework to continue to break down the stigma of mental health issues.

Runaway & Homeless Youth

Five hundred sixty one youth received services from our 2 funded RHY programs during 2010.

RHY COORDINATOR

As County Coordinator for Runaway and Homeless Youth services, CYS staff person Nancy Zook carefully reviews quarterly and annual program reports from RHY providers to keep abreast of program use, waiting lists, and special concerns. She monitors each program annually and additionally tracks the overall RHY system. As Coordinator, she convenes RHY providers monthly to discuss common problems, to share information, and to ensure the referrals between programs are working smoothly. She participates actively in creating the County's Continuum of Care group required to secure HUD funding and she also has had responsibility for recruiting and certifying Host Homes for the Bridges for Youth and Families Program. Finally, she compiles profile information and services information from OCFS RHY Surveys each year.

The RHY Services Coordinator is also responsible for ensuring that transportation for educational purposes is provided for all youth served by RHY funded programs; this is accomplished by her being available by phone and through frequent meetings with all RHY providers and school districts to discuss any problems or questions. She is also available to school McKinney Vento liaisons to discuss individual situations. In addition, she also serves on the NYS RHYA Planning Committee which meets quarterly in Albany.

EXPANDED PROGRAM SERVICES

-In addition to serving approximately 350 youth aged 16-21 (117 intensively) the Learning Web Youth Outreach Program secured a TILP grant in 2009 to support 20 youth in a new Housing Scholarship Program. The RHY Coordinator serves on the Housing Scholarship Team to review youth applications and discuss policy.

- The Bridges for Youth and Families program (Interim Family program) served 70 youth in 2010 and has nearly completed its final year of funding through the Federal Basic Center Grant program. It has been recently announced that Bridges will receive the Federal Basic Center Grant over the next three years. Currently there are 3 host families with capacity to host 4 youth aged 16-21. In addition, Bridges provides 4 Anger Management skill groups three days a week for 10 weeks for a total of 32 youth.

INDEPENDENT LIVING SURVEY

-The Independent Living Survey (ILS) Project documents the scope and needs of youth homelessness in Tompkins County. A joint project between the Learning Web, Cornell University and the Tompkins County Youth Services Dept, it was first undertaken in 2004, 2007 and again in 2011 for the Tompkins County Continuum of Care. The 2011 project has released preliminary data that, similar to the two previous survey projects, continues to depict a population of young people who exhibit high levels of unhealthy, high-risk behaviors as well as a high degree of vulnerability and victimization in their daily lives. There were 225 youth participants in the

	<p>2011 Independent Living Survey. This information will be used to guide our planning for continued service needs.</p>
<p>Domestic Violence</p>	<p>DSS and the Advocacy Center are working towards further collaboration and a teamed approach. DSS staff were provided with training. Advocacy Center staff are available for group consults at DSS and services for victims.</p>
<p>Adult Protective Services</p>	<p>Adult Protective Services (APS) worked with the American Red Cross of Tompkins County homeless shelter to create 7 SRO apartments. Our County has a significant gap in affordable appropriate housing for our APS clients. The partnership with the Red Cross enables us to place difficult to house APS clients directly from the homeless shelter into SRO apartments.</p> <p>We continue to use HUD Housing First funds for APS clients to rapidly re-house them and to prevent eviction. In addition, we have been able to stabilize housing for individuals who might otherwise be a protective client due to their homelessness.</p> <p>In May 2011 we began an APS Unit process review. The review is being conducted by our Staff Development Coordinator and our Program Development Specialist. We are evaluating all of our policies, procedures, and casework practices to work more effectively with our clients.</p> <p>We also are in the process of redesigning our Protective Payee program. We anticipate purchasing software by the end of the year. This project will enhance our financial management system by streamlining processes and creating efficiencies.</p> <p>We added a Medicaid Social Welfare Examiner to the APS unit. This staff person works specifically with our APS clients to ensure that their Medicaid determinations and recertifications are completed in a timely manner. This staff person also assists long term care clients who are in nursing homes and who have been referred to APS because they have not yet been determined Medicaid eligible and are at risk of being discharged from the nursing home due to failure to pay nursing home fees.</p>

	The DSS CASAC worked successfully with a substance abusing client using a harm reduction model of treatment.
Child Care	<p>Successful implementation of the Child Care Time Attendance [CCTA] system.</p> <p>Utilized accredited option to pay 155% for non-traditional hours to one FDC provider.</p> <p>Increased number of legally exempt child care providers that tend to serve parents that work non-traditional hours.</p> <p>Successful enrollment of legally exempt group summer camps.</p>

3. Noting the data and trends as identified in Appendix C; and the cumulative district consultations (Appendices B-1 to B-6), describe the underlying conditions or factors that influence your performance in meeting the needs of children, youth, adults and families (as applicable) in each of the following program areas:

Child Protective Services	CPS caseloads tend to peak (and timeliness of safety assessments tend to decrease) when staff are out on leave, when there is turnover, or when we have open positions we are not allowed to fill. Connections failures, such as in August 2011, also impact timeliness. There is disproportionality in number of reports particularly for African American families. We have a high rate of recurrence and a high re-reporting rate and a high rate of reporting by mandated reporters. Re-reporting is influenced by a stricter interpretation of mandated reporting laws, including when CPS and Child Welfare services are already involved with a family and among DSS staff. Substance abuse providers, CPS staff, and Family Treatment Court staff observe an increase in illegal drug use in our community.
Child Preventive Services	Preventive services-- mandated, COPS, community based services and early intervention services are being reduced and are stretched.
Foster Care	The population in foster care is increasing, different than the rest of the state. This is due to Tompkins County's traditionally high placement rate as well as the length of time it is taking for our system to help children return home, or achieve permanent homes with relatives, adoption, or independent living. A

	<p>number of newborns have come into foster care recently. The majority are CPS placements. We have also seen parents deciding to surrender their newborns for adoption. There is disproportionality in children entering foster care and in foster care, particularly in the African American population. It is difficult to recruit foster homes at the time we need them. More children are being placed in institution and group care and some are staying there because of lack of a family resource. Our community is relying more on congregate care for children. Congregate care days used have increased to 1992 levels (from 2602 care days used in 1997 to 5958 care days used in 2010. The number of children in institution level care is 21, This has been increasing since 1997, when the number of children in (RTC) institution level care was 7. The number of children in OCFS institution level care has decreased to 0, the lowest it has been since 1993 due to the collaboration with OCFS, DSS, and the Youth Advocates Program. Some of these youth have had successful discharges.</p>
Adoption	<p>We have experienced an increase in adoptions. We have seen families who are not involved with child welfare services deciding to surrender their newborn(s). We are seeing more older children for whom it is very difficult to find an adoption resource. We experience delays in adoptions due to delays in filing adoption petitions, the lengthy process of termination of parental rights, the lengthy process of negotiating post adoption agreements, and birth parent appeals. We have also experienced adoption disruptions, particularly for older youth.</p>
Detention	<p>Funding for Respite as An Alternative to Detention stopped, and staff are trying to continue the service on their own. Detention use increased. It is difficult to recruit and approve respite providers. Runaways continue to be placed in detention.</p>
Youth Development	<p>State and local funding was uncertain for 2011 until half way through the year. This made planning and service delivery for agencies and CYS staff. Some programs continued on even with the possibility of significantly reduced funding. The worst was not to happen, but considerable time, energy and resources was spent on advocacy and education efforts both at the state level and in Tompkins County.</p>
Runaway & Homeless Youth	<p>As noted above, the Independent Living Survey</p>

provides us with ample information regarding the barriers faced by RHY youth:

Affordable Housing

62% of youth reported that affording housing was their top need.

80 % of youth said they stayed in multiple places in the last year.

Of these youth:

29 % reported that they stayed outside, in a vehicle, or abandoned building.

12 % reported staying at the emergency shelter.

Hunger

40% of youth reported skipping a meal because they couldn't afford food.

Almost half of these youth skipped a meal on a weekly basis.

27% reported not eating for a whole day due to lack of money for food and of this group

43% skipped eating for a whole day on a weekly basis

Unemployment

60% of youth reported being unemployed.

Of the 40% who were employed less than half were employed 30 or more hours

60% of those who were unemployed had been looking for work for 6 months to one year.

These youth are not collecting unemployment insurance nor have savings to tide them over until they find a job.

Victims of Violent Crime

57% of youth reported that they were threatened or injured by someone with a weapon in the last year.

47% said that they had been threatened or injured 2-3 times or more in the last year.

Substance Abuse

78% of youth reported that they used alcohol and 79% of youth used marijuana.

Of this grouping:

- 36% reported using substances daily
- 23% used 2-3 times per week
- 16% used on a weekly basis.

Transportation

58% of respondents listed lack of transportation as a top need.

Summary

The top 5 needs reported by youth surveyed are:

1. Available Housing
2. Affordable Housing
3. Transportation
4. Finding Employment
5. Education

A majority of youth listed their goals to be:

- a good job
- going to school
- owning a home
- raising a family

The youth surveyed expressed a need for help from adults in our community.

19% of youth reported having no one who they can turn to for support.

Peers similarly stressed and vulnerable, were the most significant sources of support reported by youth at 70%.

29% of respondents said they could turn to family members for support.

25% of youth reported that a top need was “someone to talk to.”

Domestic Violence	Staffing, and the ability to work with children and victims has been affected by decreases in COPS funding
Adult Protective Services	We have seen an increase in referrals of individuals who are in need of representative payee services. Many of these individuals have been in unstable

	<p>situations for a significant period of time before being referred to APS. Failure to refer individuals to APS as soon as a need is identified means that clients are at risk for longer periods of time. It can take months to stabilize their housing, their health, their bills, and their diet.</p> <p>Finding community services to meet their needs is often difficult due to the some of the challenging behaviors that APS clients may have. There is little or no funding for supportive services specifically for APS clients.</p> <p>We are also seeing an increase in APS cases where long term care services are also needed. Medication management is becoming a serious issue as our clients age.</p> <p>Allowing help in the home or moving from home to a more restricted environment is difficult and many of our aging clients lack the capacity to understand the health and safety risks in their living arrangement.</p> <p>A number of our our elderly APS clients also have substance abuse issues that impact their mental health.</p>
<p>Child Care</p>	<p>Co-parenting relationships, grandparent caregivers, two families sharing a household, multiple births, and many more configurations are creating the need for alternative child care models.</p> <p>Our community needs to be able to attract a younger workforce to replace the baby boomers, and these parents will come with child care needs, driving up the demand side. The younger generation of workers demand a work/life balance, which includes flex scheduling and flex workplace. While this gives them more time with their children, it seriously challenges the existing regulated system of care.</p> <p>Matching parents' needs for non-traditional hours of care [evening, weekends, variable schedules and part day care] with traditional child care that operates during the work week from 7 am to 6 pm is difficult and almost non-existent in the regulated care system.</p> <p>Commuter rates in and out of the county mean more child care may be needed in our community. The exact numbers are hard to project. Child care crosses</p>

county lines, but there are barriers, both regulatory [child care subsidy eligibility are defined by county government; funds are allocated to counties] and administrative {CCRR funding is by county and limits a regional approach to referrals and other services] to a regional services system.

Child care in New York State has moved from a system of support to one of risk management. There has been a significant increase in the number of regulations. This has contributed to the loss of family child care homes in Tompkins County. At one time, Tompkins County had as many as 100 family child care providers. In 2000, the rate began to drop. Today, the number of family child care providers has reduced more than half to less than 50 [does not include group family day care homes]

It comes as no surprise that the number of Children needing care exceeds the number of formal spaces. Based on the Labor Force participation rates of working parents with young children [69% in our county] there are approximately 3000 children under the age of 5.5 years needing child care. There are roughly 1200 regulated child care spaces for children not yet in school. Therefore, we have regulated care for less than two-thirds of the children of working parents.

Child care costs in New York State ranks as one of the highest in the nation. Tompkins County, especially in the City of Ithaca, although not the highest in New York State, clearly surpasses the rate of care in surrounding rural areas.

A shrinking portion of low income families have access to regulated child care. Quality matters to parents, but the high cost of child care, in combination with dissatisfaction with the quality of child care, and the lack of flexibility in child care arrangements is causing many families to opt out of the regulated child care programs. It is estimated that one-third or more of the children in Tompkins County are in unregulated care.

General child care subsidy rules have serious gaps. Families often have a limited understanding of the

rules. Child care providers are often left with unpaid bills or large lapses in payments. The system doesn't work well for anyone. Low income parents have extremely limited care options, which effectively eliminate any choice they may have about the quality of care.

Many child care providers do not have access to computers [particularly low income providers] to utilize the Child Care Time and Attendance system. In addition, the additional cost of ongoing internet service may prevent utilization of CCTA.

The Summer camps are regulated by the Department of Health, but they also have to enroll as legally exempt group programs with each subsidized family. This is confusing and time- consuming for the low-income parents and summer camps.

The decrease in the subsidy dollars available for families means fewer families are able to access the help necessary to work and provide care for their children.

Tompkins County lost two long-time day care centers.

The Child Development Council has seen an increase in emergency scholarships requests when there are gaps in the subsidy system. There is no source of ongoing funding for this scholarship program.

IV. Priority Program Areas

From the Self Assessment in Section III, please identify the program areas that the district has determined to be priorities.

The needs which are priorities are: Adequate staffing to continue to respond to CPS reports, to provide regular home visits when children are at risk, and make contact with foster children. Community based services, and collaborations and relationships between providers and the district which facilitate safety and healthy development of children, including those children identified as at risk where substance abuse, domestic violence, mental health and/or involvement with the juvenile justice system are concerns; more foster, respite, and adoptive homes and support for older special needs children and their families and a need to address racial disproportionality in child welfare and juvenile justice.

Priorities for APS include strengthening our relationship with discharge planners at area hospitals; strengthening our relationship with law enforcement; educating the community about the role and responsibilities of APS; increase community awareness of elder abuse; working closely with the local Continuum of Care to develop better housing options for APS clients who are difficult to house; work with the Office for Aging, the Human Services coalition and the United Way to develop and train a network of volunteers who can assist our aging APS; work with local substance abuse treatment agency to develop services geared toward the special needs of APS clients.

Priorities for child care include retention of additional standards for legally exempt enrollment, retention of existing regulated child care programs and increasing the supply of regulated providers, increasing the number of providers utilizing CCTA, and increasing the number of regulated child care programs that offer non-traditional hours and that are easily accessible in the bus line.

V. Outcomes

1. Outcomes are based on the district’s performance as identified through the data and trends noted in the Self Assessment. Outcomes should be expressed as desired changes within each program area to address the underlying conditions or factors as noted in the district’s self assessment. The outcomes must also be related to the use of OCFS funding, and/or required areas of services by the social services district and Youth Bureau. If the county receives RHYA funding, outcomes and strategies must be included and should address the coordination of available resources for runaway and homeless youth. Districts may incorporate outcomes from their Child and Family Services Review Program Improvement Plans. Districts are required to address at least two of the following State-determined adult service goals.
 - a. Impaired adults who self-neglect or are abused, neglected, or exploited by others will be identified, have their living situation thoroughly investigated, and be protected.
 - b. To pursue appropriate legal interventions to address situations where impaired adults are at risk of harm, are unable to make informed decisions, and are refusing necessary services.
 - c. To utilize multi-disciplinary community resources to improve assessments as well as develop service plans which reduce risk and protect adults.
 - d. To provide protective services in the least restrictive manner, respecting the adult’s rights to self-determination and decision-making.

List the district’s outcomes for each program area below:

Child Protective Services	Continue to improve timeliness Reduce recurrence of maltreatment Reduce re-reporting Address racial disproportionality Provide safety for children and support for families
Child Preventive Services	Strengthen child and family safety and well being and avert traumatic disruptions of families to foster care
Foster Care	Decrease maltreatment in foster care Improve timeliness of permanent exits for children

	<p>admitted to foster care Reduce the need for placements out of the community in institutions by providing services in our community which help youth succeed Improve stability in foster care Reduce disproportionality in placements in foster care by assuring minority families access to preventive services such as MST, Family Support Services, DAP, Mental Health, Substance Abuse Services, Advocacy Center, TAP, YAP, Facilitated Visits and Parenting Skills. Increase the number of foster homes and respite homes Decrease the need for children to be placed in institution settings outside of their communities.</p>
Adoption	Improve timeliness of permanent exits to adoption
Detention	Reduce the need for children to be detained
Youth Development	<p>Support high-quality community programs for underserved youth.</p> <p>Reduce the number of youth at risk of Foster Care & other expensive institutional placement.</p> <p>Connect people, programs and resources.</p> <p>Increase efficiency in the provision & administration of youth services.</p>
Runaway & Homeless Youth	<p>Provide youth with an Interim Families program, which allows youth to be placed in OCFS certified Host Homes for up to 30 days while a stable living situation is being developed.</p> <p>Serve youth countywide aged 16-20 who are homeless, unaccompanied by any positive adult caretaker and are the most vulnerable youth in our community through the achievement of outcomes including securing and maintaining stable housing, avoiding eviction, completing their education, decrease substance use and criminal activity and meet their personal financial responsibilities by increasing their employment skills and securing jobs.</p>
Domestic Violence	Support victims and children affected by domestic violence and hold batterers accountable for change through further collaboration with the Advocacy Center
Adult Protective Services	Have a strong relationship with local law

	<p>enforcement to ensure that impaired adults who are at risk of harm, are unable to make informed decisions, and are refusing necessary services are referred to APS as soon as they are identified.</p> <p>Pursue legal interventions when appropriate and ensure that the legal process is done in a timely manner</p> <p>Thoroughly investigate all situations involving impaired, self neglected adults, and/or impaired adults who are abused, neglected, or exploited by others.</p> <p>Ensure that impaired, self neglected adults, and/or impaired adults who are abused, neglected, or exploited by others are protected.</p> <p>APS clients will have access to effective substance abuse treatment.</p>
Child Care	<p>1) Facilitate child care providers utilization of the CCTA system.</p> <p>2) Support the expansion of legally exempt provider training.</p> <p>3) Increase the number of families utilizing child care subsidies.</p> <p>4) Work to facilitate one-stop shopping for low income parents to include applying for subsidies and obtaining child care through collaboration with the Child Development Council.</p>

2. Identify quantifiable indicators (measures) of the desired changes in order to track progress.

Child Protective Services	<p>Less than 25 % of caseworkers (2010 baseline) will have more than 15 open CPS investigations or assessments by 12/31/16.</p> <p>95% of 7 day assessments will be completed on time (baseline: 68% 2010) by 12/31/16.</p> <p>Reduce recurrence from 21.6% (spring 2011) to 16% (spring 2016)</p> <p>Reduce 6 month rereporting rate from 31.5% (2010) to 27% in spring 2016.</p> <p>Provide family assessments for at least 50% of CPS</p>
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	reports
Child Preventive Services	<p>Foster care placement rate will decrease from 2.9 to 2.5 by 2016</p> <p>Need for institution placement will decrease from 5958 care days (baseline) in 2010, to 3650 care days in 2016</p>
Foster Care	<p>Indication rate --as measured by the percent of children with an indicated report in CPS reports about children in Tompkins County foster homes will decrease from 25% (4 children out of 16, baseline in 2010) to 0</p> <p>Contact rate with children in foster care will increase from 87% to 90% by 2012 and maintain at least 90% contact through 2016</p> <p>Improve timeliness of permanent exits for admissions cohort from 39% (2010) to 50% in 2016.</p> <p>By year 5, 99% of children will experience two or fewer moves the following year after they are placed in foster care (baseline, 98% 2009)</p> <p>Decrease care day use in institution level care from 5950/year (2010) to 3650 in 2016.</p> <p>Achieve 90 certified foster homes by 2013 (baseline 85)</p>
Adoption	<p>Improve timeliness of permanent exits to adoption within 24 months for in care cohort from 33% (2008) to 40% by year 5</p>
Detention	<p>Reduce detention care days from 457/year (2010) to 300/yr by 2016</p>
Youth Development	<p>3,000 youth will be served annually via the Municipal Youth Services System programs which will provide high quality, positive youth development and prevention programs.</p> <p>Annually local agencies will provide targeted intervention services to at least 1,500 youth resulting in a reduction of PINS petitions, detention, runaways, substance use, & other risk behaviors.</p> <p>Developments will include the availability of the Summer Camp Guide and OJ guide into new formats starting in 2013, annual gatherings for care providers to hear from youth, and other methods as identified by the needs assessment will begin with the Needs Assessment results release in 2012.</p>

	<p>In 2012, increase the amount of trainings and discussions attended by youth service workers by 20% (baseline 2010 attendance 72). By 2016 the amount of trainings and length of trainings will be increased by 25% (baseline 2010 with 7 one hour training lunches held)</p>
<p>Runaway & Homeless Youth</p>	<p>In addition to maintaining the current level of direct services and the outcomes those programs currently achieve, the County Youth Services Department will coordinate planning efforts to address the following objectives:</p> <ol style="list-style-type: none"> 1. Increase the number and racial and geographic diversity of host homes available to provide emergency and short term housing for runaway youth under 18. Increase total number of homes from 4-6 . 2. Decrease by 60% the number of runaways referred to Probation as Persons in Need of Supervision. 3. Decrease by 50% the number of youth with runaway behavior admitted to non-secure detention. 4. Re-structure the process for connecting older homeless and independent youth to emergency shelter and services to assure that young people have easy access to appropriate services in the shortest time possible. 5. Decrease by 10% the drug and alcohol use of runaway and homeless youth. 6. Increase the availability of supported transitional housing for older, independent youth. 7. Increase the independent living skills of at least 50 youth in foster care and at risk of homelessness.
<p>Domestic Violence</p>	<p>There will be at least 10 group consults/year with Advocacy Center for CPS situations where domestic violence is involved</p>
<p>Adult Protective Services</p>	<p>Increase structured communication with local law enforcement by 50%</p> <p>Increase APS and Long Term Care staff's understanding of the legal aspects of APS measured using pre and post tests after trainings.</p> <p>Increase community understanding of APS and access to resources and legal remedies measured using pre and post suveys after community</p>

	<p>presentations by APS.</p> <p>Increase APS caseworker staff's skills in putting documentation together for court proceedings.</p> <p>Have an efficient Protective Payee program with a less then 90% error rate.</p> <p>Increase APS client access to appropriate substance abuse treatment.</p>
<p>Child Care</p>	<p>1) 85% of all eligible child care programs will utilize CCTA.</p> <p>2) Increase by 10% the number of legally exempt child care providers that receive enhanced rate.</p> <p>3) Increase by 10% the number of families utilizing child care subsidies.</p> <p>4) Child Development Council staff will have specified time and space each week at DSS to be accessible to parents to facilitate legally exempt enrollment or obtaining referrals for regulated care options.</p>

VI. Strategies to Achieve Outcomes

1. Describe strategies that will be implemented to achieve the identified outcomes, including those strategies that support your Child and Family Services PIP outcomes. Each strategy should include the timeframe for completion and a designation of what agency(ies) or department(s) is/are responsible for implementation. Explain how OCFS-administered funding supports achievement of outcomes. Strategies must be related to the achievement of outcomes. If the county receives RHYA state aid, the strategies must provide for the coordination of all available county resources for those populations.

<p>Child Protective Services</p>	<p>Strategies to improve timeliness: Continue to request staff when there is a vacancy and/or reconfigure staffing to meet caseload needs; continue practice of substitute supervisory approvals when supervisors are on vacation; use chain of command when there are issues cross county.</p> <p>Reduce recurrence and rereporting: Increase outreach and communication with mandated reporters, including our own child welfare staff, increase contact at the case level between mandated reporters and staff, identify those involved with families and build teams working with families, participate in technical assistance regarding recurrence</p> <p>Strategies for FAR %: Continue use of screening tool</p>
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	for track assignment, provide training opportunities and support to further develop practice, use Building Safety and Strengthening Families Framework for group consults.
Child Preventive Services	Strengthen relationships with community based care providers; use Family Team meetings; provide staff (and families) with access to CASAC on site.
Foster Care	<p>Decrease maltreatment in foster care by increasing contact with children in foster care and foster parents; improve timeliness of permanent exits for children admitted to foster care by continuing to review the situations of all children placed in foster care as early as 3 months in the permanency review committee; use family team meetings and identify family resources before placement and early on after placement; 3 staff will participate in family finding training through Glove House and OCFS.</p> <p>Reduce the need for placements out of the community in institutions by providing services in our community which help youth succeed, such as YAP, TAP, DAP, participate in community efforts for successful transition and discharge planning, and begin discharge planning at placement.</p> <p>Improve stability in foster care by increasing the numbers of foster homes and our ability to match children and homes, and through earlier concurrent planning.</p> <p>Reduce disproportionality in placements in foster care by assuring minority families access to preventive services such as MST, Family Support Services, DAP, Mental Health, Substance Abuse Services, Advocacy Center, TAP, YAP, Facilitated Visits and Parenting Skills.</p> <p>Increase the number of foster homes and respite homes through notices in newspapers, newsletters, continuing a monthly information meeting, and certification and approval process. Continue to improve retention by monthly newsletters, training, and support for foster parents, and a recognition event each year. Provide whatever support we are able to volunteers who run the foster parent psycho-educational support group which lost funding.</p>
Adoption	Participate in Family Finding training and develop and implement local protocols for Family Finding.
Detention	Reduce the need for children to be detained by using STSJP funding (through 3/31/11) to provide

	<p>Electronic Monitoring as an alternative to detention, MST contingency management, and increased YAP services. Continue to provide respite as an alternative to detention through approved respite providers and the William George Agency for Children's Services. Work with our Probation department and our Youth Services Department to find alternatives to detention particularly for the runaway population. Recruit, train, and approve additional respite providers. .</p>
<p>Youth Development</p>	<p>Working in coordination with Cornell Cooperative Extension Rural Youth Services, the Ithaca Youth Bureau, the Learning Web, school districts and other identified community providers, local municipal planning groups will advise on ways to provide opportunities to belong, create supportive relationships, support efficacy and mattering as well as provide opportunities for skill building in all rural communities reaching to 3,000 youth on an annual basis.</p> <p>The Youth Services Department will assist local agencies to annually provide targeted intervention services to at least 1,500 youth resulting in a reduction of PINS petitions, detention, runaways, substance use & other risk behaviors.</p> <p>The Youth Services Department will implement communication methods which connect parents, youth, and schools with community programs and help agencies to secure the resources they need to offer effective services will be enhanced via technological developments. Some of these developments will include the availability of the Summer Camp Guide and OJ guide in new formats starting in 2013, annual gatherings for youth care providers (parents, community youth workers, etc.) to hear from youth, and other methods as identified by the needs assessment will begin with the Needs Assessment results release in 2012.</p> <p>The Department and Youth Services Board will identify priority services and explore cost-effective ways of meeting youth needs, state requirements and the needs of providers and planning agencies utilizing the results of the 2011 Needs Assessment. At least one of the strategies that will be utilized will be to provide monthly training sessions to youth workers beginning in 2012.</p>

<p>Runaway & Homeless Youth</p>	<p>Through coordination with Bridges and the Learning Web Youth Outreach the following strategies will be utilized to achieve the aforementioned outcomes.</p> <p>By 2016, an increase the number and racial and geographic diversity of host homes available to provide emergency and short term housing for runaway youth under 18. Increase total number of homes from 4-6. These host homes will provide physical and psychological safety, appropriate structures and supportive relationships.</p> <p>By 2016, a decrease by 60% the number of runaways referred to Probation as Persons in Need of Supervision & decrease by 50% the number of youth with runaway behavior admitted to non-secure detention through the effective integration of family, school and community:</p> <p>Re-structure the process for connecting older homeless and independent youth to emergency shelter and services to assure that young people have easy access to appropriate services in the shortest time possible through the effective integration of family, school and community. This process will begin in 2012 and be completed by 2014.</p> <p>By 2016 a decrease of 10% in the drug and alcohol use of runaway and homeless youth through providing positive social norm behaviors.</p> <p>Increase the availability of supported transitional housing for older, independent youth. Transistional housing will provide physical and psychological safety, appropriate structures and supportive relationships. This process will begin in 2012 and be completed by 2014.</p> <p>Annually increase the independent living skills of at least 50 youth in foster care and at risk of homelessness by providing opportunites for skill building.</p>
<p>Domestic Violence</p>	<p>Invite Advocacy Center staff to FAR team meeting consults, CPS staff will participate in Domestic Violence team meetings</p>
<p>Adult Protective Services</p>	<p>By June 1, 2012 establish monthly team meetings with local law enforcement and community service providers to review APS referrals and current APS situations where law enforcement may be involved.</p>

	<p>Starting January 1, 2012 increase community awareness of the role and responsibilities of APS by holding 4 public presentations a year especially targeting underrepresented communities.</p> <p>Starting January 1, 2012 the DSS Legal Unit will provide ASP staff with 2 trainings a year. Topics will include, but are not limited to, applying for guardianship, the grounds for filing criminal charges against abusers, testifying, documenting events, and evidence requirements for the various legal proceeding involving impaired adults who are at risk of harm either through self-neglect or the neglect and abuse of others</p> <p>By January 1, 2012 purchase software that will streamline the protective payee program by automating certain processes that are currently done manually.</p> <p>By March 1, 2012 staff will be using and will be fully trained in all aspects of the new payee software.</p> <p>By March 1, 2012 have a process in place for the DSS CASAC to do case consults with ASP caseworkers as appropriate.</p>
<p>Child Care</p>	<ol style="list-style-type: none"> 1) Coordinate with the Child Development Council to offer grants for computers and/or access to computers and the Internet for providers to utilize the CCTA system. 2) Assist in promoting training for legally exempt child care providers. 3) Provide outreach opportunities and work in collaboration with other agencies to advertise the availability of child care subsidies. 4) Provide space and necessary equipment at DSS one day per week for staff of the Child Development Council to be accessible to parents to facilitate legally exempt enrollment or obtaining referrals for regulated care options.

VII. Plan Monitoring

1. Describe the methods and the processes that will be used by the district to verify and monitor the implementation of the Child and Family Services Plan and the achievement of outcomes.

We routinely collect data to monitor progress toward achievement of outcomes, and review it at least twice a year.

Data are collected on all contract programs for child welfare, adult protective, domestic violence and child care services. Monthly or quarterly reports, plus year-end evaluations are required. Reports address the number of clients served and information on outcome measures that were developed by agreement between the contract agency and TCDSS staff. All reporting requirements, including outcomes, are stated in the contract.

The TCDSS Program Development Specialist (Planner) conducts evaluations of both internal and external programs. Progress reports on outcome indicators are provided to the Planner and compiled for inclusion in reports for state and county funders. The Planner also conducts process evaluation of internal and external programs to assess the strengths, challenges, needs and service gaps faced by different programs. The results of these reviews are then used to identify solutions and develop and implement a plan for implementing these solutions in addressing service needs.

Data are also collected on youth development and preventive services. All agencies and municipalities that work with CY5 are monitored on an on-going basis. Agencies receive at least one annual site visit, while municipalities are governed by a youth commission or planning group charged with annual auditing by CY5 staff. These data are reviewed by the CY5 Director and staff and shared with the Youth Services Board.

Monitoring allows CY5 to provide assistance to agencies, municipalities and other service providers as needed as well as to track progression of outcomes. Using this plan's needs assessment and goals will allow us to identify, prioritize and track our progress toward meeting these goals. The CY5, Probation and DSS directors meet regularly to share data, do planning and monitor progress toward achieving outcomes toward our identified shared issues.

VIII. Financing Process

1. Describe the financing for the district's services.
 - a. Include general information about the types of funds used (e.g. federal, State, local, TANF, or innovative funding approaches). Include new uses of TANF or Flexible Funds for Family Services for program services. Include any innovative approaches to funding or new uses of funds to support the service delivery system.

Funds to implement strategies are sought from state, local, and private sources. TANF funds are used to support programs meeting the identified needs and outcomes. Priorities identified from the needs assessment and from community input guide the utilization of available resources. It should be noted that funds and services

are decreasing. Flexible Funds for Family Services allocation is being re-allocated to fund Child Care Assistance.

An innovative funding approach in Child Welfare Services was use of Casey Foundation grant funds. These funds were easily accessible for staff working in the Family Assessment Response to meet emergency needs not otherwise available in our community. The grant funds ended in 2011 and are being moved to more traditional child welfare funding.

CYS funding is derived from local and State funding as well as a Federal grant from SAMSHA for the Community Coalition for Healthy Youth. The state and local funding are used to meet the local youth recreation and development needs through contractual agreements with municipalities and agencies.

- b.** If purchase of service agreements are used, describe the criteria and procedures used by the district for selecting providers for all child welfare, adult protective, and non-residential domestic violence purchase of services (e.g. RFP process, news releases on availability of funds, sister agencies panel).

Typically the RFP process is used, unless the service is quite specialized.

CYS utilizes an RFP process to allocate all funding. The County Youth Services Board reviews the applications and allocates funding based on the priorities outlined by the needs assessments.

- 2.** Describe how purchase service contracts will be monitored.
 - a.** Describe procedures that will be used to ensure that the services being purchased are effective in meeting the outcomes as outlined in the contract and your plan. Include the frequency of monitoring, tools that will be used, and who will be involved.

Purchase of service contracts are monitored through reports, annual reports, and annual goal setting meetings, and as described in Section VII.

APPENDIX D

Relationship Between County Outcomes and Title IV-B Federal Goals

List each district outcome that supports or relates to achievement of the federal goals identified below. Many of your outcomes are listed under your Child and Family Services Review PIP, and should be included here.

Title IV-B of the Social Security Act, Subpart I

Goal 1: Families, including nuclear, extended, and adoptive families, will be strengthened and supported in raising and nurturing their children; in maintaining their children’s connections to their heritage; and in planning their children’s future.

Outcomes:

Reduce recurrence, re-reporting and the need for foster care

Strengthen and support families and reduce the need for traumatic disruptions to foster care

Goal 2: Children who are removed from their birth families will be afforded stability, continuity, and an environment that supports all aspects of their development.

Outcomes:

Children in foster homes will be safe: Reduce the indication rate for foster child reports from 25% (baseline 4 children out of 16 reported children in 2010) to 0 by 2016.

Improve stability for children in foster care: By 2016, 99% of children in foster care will experience two or fewer moves the following year after they are placed in foster care

Goal 3: Victims of family violence, both child and adult, will be afforded the safety and support necessary to achieve self-sufficiency (adult) and/or to promote their continued growth and development (child).

Outcomes:

Further support victims of family violence through collaborative consults and interventions by CPS Family Assessment Response and the Advocacy Center

Goal 4: Adolescents in foster care and pregnant, parenting, and at-risk teens in receipt of public assistance will develop the social, educational, and vocational skills necessary for self-sufficiency.

Outcomes:

Increase preparation of youth for discharge from foster care by increasing life skills related to employment, housing, interpersonal relationships, and daily living skills

Goal 5: Native American families, including nuclear, extended, and adoptive families, will be strengthened and supported in raising and nurturing their children; in maintaining their children’s connections to their heritage; and in planning their children’s future.

Outcomes:

All children in foster care who are identified as Native American will be referred to the Indian Child Welfare Office

APPENDIX E
Public Hearing Requirements

Complete the form below to provide information on the required elements of the public hearing.

Date Public Hearing held: 9/12/11 (at least 15 days prior to submittal of Plan)

Date Public Notice published: 8/18/11 (at least 15 days in advance of Public Hearing)

Name of Newspaper: Ithaca Journal

Number of Attendees: Approx 30

Areas represented at the Public Hearing:

- | | | |
|---|--|--|
| <input type="checkbox"/> Health | <input checked="" type="checkbox"/> Legal | <input type="checkbox"/> Child Care |
| <input checked="" type="checkbox"/> Adolescents | <input type="checkbox"/> Mental Health | <input type="checkbox"/> Law Enforcement |
| <input type="checkbox"/> Aging | <input type="checkbox"/> General Public | |
| <input checked="" type="checkbox"/> Other:
Human Services
Coalition, Community
Dispute Resolution,
Tompkins Community
Action | <input checked="" type="checkbox"/> Other:
OAR,
Family and Children's
Services, Probation,
DSS, Child
Development Council | <input checked="" type="checkbox"/> Other:
Catholic Charities,
Learning Web,
Neighborhood Legal
Services |

Issues identified at the Public Hearing:

The printed guide to DSS services is helpful, and the OJ guide to youth services is helpful. The question was posed whether there had been consideration of web based communication such as social medial contacts. Both DSS and Youth Services are giving consideration to the best ways to do that. The OJ guide is in a period of transition to wireless and web based but Youth Services is looking at making it more user friendly as well.

There was a question for Youth Services regarding trends. They are looking at fees for some programs and youth employment and jobs. Because of funding cuts to Youth Services, they are looking at whether they are still reaching needs and where to go to offset that if they are not. Youth employment is an unmet need. It is harder now for young people to find jobs, even though the youth population (14-18) is declining here, their ability to find jobs is also declining

There was a question about the racial imbalance in reporting to the State Central Registry of Child Abuse and Maltreatment and clarification there are more Tompkins County African American children reported to the state central registry than in the general population.

There was a question about planning and services for older youth in foster care and what services are provided for them. DSS contracts with Learning Web's Life Skills Program and other services, TILP, SILP, ETVs, medicaid coverage and the new law about referrals to Adult Protective Services before ending services for young people who need that service.

DSS was asked what are the strategies to reduce maltreatment in foster care. DSS explained the data cited in the plan: The measurement is the percent of foster children reported to the child abuse registry who are determined to have been maltreated. The strategies to reduce maltreatment are to increase contact with foster children and foster families, provide screening, training, and support to foster parents. DSS closes homes when there is an indicated report.

A comment was made about the effects of funding cuts for early intervention services such as those provided through COPS, and medicaid. And a question about why foster care numbers are trending upward in Tompkins County different than the rest of the state. DSS responded that the numbers in foster care are due to the numbers of children coming into foster care and the numbers discharged from foster care. Tompkins County has traditionally had a higher placement rate than the rest of the state and the numbers of children discharged home are declining and the number of children moving to adoption has been increasing here. It takes a long time to go through the Court process of termination of parental rights and adoption. In addition, we are seeing an increase in the numbers of families affected by substance abuse. In addition, we have a high rate of reporting by mandated reporters, advocacy and concern for children among citizens in our community. It was also noted that some county Judges in other places are reluctant to place children in foster care. And, that the economic climate makes it harder on families.

There was a comment that DSS is participating in the Early Childhood Development workgroup.

DSS was asked what kinds of reunification efforts are made for families with children in foster care, particularly those affected by substance abuse? Is there planning for mothers and children? There is training for staff, access to CASAC on site, Family treatment Court, and DSS is involved in planning for Magnolia House which will open.

There was a comment that it is too bad more members of the public did not attend this public hearing and a suggestion that departments reach out to get feedback from the people they work with, not just agencies, and a suggestion to tap into community of color and the faith community.

There was a question about how many people are working with Adult protective services, and whether a new supervisor will be hired. There is a senior caseworker supervising adult protective services and they work with about 150 adults. There was a question about how old the people APS works with are, and whether they are older or younger than 62. The biggest group is under the age of 62.

There was a suggestion that a tighter relationship between Long Term Care and Information and Referral and 211 could positively impact the outreach services Adult Protective Services is undertaking.

OAR would like to know more about Adult Protective Services and about services in general, the DSS guide is helpful.

The plan is posted on the Youth Services web site and suggestions, comments, and planning together in the future is welcomed by the Departments represented..

APPENDIX F
Program Matrix

Each district will enter their Program Information into the Welfare Management System (WMS). Instructions for completing this process are located in the Plan Guidance Document. Answer the questions below related to the information you entered into the WMS system.

1. Are there changes to the services your county intends to provide during the County Planning cycle?

No Yes

2. If there are changes to the services, please indicate what those changes are.

We may not be able to continue some preventive services if funding continues to decrease. At risk are mandated and non-mandated services. COPS programs such as PINS Diversion, Parenting Skills Training (mandated services), Family Support Services through the Child Development Council, Advocacy Center Youth Services, the Primary School Family Support Program by Tompkins Community Action, are submitted to the local legislature in the 2012 DSS budget as over target requests, and currently supported at a reduced level. Purchased mandated preventive services such as Family and Children's Services Dispositional Alternatives Program, Youth Advocates Program, William George Agency Therapeutic After School Program, Franciska Racker Centers Family Team Meetings, and Community Connections through Catholic Charities have almost exclusively been operating with no increase in funding or decreases in funding. Medicaid is slated to stop funding The Teen Parenting Program at the Child Development Council by the end of this year. Although our allocation for Child Care Assistance increased in 2011, the need for child care assistance exceeds the allocation and Flexible Funds for Families are going to be used to fund some child care in 2012. There is a risk that Child Care Assistance may not be able to be provided at the level it is being provided now.

APPENDIX G
Technical Assistance Needs

In the space below, describe technical assistance or training, if any, requested by the district to implement this plan. Please be as specific as possible.

Providing safety and reducing risk with families affected by substance abuse; strengthening families through visits; best practices strengthening families and reducing foster care placement and expediting permanency, best practice in alternatives to detention and working with youth involved with the juvenile justice system. Study of recurrence and development of strategies to reduce recurrence and re-reporting.

Various strategies and best practices in working with impaired adults and/or elderly adults who have serious substance abuse issues.

We request technical assistance in expediting the adoption process.

APPENDIX H
Memorandum of Understanding
Between the District Attorney's Office and Child Protective Services

Chapter 156 of the Laws of 2000 (the Abandoned Infant Protection Act) went into effect in July 2000, and was **amended effective August 30, 2010**. This law is intended to prevent infants from being abandoned in an unsafe manner that could result in physical harm to them. Please send an electronic copy of your signed MOU with your County Plan or include a narrative summary of the cooperative procedures to be followed by both parties in the investigation of incidents of child abuse and maltreatment, consistent with their respective obligations for the investigation or prosecution of such incidents, or as otherwise required by law.

- Copy of active MOU is being sent with the County Plan.
- Active MOU is not attached, but a narrative summary is provided below.

Narrative Summary:

APPENDIX I
2012 Estimates of Persons to Be Served

Required only if the district does not seek a waiver, as noted on Appendix A

Type of Care/Service	Total*	Children	Adults
Adoption			
Child Care			
Domestic Violence			
Family Planning			
Preventive Child Mandated			
Preventive Child Non-Mandated			
Child Protective Services			
Child Protective Services Investigation			
Unmarried Parents			
Preventive – Adults			
Protective Services Adults – Services			
Protective Services Adults – Investigation			
Social Group Services Senior Citizens			
Education			
Employment			
Health Related			
Home Management			
Homemaker			
Housekeeper/Chore			
Housing Improvement			
Information and Referral			
Transportation			

*Total equals children plus adults

County Child and Family Services Plan

Type of Care/Service — Foster Care	Total	Non JD/PINS Child	OCFS JD/PINS Child	DSS JD/PINS Child
Institutions				
Group Homes/Residences				
Agency Operated Boarding Homes				
Family Foster Care				
Unduplicated Count of All Children in Care				

Type of Care/Service – Adult	Total	Adults
Residential Placement Services		

APPENDIX J

Non-Residential Domestic Violence Services (Complete a Copy for Each Program)

In accordance with the Domestic Violence Prevention Act and subsequent budget provisions, districts are required to provide non-residential services to victims of domestic violence, either directly or through a purchase of service agreement. Whether provided directly or through a purchase of service, each program must be approved through the Child and Family Services Plan process. Non-residential domestic violence programs must comply with 18 NYCRR Part 462. Please provide the information required below.

County: Tompkins

Phone Number: (607) 274-5297

County Contact Person: Maryanne Banks
Maryanne.Banks@dfa.state.ny.us

E-mail Address:

SECTION A

Program Closure

Complete this section if an approved non-residential domestic violence program “closed” during the previous year.

Name of program:

Date closed:

Reason for closing:

SECTION B

Complete this section for each program that provides non-residential domestic violence services in the district.

To promote accuracy through the review and approval process, OCFS recommends that this section be completed by the non-residential DV program.

Agency Name:

Business Address:

Contact Person:

Telephone Number: () -

E-mail Address:

Program Requirements

1. Seventy percent of the clientele served must consist of victims of domestic violence and their children. This program is intended to be a separate and distinct program offering specialized services for victims of domestic violence.

Describe how the program is separate and distinct and how it fits into the overall agency.

2. Services must be provided regardless of financial eligibility; services must be provided in a manner that addresses special needs, including physically handicapped, hearing

impaired, and non-English speaking; and services must address the ethnic compositions of the community served.

Describe the eligibility criteria for clients of the non-residential domestic violence program and how special needs populations are accommodated.

3. There must be evidence that the program is needed, based on the number of persons to be served and evidence that the indicators used are realistic.

Provide an estimate of the number of victims of domestic violence needing non-residential services and description of the indicator/data used to determine that estimate.

4. Where are the non-residential domestic violence services provided?

Describe the type of location (e.g. at the business office, at the school, etc.). The specific should not be included and should not be identifiable from the information provided.

5. Explain how the location(s) where the non-residential domestic violence services are provided to ensure the safety of the persons receiving services and the confidentiality of their identities. Do not provide the location addresses.

6. All of the **core services** listed in 18 NYCRR 462.4 must be provided directly by the program, as defined in the regulations, and must be provided in a timely manner. For each of the core services listed below, include:

- a. Days and hours the service is available

- b. How the service is provided

- c. Where the service is provided, when the service is provided at a location other than the program location (i.e., accompanying the client to court)

- d. Details specific to this program other than program location.

Telephone Hotline Assistance

Include hotline operation hours and detail the methods currently being used for the operation of the hotline service (e.g. coverage, staff responsibility, any technology used).

Information and referral

Advocacy

Describe all types offered, including accompaniment.

Counseling

Describe all types offered, including individual and group.

Community Education and Outreach

Describe methods used, target audience, and messages conveyed. If there is more than one domestic violence provider in the community, describe how the outreach activities are coordinated.

Optional Services (e.g., support groups, children’s services, translation services, etc.)

- 7. Each program must employ both a qualified director and a sufficient number of staff who are *responsible for providing core and optional services*.

List each of the staff/volunteer positions responsible for providing non-residential services including title, responsibilities and qualifications.

- **Do not** give names
- Resumes **are not** required

Title:

Responsibilities:

Qualifications:

Title:

Responsibilities:

Qualifications:

APPENDIX K
Child Care Administration

Describe how your local district is organized to administer the child care program, including any functions that are subcontracted to an outside agency.

1. Identify the unit that has primary responsibility for the administration of child care for:

Public Assistance Families: Special Services

Transitioning Families: Special Services

Income Eligible Families: Special Services

Title XX: Special Services

2. Provide the following information on the use of New York State Child Care Block Grant (NYSCCBG) Funds.

FFY 2009-2010 Rollover funds (available from the NYSCCBG ceiling report in the claiming system):\$

Estimate FFY 2010-11 Rollover Funds\$

Estimate of Flexible Funds for Families (FFS) for child care subsidies.....\$381,000.00

NYSCBG Allocation 2011-12\$1,978,310.00

Estimate of Local Share\$70,752.00

Total Estimated NYSCCCBG Amount\$1,978,310.00

a. Subsidy\$2,095,166.00

b. Other program costs excluding subsidy\$112,248.00

c. Administrative costs\$222,552.00

Does your district have a contract or formal agreement with another organization to perform any of the following functions?

Function	Organization	Amount of Contract
<input type="checkbox"/> Eligibility screening		
<input checked="" type="checkbox"/> Determining if legally-exempt providers meet State-approved additional standards	Child Development Council, Registration, Inspection	
<input checked="" type="checkbox"/> Assistance in locating care	Child Development Council	
<input type="checkbox"/> Child Care Information Systems		
<input checked="" type="checkbox"/> Other	Child Development Council--In Home Quality Improvement	

APPENDIX L

Other Eligible Families if Funds are Available (Required)

Listed below are the optional categories of eligible families that your district can include as part of its County Plan. Select any categories your county wants to serve using the NYSCCBG funds and describe any limitations associated with the category.

Optional Categories	Option	Limitations
1. Public Assistance (PA) families participating in an approved activity in addition to their required work activity.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
2. PA families or families with income up to 200% of the State Income Standard when the caretaker is: <ul style="list-style-type: none"> <li data-bbox="240 737 862 810">a) participating in an approved substance abuse treatment program <li data-bbox="240 968 402 999">b) homeless <li data-bbox="240 1052 662 1083">c) a victim of domestic violence <li data-bbox="240 1136 837 1167">d) in an emergency situation of short duration 	<ul style="list-style-type: none"> <li data-bbox="922 737 1016 810"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <li data-bbox="922 968 1016 1041"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <li data-bbox="922 1052 1016 1125"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <li data-bbox="922 1136 1016 1209"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 	subject to 30 day approvals by DSS. If funding is reduced, we may need to lower eligibility standard to 150% of the SIS " " "
3. Families with an open child protective services case when child care is needed to protect the child.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Subject to 180 day approvals by DSS
4. Families with income up to 200% of the State Income Standard when child care services are needed because the child’s caretaker:		
<ul style="list-style-type: none"> <li data-bbox="240 1430 776 1461">a) is physically or mentally incapacitated <li data-bbox="240 1734 727 1766">b) has family duties away from home 	<ul style="list-style-type: none"> <li data-bbox="922 1430 1016 1503"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <li data-bbox="922 1734 1016 1808"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 	Subject to periodic review and approval based on timeframes designated by medical statements. If funding is reduced, we may need to lower the eligibility standard to 150% of the SIS "
5. Families with income up to 200% of the State Income Standard when child care services are needed for the child’s caretaker to actively seek	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If funding is reduced we may need to lower the eligibility standard to

Optional Categories	Option	Limitations
employment for a period up to six months.		150%
6. PA families where a sanctioned parent is participating in unsubsidized employment, earning wages at a level equal to or greater than the minimum amount under law.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

<p>7. Families with income up to 200% of the State Income Standard when child care services are needed for the child’s caretaker to participate in:</p> <p>a) a public or private educational facility providing a standard high school curriculum offered by or approved by the local school district</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><i>If funding is reduced, we may need to lower the standard to 150%</i></p>
<p>b) an education program that prepares an individual to obtain a NYS High School equivalency diploma</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>"</p>
<p>c) a program providing basic remedial education in the areas of reading, writing, mathematics, and oral communications for individuals functioning below the ninth month of the eighth grade level</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>"</p>
<p>d) a program providing literacy training designed to help individuals improve their ability to read and write</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>"</p>
<p>e) English as a second language (ESL) instructional program designed to develop skills in listening, speaking, reading, and writing the English language for individuals whose primary language is other than English</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>"</p>
<p>f) a two-year full-time degree granting program at a community college, a two-year college, or an undergraduate college with a specific vocational goal leading to an associate degree or certificate of completion</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>"</p>
<p>g) a training program, which has a specific occupational goal and is conducted by an institution other than a college or university that is licensed or approved by the State Education Department</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>"</p>
<p>h) a prevocational skill training program such as a basic education and literacy training program</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>"</p>
<p>i) a demonstration project designed for vocational training or other project approved by the Department of Labor</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>"</p>
<p>Note: The parent/caretaker must complete the selected programs listed under number seven within 30 consecutive calendar months. The parent/caretaker cannot enroll in more than one program.</p>		

<p>8. PA recipients and low-income families with incomes up to 200% of the State Income Standard who are satisfactorily participating in a two-year program other than one with a specific vocational sequence (leading to an associate's degree or certificate of completion and that is reasonably expected to lead to an improvement in the parent/caretaker's earning capacity) as long as the parent(s) or caretaker is also working at least 17½ hours per week. The parent/caretaker must demonstrate his or her ability to successfully complete the course of study.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>If funding is reduced we may need to lower the standard to 150%</p>
<p>9. PA recipients and low-income families with incomes up to 200% of the State Income Standard who are satisfactorily participating in a two-year college or university program (other than one with a specific vocational sequence) leading to an associate's degree or a certificate of completion that is reasonably expected to lead to an improvement in the parent/caretaker's earning capacity as long as the parent(s) or caretaker is also working at least 17½ hours per week. The parent/caretaker must demonstrate his or her ability to successfully complete the course of study.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>If funding is reduced we may need to lower the standard to 150%</p>
<p>10. PA recipients and low-income families with incomes up to 200% of the State Income Standard who are satisfactorily participating in a four-year college or university program leading to a bachelor's degree and that is reasonably expected to lead to an improvement in the parent/caretaker's earning capacity as long as the parent(s) or caretaker is also working at least 17½ hours per week. The parent/caretaker must demonstrate his or her ability to successfully complete the course of study.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>11. Families with incomes up to the 200% of the State Income Standard when child care services are needed for the child's caretaker to participate in a program to train workers in an employment field that currently is or is likely to be in demand in the future, if the caretaker documents that he or she is a dislocated worker and is currently registered in such a program, provided that child care services are only used for the portion of the day the caretaker is able to document is directly related to</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	

the caretaker engaging in such a program.		
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APPENDIX M

Reasonable Distance, Very Low Income, Family Share, Case Closing and Openings, Recertification Period, Fraud and Abuse Control Activities (Required)

Reasonable Distance

Define “reasonable distance” based on community standards for determining accessible child care.

The following defines “reasonable distance”: Any distance requiring less than 45 minutes travel time from parent or caretaker's home to reach the child care provider and is 25 miles or less, and when combined with the travel necessary to reach work or a work related activity, is less than an hour and 15 minutes. In the case of a parent or caretaker who must walk with a child under the age of 6 to and from the child care provider or to transportation that will take them to and from the child care provider (such as a bus stop), reasonable distance will not exceed one half mile. Consideration will be made for factors such as the need to walk in non-daylight hours and the type of walkway (ie country road with no sidewalk). The definition of reasonable distance will include reasonable accomodation for caretakers and children with disabilities or health problems, and the age of the child.

Describe any steps/consultations made to arrive at your definition: This has been our existing definition for some time.

Very Low Income

Define “very low income” as it is used in determining priorities for child care benefits.

“Very Low Income” is defined as 200% of the State Income Standard.

Family Share

“Family share” is the weekly amount paid towards the costs of the child care services by the child’s parent or caretaker. In establishing family share, your district must select a percentage from 10% to 35% to use in calculating the family share. The weekly family share of child care costs is calculated by applying the family share percentage against the amount of the family’s annual gross income that is in excess of the State Income Standard divided by 52.

Family Share Percentage selected by the county 20%.

Note: The percentage selected here must match the percentage selected in Title XX Program Matrix in WMS.

Case Closings

The district must describe below how priority is given to federally mandated priorities and describe local priorities. If all NYSCCBG funds are committed, the district will discontinue funding to those families that have lower priorities in order to serve families with higher priorities. Describe below how districts will select cases to be closed in the event that there are insufficient or no funds available.

1. Identification of local priorities in addition to the required federal priorities (select one).
 The district has identified local priorities in addition to the required federal priorities (Complete Section 2)

The district has not identified local priorities in addition to the required federal priorities (Complete Section 3).

2. Describe how priority is given to federally mandated priorities and describe local priorities. If all NYSCCBG funds are committed, the district will discontinue funding to those families that have lower priorities in order to serve families with higher priorities. Describe in the space below how the district will select cases to be closed in the event that there are insufficient or no funds available.

a. The district will select cases to be closed based ONLY on income.

No.

Yes. Check 1 or 2 below.

1) The district will close cases from the highest income to lowest income.

2) The district will close cases based on income bands. Describe the income bands, beginning at 200% of the State Income Standard and ending at 100% of the State Income Standard:

b. The district will select cases to be closed based ONLY on categories of families.

No.

Yes. List the categories in the order that they will be closed, including the optional categories selected in Appendix L:

We will first close all category III cases and then close all category II cases.

c. The district will select cases to be closed based on a combination of income and family category.

No.

Yes. List the categories and income groupings in the order that they will be closed:

d. The district will select cases to be closed on a basis other than the options listed above.

No.

Yes. Describe how the district will select cases to be closed in the event that there are insufficient funds to maintain the district's current case load:

e. The last cases to be closed will be those that fall under federal priorities. Identify how your district will prioritize federal priorities. Cases that are ranked 1 will be closed last.

Very low income Rank 1 Rank 2

Families that have a child with special needs Rank 1 Rank 2

3. If all NYSCCBG funds are committed, case closings for families that are not eligible under a child care guarantee and are not a federally mandated priority must be based on the length of time in receipt of services. The length of time used to close cases may be based either on the shortest or longest time the family has received child care services, but must be consistent for all families.
- a. Identify how the district will prioritize federal priorities. Cases that are ranked 1 will be closed last.
- Very low income Rank 1 Rank 2
- Families that have a child with special needs Rank 1 Rank 2
- The district will close cases based on the federal priorities and the amount of time the family has been receiving child care services.
- Shortest time receiving child care services
- Longest time receiving child care services
- b. The district will establish a waiting list for families whose cases were closed because our county did not have sufficient funds to maintain our current caseload.
- No.
- Yes. Describe how these cases will be selected to be reopened if funds become available:

Case Openings

Describe below how priority is given to federally mandated priorities and how the district will select cases to be opened in the event that insufficient funds are available.

1. The first cases to be opened will be those that fall under the federal priorities.
- Identify how your district will prioritize federal priorities. Cases that are ranked 1 will be opened first.
- Very low income Rank 1 Rank 2
- Families that have a child with special needs Rank 1 Rank 2
2. The district will select cases to be opened based ONLY on income.
- No.
- Yes. Check 1 or 2 below.
- 1) The district will close cases from the highest income to lowest income.
- 2) The district will close cases based on income bands. Describe the income bands, beginning at 200% of the State Income Standard and ending at 100% of the State Income Standard:
3. The district will select cases to be opened based ONLY on category.

- No.
- Yes. List the categories in the order that they will be opened, including the optional categories selected in Appendix L:

The district will open category II cases and then category III cases

- 4. The district will select cases to be opened based on a combination of income and category of family.

- No.
- Yes. List the categories and income groupings in the order that they will be opened:

- 5. The district selects cases to be opened on a basis other than the options listed above.

- No.
- Yes. Describe how the district will select cases to be opened in the event that there are not sufficient funds to open all eligible families:

- 6. The district will establish a waiting list when there are not sufficient funds to open all eligible cases.

- No.
- Yes. Describe how these cases will be selected to be opened when funds become available:

The district's recertification period is every six months twelve months

Fraud and Abuse Control Activities

Describe below the criteria the district will use to determine which child care subsidy applications suggest a higher than acceptable risk for fraudulent or erroneous child care subsidy payment in addition to procedures for referring such applications to the district's front-end detection system.

see below

Describe the sampling methodology used to determine which cases will require verification of an applicant's or recipient's continued need for child care, including, as applicable, verification of participation in employment, education, or other required activities.

TCDSS reviews all cases at recertification for verification of continued need for child care. Hence, every six months the client must provide all documents to verify their participation in employment, education or required activities and continued need for child care.

Below is a list of identified indicators of high risks and actions DSS takes to verify client is adhering to requirements.

- o Working off the books: Clients must have some way of verifying they are receiving valid payment usually by a notarized statement and DSS making direct contact with the person.
- o Self-employed without adequate business records: Individual must provide a tax return demonstrating three months of self-employment.
- o PO Box used as a mailing address without cause: Client must verify their residence with a lease, mortgage or tax bill.
- o Client unsure of address: FEDS referral made to the investigation unit.
- o Documentation to verify identity is suspect: Require photo ID or birth certificate.
- o Documentation or information provided is inconsistent with application: FEDS referral made to the investigation unit
- o Previous case closings: case records are tracked
- o Overpayment resulting from investigation: overpayment is rolled into current parent fee until paid off
- o Application inconsistent with prior case: FEDS referral made to the investigation unit
- o Children under six with no birth certificate: DSS applies for birth certificate for them
- o Provider lives in the same household as parent: verify provider is not a parent
- o No absent parent information or information is inconsistent with application: cross check with Child Support

The department tracks cases that have no set schedule to provide verification for child care. The department requires clients to turn in their monthly pay stubs and work schedules for verification and/or class schedule for education courses.

For clients engaged in classes the department requires that they submit their class schedule to compare days they are receiving day care. For the classes that attendance can be tracked, e.g. ESL, the department requires that they provide signed attendance forms.

Describe the sampling methodology used to determine which providers of subsidized child care services will be reviewed for the purpose of comparing the child care provider's attendance forms for children receiving subsidized child care services with any Child and Adult Care Food Program inspection forms to verify that child care was actually provided on the days listed on the attendance forms.

See above

APPENDIX N
District Options (Required)

Districts have some flexibility to administer their child care subsidy programs to meet local needs. Check which options that your district wishes to include in your county plan. Complete the attached appendices for any area(s) checked.

1. The district has chosen to establish funding set-asides for NYSCCBG (complete Appendix O).
2. The district is using Title XX funds for the provision of child care services (complete Appendix P).
3. The district has chosen to establish additional local standards for child care providers (complete Appendix Q).
4. The district has chosen to make payments to child care providers for absences (complete Appendix R).
5. The district has chosen to make payments to child care providers for program closures (complete Appendix S).
6. The district has chosen to pay for transportation to and from a child care provider (complete Appendix T).
7. The district has chosen to pay up to 15% higher than the applicable market rates for regulated child care services that have been accredited by a nationally recognized child care organization (complete Appendix T).
8. The district has chosen to pay up to 15% higher than the applicable market rates for non-traditional hours (complete Appendix T).
9. The district has chosen to pay up to 75% of the enhanced market rate for legally-exempt family and in-home child care providers who have completed 10 hours of training, which has been verified by the Legally-Exempt Caregiver Enrollment Agency (complete Appendix T).
10. The district has chosen to pay for child care services while a caretaker who works the second or third shift sleeps (complete Appendix T).
11. The district has chosen to make payments to child care providers who provide child care services, which exceed 24 consecutive hours (complete Appendix T).
12. The district has chosen to include 18-, 19- or 20-year-olds in the Child Care Services Unit (complete Appendix U)
13. The district is seeking a waiver from one or more regulatory provisions. Such waivers are limited to those regulatory standards that are not specifically included in law (complete Appendix U).
14. The district has chosen to pay for breaks in activity for low income families (non public assistance families). Complete Appendix U.

15. The district has chosen to use local equivalent forms such as, but not limited to, child care application, client notification, and/or enrollment forms (attach copies of the local equivalent forms your district uses).

Any previous approvals for local equivalent forms will not be carried forward into this county plan. Therefore, any local equivalent forms a district wishes to establish or renew must be included in this plan and will be subject to review and approval by OCFS.

APPENDIX O
Funding Set-Asides (Optional)

Total NYSCCBG Block Grant Amount, Including Local Funds

Category:	\$

Total Set-Asides.....\$

Describe for each category the rationale behind specific set-aside amounts from the NYSCCBG (e.g., estimated number of children).

Category:
Description:

Category:
Description:

Category:
Description:

Category:
Description:

The following amounts are set aside for specific priorities from the Title XX block grant:

Category:	\$
Category:	\$
Category:	\$

Total Set-Asides (Title XX).....\$

Describe for each category the rationale behind specific amounts set aside from of the Title XX block grant (e.g., estimated number of children).

Category:

Description:

Category:

Description:

Category:

Description:

Category:

Description:

APPENDIX P
Title XX Child Care (Optional)

Enter projected total Title XX expenditures for the plan's duration:\$ 1,400,000.00

Indicate the financial eligibility limits (percentage of State Income Standard) your district will apply based on family size. Maximum reimbursable limits are 275% for a family of one or two, 255% for a family of three, and 225% for a family of four or more. Districts that are utilizing Title XX funds *only* for child protective and/or preventive child care services must not enter financial eligibility limits as these services are offered without regard to income.

Family Size: (2) % (3) % (4) %

Programmatic Eligibility for Income Eligible Families (Check all that apply.)

- Title XX: employment education/training
 seeking employment illness/incapacity
 homelessness domestic violence
 emergency situation of short duration
 participating in an approved substance abuse treatment program

Does the district apply any limitations to the programmatic eligibility criteria?

- Yes No

(See Technical Assistance #1 for information on limiting eligibility.)

If yes, describe eligibility criteria:

Does the district prioritize certain eligible families for Title XX funding?

- Yes No

If yes, describe which families will receive priority:

Does the district use Title XX funds for child care for open child protective services cases?

- Yes No

Does the district use Title XX funds for child care for open child preventive services cases?

- Yes No

APPENDIX Q

Additional Local Standards for Child Care Providers (Optional)

The district may propose local standards in addition to the State standards for legally-exempt providers who will receive child care subsidies. This appendix must be completed for **each** additional standard that the district wishes to implement.

1. Check or describe in the space provided below the additional local standards that will be required of child care providers/programs.

- Verification that the provider has given the parent/caretaker complete and accurate information regarding any report of child abuse or maltreatment in which they are named as an indicated subject
- Local criminal background check
- Requirement that providers that care for subsidized children for 30 or more hours a week participate in the Child and Adult Food Care Program (CACFP)
- Site visits by the local district
- Other (please describe):

TCDSS contracts with the Child Development Council to administer the IN-HOME Quality Improvement Program for all Legally Exempt providers. The visits are conducted at least twice per year and check for the following: That the child care is being provided in the home that is enrolled; that the child care is being provided by the person who is enrolled, that the provider is caring for the approved number of children, that all safety standards are being met. In addition, the Council offers educational material and programming and support for providers. CDC uses the enrollment form for gathering information. When an applicant reports they have a criminal history, the CDC asks for explanation and obtains legal or other documents related to past offense to determine any extenuating circumstances before making a final determination. CDC checks household members of the Sex Offender Registry.

2. Check below the type of child care program to which the additional standard will apply and indicate the roles of the persons to whom it will apply in cases where the standard is person-specific.

- Legally-exempt family child care program. Check all that apply.
 - Provider Provider's Employee Provider's Volunteer
 - Provider's household member age 18 or older
- Legally-exempt in-home child care program. Check all that apply.
 - Provider Provider's Employee Provider's Volunteer
- Legally-exempt group providers not operating under the auspices of another government agency. Check all that apply.

Provider Provider's Employee Provider's Volunteer

Legally-exempt group providers operating under the auspices of another government or tribal agency. Check all that apply.

Provider Provider's Employee Provider's Volunteer

3. Districts are responsible for implementation of the additional local standard unless they have a formal agreement or contract with another organization. Check the organization that will be responsible for the implementation of the additional local standard.

Local social services staff

Provide the name of the unit and contact person:

Contracted agency

Provide the name of the agency and contact person:

Child Development Council-Lauri Hobler

4. Are there any costs associated with the additional standard?

Yes No

Note: Costs associated with the additional standard cannot be passed on to the provider.

5. Describe the steps for evaluating whether the additional local standard has been met.

The Day Care Council submits regular reports to TCDSS detailing visits and the amount of funds they provided to make sure providers meet all the safety standards.

6. Indicate how frequently reviews of the additional standard will be conducted. Check all that apply.

Legally-Exempt Programs:

Initial enrollment During the 12-month enrollment period

Re-enrollment Other

7. In the space below, described the procedures the district will use to notify the Legally-Exempt Caregiver Enrollment Agency (EA) as to whether the legally-exempt provider is in compliance with the additional local standards. Districts must notify the EA within 25 days from the date they received the referral from the EA. (Districts need to describe this procedure only if the additional local standard is applied to legally-exempt child care providers.)

TCDSS has regular phone contact (almost daily) with the Day Care Council to review providers and provides formal written notification regarding provider compliance.

8. Describe the justification for the additional standard in the space below.

The home visiting component helps assure standards are being met. It also allows the day care providers an opportunity to connect with a resource for training, and support.

APPENDIX S

Payment to Child Care Providers for Program Closures (Optional)

The following providers are eligible for payment for program closures:

- Day Care Center Legally-Exempt Group
- Group Family Day Care School Age Child Care
- Family Day Care

The county will only pay for program closures to providers with which the district has a contract or letter of intent.

- Yes No

Enter the number of days allowed for program closures (maximum allowable time for program closures is five days).

List the allowable program closures for which the county will provide payment.

Note: Legally-exempt family child care and in-home child car providers are **not** allowed to be reimbursed for program closures.

APPENDIX T

Transportation, Differential Payment Rates, Enhanced Market Rate for Legally-Exempt and In-Home Providers, and Sleep (Optional)

Transportation

Describe any circumstances and limitations your county will use to reimburse for transportation. Include what type of transportation will be reimbursed (public vs. private) and how much your county will pay (per mile or trip). Note that if the county is paying for transportation, the Program Matrix in WMS should reflect this choice.

Our district does not pay for transportation.

Differential Payment Rates

Indicate the percentage above the market rate your county has chosen.

- Accredited programs may receive a differential payment up to 15% above market rate.
- Care during non-traditional hours may be paid up to 15% above market rate.
- Limitations to the above differentials:

Payments may not exceed 15% above market rate. However, if your district wishes to establish a payment rate that is more than 15% above the applicable market rate, describe below why the 15% maximum is insufficient to provide access within the district to accredited programs and/or care provided during non-traditional hours.

Enhanced Market Rate for Legally-Exempt Family and In-Home Child Care Providers

Indicate if the district is electing to establish a payment rate that is in excess of the enhanced market rate for legally-exempt family and in-home child care providers who have annually completed 10 or more hours of training and the training has been verified by the legally-exempt caregiver enrollment agency.

- No.
- Yes. Our market rate will not exceed 75% of the child care market rate established for registered family day care.

Sleep

The following describes the standards that will be used in evaluating whether or not to pay for child care services while a parent or caretaker that works a second or third shift sleeps, as well as any limitations pertaining to payment:

Up to six hours at the discretion of the local district.

Indicate the number of hours allowed by your district (maximum number of hours allowed is eight).

APPENDIX U

**Child Care Exceeding 24 Hours, Child Care Services Unit, Waivers,
and Breaks in Activities (Optional)**

Child Care Exceeding 24 Hours

Child Care services may exceed 24 consecutive hours when such services are provided on a short-term emergency basis or in other situations where the caretaker’s approved activity necessitates care for 24 hours on a limited basis. Check below under what circumstances the county will pay for child care exceeding 24 hours.

- On a short-term or emergency basis
- The caretaker’s approved activity necessitates care for 24 hours on a limited basis

Describe any limitations for payment of child care services that exceed 24 consecutive hours.

Child Care Services Unit (CCSU)

Indicate below if your county will include 18-, 19-, or 20-year-olds in the CCSU, which is used in determining family size and countable family income.

The district will include the following in the CCSU (check all that apply).

- 18-year-olds
- 19-year-olds
- 20-year-olds

OR

The district will only include the following in the CCSU when it will benefit the family (check all that apply)

- 18-year-olds
- 19-year-olds
- 20-year-olds

Describe the criteria your district will use to determine whether or not 18-, 19-, or 20-year olds are included in the CCSU.

Waivers

Districts have the authority to request a waiver of any regulatory provision that is non-statutory. Describe and justify why your county is requesting a waiver.

Breaks in Activities

Districts may pay for child care services for low income families during breaks in activities either for a period not to exceed two weeks or for a period not to exceed four weeks when child care arrangements would otherwise be lost and the subsequent activity is expected to begin within that period. Indicate below if your county will make such payments (check one).

- Two weeks
- Four weeks

Districts may provide child care services while the caretaker is waiting to enter an approved activity or employment or on a break between approved activities. The following low income

families are eligible for child care services during a break in activities (check any that are eligible):

- Entering an activity
- Waiting for employment
- On a break between activities

APPENDIX V

Persons In Need of Supervision (PINS) Diversion Services

This appendix refers to the PINS Diversion population only. Complete sections 1 through 4 for PINS Diversion population only.

1. Designation of Lead Agency (check one):

- Probation LDSS

2. Inventory of PINS Diversion Service Options – Describe below the current inventory of available community services within each category below for the PINS Diversion population. For each service, include the geographic area (countywide or specific cities or towns). Please note that the first three service categories are required.

Service Category	Geographic Area	Service Gap – Check one
Residential Respite – required	Tompkins County	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Crisis Intervention 24 hours/day – required	Tompkins County	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Diversion Services/other alternatives to detention – required	Tompkins County	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Alternative Dispute Resolution Services – optional	Ithaca City	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Other: MST	Tompkins County	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Other:		<input type="checkbox"/> Yes <input type="checkbox"/> No

3. PINS Diversion Procedures – Please provide a description of any changes that have been made to these procedures since the submission of your last comprehensive plan, including any collaborative team processes.

PINS Diversion Services Protocol	Responsible Agency(ies)	Brief Description of How Provided
1. Provides an immediate response to youth and families in crisis (includes 24 hours a day response capability)	<input type="checkbox"/> Probation <input type="checkbox"/> LDSS <input checked="" type="checkbox"/> Both <input type="checkbox"/> Other (name)	Probation responds during the day. DSS responds after hours. Probation officers and DSS caseworkers develop plans with families for handling after hours crisis. The Community Resource Team (DSS, Probation, Mental Health) meet when youth are at risk of Court intervention to develop a plan of action.

PINS Diversion Services Protocol	Responsible Agency(ies)	Brief Description of How Provided
2. Determines the need for residential respite services and need for alternatives to detention	<input type="checkbox"/> Probation <input type="checkbox"/> LDSS <input checked="" type="checkbox"/> Both <input type="checkbox"/> Other (name)	Probation and DSS discuss the availability of respite services, assess the need and refer. DSS may appear in Court with probation and provider.
3. Serves as intake agency – accepts referral for PINS diversion services, conducts initial conferencing, and makes PIN eligibility determinations	<input checked="" type="checkbox"/> Probation <input type="checkbox"/> LDSS <input type="checkbox"/> Both <input type="checkbox"/> Other (name)	Probation receives referrals, conducts initial conferencing, completes the YCA and JCP, and makes eligibility determinations. Intakes may be conducted in the office, home, or school. Referrals for services are initiated immediately. Probation collaborates with DSS before filing PINS petitions.
4. Conducts assessment of needs, strengths, and risk for continuing with PIN behavior Name of assessment instrument used:	<input checked="" type="checkbox"/> Probation <input type="checkbox"/> LDSS <input type="checkbox"/> Both <input type="checkbox"/> Other (name)	Probation updates YCA regularly for ongoing assessment of needs. The Community Resource Team meets with youth and families to assess service needs. SPOA uses CANS for families referred. Probation uses YCA JCP risk instruments. Probation uses YASI risk screening instruments within 30 days of intake to determine risk and supervision levels and service needs.
5. Works with youth and family to develop case plan	<input type="checkbox"/> Probation <input type="checkbox"/> LDSS <input checked="" type="checkbox"/> Both <input type="checkbox"/> Other (name)	DSS, Probation, and Mental Health meet with school personnel, families and other involved providers to update case plans where a PINS petition is being contemplated.
6. Determines service providers and makes referrals	<input type="checkbox"/> Probation <input type="checkbox"/> LDSS <input checked="" type="checkbox"/> Both <input type="checkbox"/> Other (name)	Probation begins this process at intake. Referrals are made to preventive services for those at risk of foster care. SPOA meetings are arranged when needed. Community Resource Team meetings are held if service plans need updating.

PINS Diversion Services Protocol	Responsible Agency(ies)	Brief Description of How Provided
7. Makes case closing determination	<input checked="" type="checkbox"/> Probation <input type="checkbox"/> LDSS <input type="checkbox"/> Both <input type="checkbox"/> Other (name)	Probation makes case closing determinations. Efforts to involve preventive services early are made. If Court intervention is being considered, probation and DSS communicate to assess options and involve youth and family in the process.

4. PINS Diversion Services Plan

a. Development of PINS Diversion Services Plan and MOU

i. Planning activities – Briefly describe all PINS Diversion Services Planning activities the county has engaged in related to this current plan.

There are frequent meetings between DSS and Probation for case specific planning and program development.

Probation meets with local school administrators every fall.

ii. List stakeholder and service agency involvement in planning.

DSS and probation meet regularly to discuss services and alternatives to Court involvement. School personnel and other providers are included.

b. Please define the PINS Diversion population in your county. Specifically, please provide the following:

i. Number of PINS Diversion referrals filed by parents: 2009: 72, 2010:60, to 6/30/11 37

ii. Number of PINS Diversion referrals by schools: 2009:89,2010:96, to 6/30/11: 58

iii. Number of PINS Diversion referrals other sources: 2009: 9, 2010:10, to 6/30/11: 2

iv. Number of PINS Diversion cases closed as Successfully Diverted: 2009: 58, 2010: 83; to 6/30/11: 36

v. Number of PINS Diversion cases closed as Unsuccessful and Referred to Petition: 2009: 36; 2010: 32; to 6/20/11: 28

5. Identify any **aggregate** needs assessment conclusions and/or priorities regarding the PINS Diversion Population that have been developed as part of the planning process.

Probation is seeing increased aggression toward parents and school personnel by youth. Referrals are being made to the anger management program through Bridges, but these services are limited and not able to accommodate the number of youth needing the service. Probation has begun a Thinking for Change group for adjudicated youth. This group is also only available during the summer months and is not capable of including all possible referrals. There is also a need to access MST services earlier as parents are not able to safely address this aggression and many require increased parenting skills and help with formulation of supervision plans. Mental health issues are prevalent and have

recently resulted in increased use of diagnostic placements. There has been a decrease in the % of cases closed and referred for petition immediately (2004=12%, 2010=6%, through 6/30/11= 5%. These are most typically youth who have run away.

6. Please identify the intended outcomes to be achieved for the PINS Diversion population. For each outcome:
- a. In the first column, identify quantifiable and verifiable outcomes of the desired change in conditions or behaviors for the PINS Diversion population.
 - b. In the second column, identify the specific raw number or percentage change indicator sought for that outcome.
 - c. In the third column, **describe the strategies** to be implemented to achieve the identified indicator and outcome. Each strategy should include the timeframe for completion, and a designation of who is responsible for implementation.

Outcome (For PINS Diversion Population)	Indicator (Expressed as a raw number or % change)	Strategy/Plan to achieve (Who, what, and when)
Increase rate of adjustment	46% (83) of closed cases (179) were closed as adjusted in 2010. By 2016, 46% of closed cases will be closed as adjusted	Probation and DSS will coordinate case planning for successful implementation of PINS diversion plans
Increase parental involvement in PINS Diversion Services	30% of closed cases had parents engaged in services. By 2016, 33% of closed cases will have parents engaged in services	DSS and Probation will support more parental involvement and service coordination
Reduce use of non-secure detention	from 457 days per year to 300 days per year	Specifically for the PINS population--provide crisis planning with youth and families, crisis intervention services, coordination with Bridges, Probation, DSS, county attorney and police