June 22, 2017

Dear Local District Commissioner, Probation Director, and Youth Bureau Director:

This letter is to inform you that the Dutchess County Child and Family Services Plan (CFSP) Annual Plan Update (APU) for January 1, 2017 to December 31, 2017, including the PINS Diversion Services Plan, is approved, effective 06/23/2017. The PINS Diversion Services Plan is approved jointly by the Office of Children and Family Services and the Division of Criminal Justice Services. The approval for the Day Care component will come to you directly from the Division of Child Care Services.

The Office of Children and Family Services is committed to providing the support you need to continue to offer quality services. We look forward to working with your county to implement the provisions of your CFSP.

Sincerely,

Laura M. Velez
Deputy Commissioner
Child Welfare & Community Services
New York State Office of Children & Family Services

Robert M. Maccarone
DCJS Deputy Commissioner and Director
Office of Probation and Correctional Alternatives

cc: File
2017 Plan

Appendix A

Plan Signature Page

We hereby approve and submit the Child and Family Services Plan for Dutchess County Department of Social Services and Youth Bureau for the period of January 1, 2017 through December 31, 2017.

We also attest to our commitment to maintain compliance with the Legal Assurances as outlined in Child and Family Services Plan Guidance Document.

Type in all required fields and save changes, then PRINT this page. You may scan the page and send it via e-mail along with your plan or by fax to 518-474-9452, attention: Barbara Irish upon approval of your plan.

Retain in your records as signed original copies may be requested from OCFS at any time.

Commissioner County Department of Social Services

Type Name: Sabrina Jaar Marzouka, JD MPH  Date: 1/23/2017

Signature: __________________________________________

Executive Director County Youth Bureau

Type Name: June Ellen Notaro  Date: 1/18/2017

Signature: __________________________________________

Chair County Youth Board

Type Name: Barbara Donegan  Date: 1/17/2017

Signature: __________________________________________

I hereby approve and submit the PINS Diversion Service section of the Child and Family Services Plan for Dutchess County Probation Department for the period of January 1, 2017 through December 31, 2017.

Director/Commissioner County Probation Department

Type Name: Mary Ellen Still  Date: 1/23/2017

Signature: __________________________________________

Chair County Youth Board

Type Name: Barbara Donegan  Date: 1/17/2017

Signature: __________________________________________

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

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

Type Name: Marcus J. Molinaro  Date: 1/26/2017

Signature: __________________________________________
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.

Dutchess 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 Dutchess County Child and Family Services Planning Process.

Commissioner County Department of Social Services

Type Name: Sabrina Jaar Marzouka JD MPH Date: 1/23/2017

Signature: ______________________________

Child and Family Services Plan Program Narrative Appendix

☐ Check if No Change in Section 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.

As part of our integrated county planning process for over the past ten years, the County has used the NYS Touchstones Framework to track countywide data, develop common outcome language among funders, increase knowledge about contracted services and government agencies' functions, and organize strategic planning efforts for the Department of Social Services, the Youth Bureau and, more recently, the Office of Probation and Community Corrections.

In 2013 the County restructured/realigned several Departments. The Department of Services for Aging, Veterans and Youth (SAVY) which had been created in 2011, was reorganized to better balance available resources with the unique needs of seniors, veterans and young people. The Division of Veterans Services is now affiliated with the Department of Health. The Division of Youth Services has become a separate division within the Department of Social Services. The entire department has been renamed the Department of Community and Family Services (DCFS) to reflect youth services as well as the overall department's focus on providing assistance leading to long-term independence and sustainability for individuals and families. The Division of Aging Services is once again a stand-alone department, known as Office for the Aging (OFA). Funded almost entirely by state and federal revenue streams, there are very specific requirements for the Office for the Aging to be an independent agency.

The Dutchess County Legislature also approved the restructuring in December by approving the 2013 County Budget. The County continues to maintain a Health & Human Services Cabinet under the leadership of the Director of the Office for Aging which continues as a working committee of Department Heads to address policy, efficiency and strategic planning issues for county human services in the Departments of Community and Family Services, Probation, Mental Hygiene, and Health with the Division Directors of Aging, Youth Services and Veterans. The Integrated County Planning (ICP) Workgroup functions as a sub-committee of the H&HS Cabinet and also involves Youth Board participation.

The ICP Workgroup supports the following vision for its work:

We in Dutchess County strongly value children, youth, and families. We envision a community environment that is safe, supporting, nurturing, healthy, and drug free. We seek to offer services that are accessible to all diverse groups and provide equal opportunities for education, career development, and personal growth. We hope that all children, youth and families can maximize their potential to make contributions to their communities and participate in its leadership.

The Department of Community and Family Services, Youth Services and the Office of Probation and Community Corrections missions support the above vision. The Department of Community and Family Services' mission is to meet the needs of the County's population, as provided by social services law, in a courteous, fair and efficient manner with the aim of restoring each beneficiary to maximum independence by:

1. Providing assistance to eligible individuals and families while assisting clients to achieve their full potential.
A. Conduct thorough eligibility investigations;

B. Apply rules, regulations and local policies objectively, consistently and uniformly;

C. Provide clients with all of the benefits to which they are entitled;

D. Work cooperatively as divisions to meet the separate needs of clients while preserving the integrity of each individual;

E. Maintain professionalism in all contacts.

II. Develop and make available to families and individuals services that will strengthen the family unit, encourage stability in living arrangements, and provide for specialized care.

III. Provide protective services to children and adults at risk.

IV. Provide adequate information to the general public regarding our programs and services and maintain adequate knowledge of community services to act as a referral source.

The Youth Services mission is to assure every youth a fair and equal opportunity to attain his/her full potential by providing and encouraging services which strengthen family life and by supporting families in their essential function of nurturing the youth's overall development. Similarly, Youth Services will encourage and assist communities to carry out their responsibilities to provide the important physical and social conditions necessary for the well-being and development of our youth in a fiscally responsible manner.

The Health & Human Services Cabinet serves as a high-level executive management team to: tackle problems affecting multiple Departments, conduct cross-system planning, share information on best practices, and develop strategies to maximize the County's resources. Through bi-monthly meetings, the Cabinet provides an open forum for Commissioners and Directors to freely address issues and collaboratively plan for improvements in the County's health and human service system.

The ICP workgroup tasks include on-going needs assessment activities in support of the Department of Health's Health and Well-Being of Children, Families, and Adults in Dutchess County Select Data Indicators document (available at http://www.co.dutchess.ny.us/CountyGov/Departments/Health/Publications/HOHealthWellBeingICPReport.pdf), strategic planning and coordination of services in OCFS' continuum of care for children, youth and families also supports the Cabinet's outcomes.

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

Dutchess County is in the heart of the Hudson Valley, midway between New York City and Albany and encompasses approximately 800 square miles of rural, agricultural, urban and suburban land uses. This spreadout requires cars to get almost anywhere. US Census estimates of population, demographic, economic characteristics, social characteristics and housing units for Dutchess County are summarized below and compared with New York State:

Population - Between 2010 and 2015, the population decreased 0.6%. Currently 11.6% of the population is foreign born with the majority arriving from Latin America. Much of the population increase observed in Dutchess County is due to international migration of documented individuals into the County. This influx is changing the face of Dutchess County. Among people at least five years old living in Dutchess County, 15.8% speak a language other than English at home (ACS 2009-2015). When considering cultural and economic challenges faced by immigrants, healthcare providers, and the County as a whole, it is important to remember that data regarding immigrants do not provide much information on undocumented immigrants.

Age and Gender- When examining changes in the population's age from 2010 to 2015, several trends are observed. The older population has increased, whereas the younger population 0-19 years has decreased.

Race - Dutchess County has less racial diversity than NYS, with 81.7% of the population as whites as opposed to NYS with 70.1% white. The Black population has increased from 9.3% in 2010, to 11.3% in 2015. The Asian population has increased during this time period from 3.5% in 2010 to 4.0% in 2015. The Hispanic population is also on the rise, increasing from 10.5% in 2010, to 11.8% in 2015. Minority populations in Dutchess County are centered primarily in the City of Poughkeepsie. The percentage of Blacks and Hispanic/Latinos in the City of Poughkeepsie are 36.4%, and 21.3%, respectively compared to 10.5%, and 11.3%, respectively in Dutchess County (ACS 2015).

Economic- Dutchess County appears to be a prosperous community. The median household income is significantly higher than that of
the rest of New York State, and the fraction of persons living below the poverty line is 9.3%—significantly less than the 15.7% poverty rate experienced throughout the rest of the state. Some areas of the County, however, do not enjoy this level of affluence. The poverty rate in the County’s primary urban center, Poughkeepsie, has reached 24.1%. In addition, pockets of rural poverty dot the countryside, providing a study of contrasts between the stately affluence and generational poverty that are experienced in neighboring communities.

A presentation by The Rockefeller Institute of Government on the fiscal challenges facing state and local governments shows that although the revenue crisis is easing, fiscal crisis continues for state and local governments. The institute’s research shows key variables such as taxable personal income, taxable consumption and home values are far below peak, and “long-term pressures loom even after the cycle is behind us.” Dutchess County is no exception. Unemployment for October 2016 was 4.1%, down from one year ago, but still higher than the average annual employment rate of 4% for 2007 prior to the downturn. As the economic downturn lingers, DCFS continues to see a significant demand for services. Food stamps and Medicaid caseloads are up over 2014 at this time, with total unduplicated individuals receiving DCFS assistance is up 48.6% from 2007 prior to the economic downturn. The County Clerk’s Office reports a total of 1,300 foreclosures for the twelve months ending October 2015 showing an increase of 2.8% for the prior 12 month period.

According to 2016 Annual Homeless Assessment Report (AHAR) an estimated 1,739 individuals experienced homelessness in Dutchess County between October 1, 2015 and September 30, 2016, down from the prior year’s estimate of 1,833 homeless individuals. The AHAR draws on data reported by housing providers through the Homeless Management Information System (HMS) and extrapolated data representing non-HMIS participating providers (Domestic Violence shelters & DCFS motel vouchers, etc.) to calculate an unduplicated homeless count. Another measure of homelessness is the Point in Time Count (PIT), an attempt to count the sheltered and un-sheltered homeless population on a single night in January each year. Dutchess County’s 2016 PIT count resulted in identification of 385 homeless individuals (22 unsheltered and 363 sheltered). While up slightly from the 2015 PIT count of 375, the overall PIT count has steadily declined from the 476 homeless individuals reported in 2010’s PIT. DCFS temporary shelter expenditures were $2,181,981 for 2016, an increase of 30% from 2015. Insufficient availability of affordable housing heightens the risk of homelessness in Dutchess County where rising fair market rents are beyond the means of many low-income households. Using HUD’s guidelines that household should not spend more than 30% of their income on housing costs including utilities, a household would need to earn at least $46,000 to afford an average one bedroom apartment and $56,960 for a two bedroom in Dutchess County [County Planning Department’s 2015 Rental Survey Report]. For low income households rent typically consumes such a large portion of their income that it is difficult to sustain housing and meet other basic needs. Dutchess County’s rental vacancy rate of 1.6%, the lowest it’s been since 2003 according to the 2015 Rental Survey Report, is less than half of the 5% housing experts recognize as an indicator of a healthy rental market. With such high competition for available rental slots, landlords have been able to raise rates and still quickly fill vacancies.

Social/Educational- 89.9% of people 25 years and over have at least graduated from high school and 33.4% have a bachelor’s degree or higher (2015); 10.5% were dropouts; they were not enrolled in school and had not graduated from high school. The 2011-12 suspension rate of students for one full day or longer from public school varies in the county by school district with a high of 16% for Poughkeepsie and Beacon at 14% to a low of 1% for Red Hook and 2% for Pawling and Rhinebeck (data.nysed.gov). School test scores for the county for 2014 and 2015 show 31% students in grades 3-8 are proficient in English —a 1% drop, and 36% students are proficient in math —a 12.5% increase from 2014.

Health - In 2015 Dutchess County ranked among the top 10 New York State counties for overall health outcomes and health factors according to the national County Health Rankings. Health insurance is a factor in access to health care for the prevention and treatment of disease and in Dutchess the number of Dutchess residents with health insurance has been increasing. Issues of concern are the increasing number of drug overdoses and drug related hospitalizations, particularly due to heroin.

Planning Process

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

The Child and Family Services Planning process tasks are assigned to the ICP Workgroup. The DCFS Assistant to the Commissioner for Program Planning facilitates the ICP Workgroup meetings. The ICP Workgroup tasks include:

- Provision of oversight for Child and Family Services Plan development between DCFS, the Youth Services, and the Office of Community Probation and Corrections,
- Assistance in the identification of needs, outcomes, and strategies, Monitoring of the countywide data document,
- Monitoring the on-going needs assessment activities, and
- Analysis of the data.
Over the past fifteen years, the ICP Workgroup met at least quarterly focusing on current strategies, identification of emerging trends and possible new strategies for inclusion in the next CFS Plan. Meeting topics were:

- Child Protective Services, Foster Care and Adoption,
- Detention Issues,
- Runaway & Homeless Youth and Independent Living Needs, Adult Services and Domestic Violence,
- Child and Maternal Health,
- Children’s Health needs, and
- Youth Development.

Members brought a range of professional expertise and their knowledge/involvement in other coalitions/committees that support our vision for Dutchess County. These committees include: DC Housing Consortium, Steering Committee of the Domestic Violence Response Team, Interagency Task Force on Child Sexual Abuse, Criminal Justice Council, Juvenile Justice Committee, Enhanced Coordinated Children’s Services Initiative, Children’s Mental Health Providers, WIB Youth Council, Choices for Change, and DC Elder Abuse Task Force. Many of the ICP Workgroup members are responsible for writing various county plans that direct efforts and funding in regards to children, youth, and families. Current ICP Workgroup membership includes:

- DCFS - Deputy Commissioner, Assistant to Commissioner for Planning, Director of Children’s Services Director of Adult Services,
- Youth Services- Director and DC Runaway and Homeless Coordinator,
- Dept. of Community & Behavioral Health- Health Education and Planning Director and Deputy Commissioner, Coordinator for Children and Youth Services,
- Probation and Community Corrections- Director and Deputy Director,
- Office for Aging- Director
- Hudson River Housing- Support Services Grant Administrator,
- Astor Services for Children & Families- Program Director of Home Based Service Coordination,
- Mental Health Association- Executive Director,
- Family Services- Vice President, and
- Council on Addiction Prevention Education- Executive Director.

The planning process also included the following:

1. Public Hearing on the Proposed Plan in accordance with Section 34-a 3(a) of the Social Services law, a Public Hearing on the Plan was held on September 9, 2011. It was advertised in the Poughkeepsie Journal on August 25, 2011. Twenty four persons attended the hearing.

2. Advisory Board for the Department of Community and Family Services-The Commissioner and the Deputy Commissioner of the Department of Social Services meet at least quarterly with its 15 member Commissioner’s Citizens Advisory Council. The Department’s Director of Adult Services attends all meetings of the Council, consults with Council members on a regular basis and serves as the Department’s liaison to the Council for the purpose of gathering input and suggestions for the Plan.

3. Youth Board- The County Executive restructured the Youth Board into the Youth Board and Coordinating Council in summer of 2014. Its mission is to strengthen community and family interaction with our young people in an effort to prevent crime, improve quality of life, and empower young people to lead productive lives and achieve greater success for themselves and their families. The new Coordinating Council brings together representatives from government, not-for-profits, businesses, and educational institutions. The Council will examine community risk factors, study best practices from other communities, and develop strategies to better address the challenges confronting young people today. The Council is advisory in nature, advising the County Legislature and Executive on youth policy through the Division of Youth Services located within the Department of Community & Family Services (DCFS). The Youth Board and Coordinating Council members and the County Executive’s Office were kept informed of the on-going county planning process through the monthly Director’s reports. The status chart for the last plan’s strategies achieved by the Youth Bureau was distributed to members. The on-going Needs Assessment activities results assisted the Youth Board members in developing their DCFS funding priorities using the Touchstone Objectives.

4. Municipalities- There are no municipal youth bureaus in Dutchess County.

5. Broad Based Community Participation-The past year’s needs assessment activities included broad based community representation through the DC Health Department’s Community Health Assessment and Community Health Improvement plan activities and the
County Department of Mental Hygiene’s three public forums in 2015 covering Adult Mental Health Service Needs, Service Needs of Chemically Dependent Persons and the Mental Health Needs of Children and Youth. Members of the ICP workgroup attend these forums and the concerns raised and needs identified are shared with respective Departments, agencies and those responsible for plan strategy development. Also, the Council on Addiction, Prevention and Education reported their significant findings from the Search Institute Survey results in six school districts at the Criminal Justice Council meeting.

In 2016 DCFS began holding semi-annual DCFS Navigator presentations for County departments, other agencies and community services providers to describe DCFS programs and services and to elicit feedback.

I. Child Protective Services

Child Protective Services Self-Assessment

Describe the success and challenges the district has experienced since the last plan update in the program area. Noting the data and trends as identified in Appendix C, and the cumulative district consultations (Appendix B-1 through B-6), describe the underlying conditions or factors that influence your performance in meeting the needs of children, youth, adults and families (as applicable).

Success and Challenges

2016 SELF ASSESSMENT REPORT

TARGET 1a: One hundred percent (100%) of CPS cases conferenced will have plans and services assessed and revised to ensure that all issues of child safety and family needs are met.

RESULT: 100% of CPS cases conferenced had plans and services assessed and revised to ensure that all issues of child safety and family needs are met. A log was maintained recording all of the meetings and minutes of what was discussed and planned.

TARGET 1b: DCFS will reduce the rate of recurrence to equal or below the statewide percentage

RESULT: As of 9/30/2015 DCFS was at 14.2% of recurrence and the statewide percentage was 12.0%.

TARGET 1c: Dutchess County DCFS in collaboration with NYS OCFS will continue to provide Family Meetings Trainings until all staff are fully trained. Staff who have been trained will implement these meetings in their case practice

RESULT: DCFS continued the process of implementing Training on Family Team Meetings in collaboration with OCFS. Trained staff were assigned as Facilitators for Family Team Meetings and a log was maintained showing when meetings are assigned and to which Facilitator.

Conditions or Factors

Due to the number of reports received in Dutchess County, CPS workers may be required to carry more than the 12 investigations per month recommended by an OCFS caseload study.

Child Protective Services Outcomes

Outcomes are based on the district’s performance as identified through the data and trends in the Self-Assessment. Outcomes should be expressed as desired changes within a program area to address the underlying conditions or factors as noted in the district's Self-Assessment. The outcomes must be related to the use of OCFS funding, and/or required areas of services by the social services district and Youth Bureau. Districts may incorporate outcomes from their Child and Family Services Program Improvement Plan (PIP). List the district’s outcomes for this program area and identify quantifiable indicators (measures) of the desired changes that you will use to track progress.

Outcomes

OUTCOME 1 CPS issues that affect Dutchess County children and families will be identified and addressed to reduce the risk of future abuse or maltreatment.

Indicators

Indicator 1a. One hundred percent (100%) of CPS cases conferenced will have plans and services assessed and revised to ensure that
all issues of child safety and family needs are met.

Indicator 1b. DCFS is presently at 14.2% of recurrence and the rest of the state is at 12%. DCFS plans to address this issue with the goal of reaching 12% which is the statewide percentage.

Indicator 1c. Dutchess County DCFS in collaboration with NYS OCFS will continue to provide Family Meetings Training until all staff are fully trained. Staff who have been trained will implement these meetings in their case practice.

Indicator 1d. Dutchess County DCFS will screen children for indicators of Child Sex Trafficking and refer them appropriately.

Child Protective Services Strategies to Achieve Outcomes

Describe the strategies that will be implemented to achieve the identified outcomes, including those strategies that support your Child and Family Services Program outcomes. Each strategy should include the timeframe for completion and designation of what agency(ies) or department(s) is/are responsible for implementation. Explain how OCFS-administered funding supports achievement of outcomes.

Strategies

Strategy 1a. Dutchess County DCFS Children’s Services and legal staff members will participate in weekly case conferences to review CPS, Preventive and foster care cases which meet set criteria including complex issues, multiple service providers, differences of opinion, very young children and multiple CPS reports.

Strategy 1b. Dutchess County DCFS will reduce our Recurrence Rate of Child Maltreatment/Abuse by utilizing more community resources for families so that there will be more supportive services attach to the family when CPS is no longer involved. Dutchess County will also work on Consolidating Reports regularly when appropriate.

Strategy 1c. Dutchess County DCFS will utilize Family Meetings to locate resources for children more quickly and to give families an opportunity to assist in developing safety plans to enable children to remain home or exit foster care more quickly.

Strategy 1d. Dutchess County DCFS will screen all children listed on CPS reports for indicators of Child Sex Trafficking. The Rapid Indicator Tool to Identify Children Who May be Sex Trafficking victims or at risk of being a sex trafficking victim will be completed for every child on the report or in the family prior to the case being closed. If prompted to do so by the score, a Comprehensive Screening will be completed and case worker will follow steps outlined in 15-0CFS-ADM-16. All DCFS staff have the name of the Safe Harbour Liaison in D.C. and will do outreach as deemed necessary.

II. Child Preventive Services

Child Preventive Services Self-Assessment

Describe the success and challenges the district has experienced since the last plan update in the program area. Noting the data and trends as identified in Appendix C, and the cumulative district consultations (Appendix B-1 through B-6), describe the underlying conditions or factors that influence your performance in meeting the needs of children, youth, adults and families (as applicable).

Success and Challenges

2016 SELF ASSESSMENT REPORT

TARGET1a: One hundred percent (100%) of preventive cases conferenced will have plans and services assessed and revised to ensure that all issues of child safety and family needs are met.

RESULT: 100% of preventive cases conferenced had plans and services assessed and revised as needed to address child safety and family needs. A log was maintained recording all of the meetings and minutes of what was discussed and planned.

TARGET1b: One hundred percent (100%) of families requesting voluntary placement will have assessment to determine whether children can be safely maintained at home with appropriate community supports and services in place prior to a voluntary placement being made.

RESULT: 100% of families requesting a voluntary placement had an assessment to determine whether the child could be safely maintained at home with community supports and services. Meetings were held at DCFS to discuss
whether a family met the criteria for a voluntary placement after case manager had met with the family and gathered necessary information. DCFS had 3 Voluntary Placements in 2016.

TARGET 1c: Five (5) children per year will receive OMH waiver services. RESULT: In 2016, 12 children received OMH waiver services.

TARGET 1d: Dutchess County DCFS in collaboration with NYS OCFS will continue to provide Family Meetings Trainings until all staff are fully trained. Staff who have been trained will implement these meetings in their case practice.

RESULT DCFS continued the process of implementing Training on Family Team Meetings in collaboration with OCFS. Trained staff were being assigned as Facilitators for Family Team Meetings and a log was maintained showing when meetings were assigned and to which Facilitator.

TARGET 2a: All PINS Diversion youth who are accepted for services will be screened by the Intake Review Committee (comprised of the Unit Administrator of the Diversion Unit, Intake Worker, Astor Community Based Services, Dept. of Mental Hygiene) for early identification of and linkage.

RESULT: 243 PINS Complaints were received in 2015, while 6 PINS complaint cases were referred to Youth Services. 3 want to petition immediately and were forwarded to Family Court (Runaway, Refusal to participate in services). The remainder of cases were reviewed by the Intake Review Committee.

TARGET 2b: Not more than twenty percent (20%) of PINS complaints received will result in a petition to Family Court.

RESULT: 59 cases were referred to petition after having been accepted in Diversion Services (24%). Dutchess County lost preventive slots for 36 families in 2010 due to budget cuts. There is sometimes a waiting list for preventive services, so Child Protective workers provide preventive services to families waiting for preventive slots.

Conditions or Factors

Dutchess County lost preventive slots for 36 families in 2010 due to budget cuts. There is sometimes a waiting list for preventive services, so Child Protective workers provide preventive services to families waiting for preventive slots.

Child Preventive Services Outcomes

Outcomes are based on the district's performance as identified through the data and trends in the Self-Assessment. Outcomes should be expressed as desired changes within a program area to address the underlying conditions or factors as noted in the district's Self-Assessment. The outcomes must be related to the use of OCFS funding, and/or required areas of services by the social services district and Youth Bureau. Districts may incorporate outcomes from their Child and Family Services Program Improvement Plan (PIP). List the district's outcomes for this program area and identify quantifiable indicators (measures) of the desired changes that you will use to track progress.

Outcomes

OUTCOME 1: Families, including nuclear, extended and adoptive families are strengthened and supported so they are able to raise, nurture, and ensure the children's connections to their heritage and in planning for the children's futures (Title IVB Goal 1 & Goal 5).

OUTCOME 2: Dutchess County will assist youth in assuming personal responsibility for their behavior and refraining from violence to avoid the necessity for out of placement.

OUTCOME 3 Issues that affect Dutchess County children and families will be identified and addressed to reduce the risk of future abuse or maltreatment.

Indicators

Indicator 1a. One hundred percent (100%) of preventive cases conferenced will have plans and services assessed and revised to ensure that all issues of child safety and family needs are met.

Indicator 1b. One hundred percent (100%) of families requesting voluntary placement will have assessment to determine whether children can be safely maintained at home with appropriate community supports and services in place prior to a voluntary placement being made.
Indicator 1c. Five (5) children per year will receive OMH waiver services.

Indicator d. Dutchess County DCFS in collaboration with NYS OCFS will continue to provide Family Meetings Trainings until all staff are fully trained. Staff who have been trained will implement these meetings in their case practice.

Indicator 2a. All PINS Diversion youth who are accepted for services will be screened by the Intake Review Committee (comprised of the Unit Administrator of the Diversion Unit, Intake Worker, Astor Community Based Services, Dept. of Community & Behavioral Health) for early identification of and linkage.

Indicator 2b. Not more than twenty percent (20%) of PINS complaints received will result in a petition to Family court.

Indicator 3a. Dutchess County DCFS will screen children for indicators of Child Sex Trafficking and refer them appropriately.

Child Preventive Services Strategies to Achieve Outcomes

Describe the 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 designation of what agency(ies) or department(s) is/are responsible for implementation. Explain how OCFS-administered funding supports achievement of outcomes.

Strategy 1a. Dutchess County DCFS Children’s Services and legal staff members will participate in weekly case conferences to review Preventive cases which meet set criteria including complex issues, multiple service providers, differences of opinion, very young children, and multiple CPS reports. In addition, DCFS Preventive cases will be reviewed weekly with CPS and Astor Preventive Cases will be reviewed bi-weekly with CPS.

Strategy 1b. Birth families who request voluntary placement of children will meet with the DCFS intake worker and be referred to ECCSI and/or the Department of Probation if needed to try to prevent the need for a DCFS foster care placement.

Strategy 1c. Dutchess County DCFS will contract with Astor Home For Children to provide five crisis intervention waiver slots to provide in-home services to children at risk of psychiatric hospitalization and their families, to enable those children to remain in the community. 1d. Dutchess County DCFS will utilize Family Meetings to locate resources for children more quickly and to give families an opportunity to assist in developing safety plans to enable children to remain home or exit foster care more quickly.

Strategy 1d. Dutchess County DCFS in collaboration with NYS OCFS will continue to provide Family Meetings Trainings until all staff are fully trained. Staff who have been trained will implement these meetings in their case practice.

Strategy 1e. Dutchess County DCFS will fund 4 crisis/respite beds at the Riverhaven Shelter for teens.

Strategy 2a. The Dutchess County Office of Probation will operate a Diversion Unit that provides intake, assessment and case planning services for families that target criminogenic areas of need and risk, and utilize a strength-based approach to increase protective factors and reduce dynamic risk.

Strategy 2b. When a recommendation for out-of-home placement is being considered, the case will be reviewed by the Dispositional Review Team.

Strategy 2c. Dutchess County Office of Probation will continue to refer appropriate families to River Haven’s Respite Program.

Strategy 2d. DC Probation Officers who have been trained as facilitators of cognitive/behavioral curriculums will implement the Crossroads curriculum or other cognitive behavioral evidence based curriculum with a focus on life skills.

Strategy 2e. Collaborative Solutions Team members and one Probation Officer will provide Functional Family Therapy at the Office of Probation on a part-time basis.

Strategy 3a. Dutchess County DCFS will screen all children listed in preventive cases for indicators of Child Sex Trafficking. The Rapid Indicator Tool to Identify Children Who May be Sex Trafficking victims or at risk of being a sex trafficking victim will be completed for every child on the report or in the family prior to the case being closed. If prompted to do so by the score, a Comprehensive Screening will be completed and case worker will follow steps outlined in 15-OCFS-ADM-16. All DCFS staff have the name of the Safe Harbour
Liaison in D.C. and will do outreach as deemed necessary

III. Foster Care

Foster Care Self-Assessment

Describe the success and challenges the district has experienced since the last plan update in the program area. Noting the data and trends as identified in Appendix C, and the cumulative district consultations (Appendix B-1 through B-6), describe the underlying conditions or factors that influence your performance in meeting the needs of children, youth, adults and families (as applicable).

Success and Challenges

2016 SELF ASSESSMENT REPORT

TARGET1a: One hundred percent (100%) of foster care cases conferenced will have plans and services assessed and revised to ensure that all issues of child safety and family needs are met.

RESULTS 100% of foster care cases conferenced had plans and services assessed and revised as needed to ensure child safety and family needs. Representatives from our Legal Department and Administration were present at these meetings.

TARGET1b. DCFS will utilize available B2H waiver slots as they become available.

RESULTS: DCFS continued to utilize all B2H waiver slots that were available. We had 26 children being serviced in the Severely Emotionally Disabled Category, 4 children in the Developmentally Disabled Category, and 1 child in the Medically Fragile Category.

TARGET 1c: Dutchess County DCFS in collaboration with NYS OCFS will continue to provide Family Meetings Trainings until all staff are fully trained. Staff who have been trained will implement these meetings in their case practice

RESULTS: DCFS continued the process of implementing Training on Family Team Meetings in collaboration with OCFS. Trained staff were being assigned as Facilitators for Family Team Meetings and a log was maintained showing when meetings were assigned and to which Facilitator.

TARGET1d: Sixty five percent (65%) of children will exit foster care within two years of date of placement.

RESULT: 47% of children in care on 12/31/11 exited to a permanent exit within two years in Dutchess County.

TARGET1e: A minimum of two independent living training sessions per year will be offered to independent living youth in Dutchess County foster homes.

RESULT: DCFS conducted two Independent Living Training Sessions yearly at DCFS. In addition, Independent Living Training was provided on an ongoing basis by contract agencies and foster parents.

TARGET 1f: All youth with a goal of another planned permanency living arrangement who are in foster homes will receive independent living skills training.

RESULT: DCFS directly arranged and provided two Independent Living Trainings yearly and insured that contract agencies and foster parents were providing ongoing training to youth who have a goal of APPLA.

Conditions or Factors

Foster Care Outcomes

Outcomes are based on the district’s performance as identified through the data and trends in the Self-Assessment. Outcomes should be expressed as desired changes within a program area to address the underlying conditions or factors as noted in the district’s Self-Assessment.
The outcomes must be related to the use of OCFS funding, and/or required areas of services by the social services district and Youth Bureau. Districts may incorporate outcomes from their Child and Family Services Program Improvement Plan (PIP). List the district's outcomes for this program area and identify quantifiable indicators (measures) of the desired changes that you will use to track progress.

Outcomes

OUTCOME 1: Children who are removed from their birth families will be ensured stability, continuity, and an environment that supports all aspects of their development (Title IV-B Goal 2).

Indicators

Indicator 1a. One hundred percent (100%) of foster care cases conferenced will have plans and services assessed and revised to ensure that all issues of child safety and family needs are met.

Indicator 1b. DCFS will utilize available B2H waiver slots as they become available.

Indicator 1c. Dutchess County DCFS in collaboration with NYS OCFS will continue to provide Family Meetings Trainings until all staff are fully trained. Staff who have been trained will implement these meetings in their case practice.

Indicator 1d. Dutchess County will achieve permanency for children within 2 years of placement equal to or above the statewide percentage.

Indicator 1e. A minimum of two independent living training sessions per year will be offered to independent living youth in Dutchess County foster homes.

Indicator 1f. All youth with a goal of another planned permanency living arrangement who are in foster homes will receive independent living skills training.

Indicator 1g. All youth in foster care will be screened for indicators of Child Sex Trafficking before or at the time of completion of the next FASP coming due.

Foster Care Strategies to Achieve Outcomes

Describe the 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 designation of what agency(ies) or department(s) is/are responsible for implementation. Explain how OCFS-administered funding supports achievement of outcomes.

Strategy 1a. Additional foster parents qualified to care for children aged 0-21 are always needed, so Dutchess continually recruits families to provide foster care.

Strategy 1b. Increasing visitation can have a positive effect on reunification of foster children and their biological parents, so Dutchess is looking for ways to achieve this. One strategy employed is the Children’s Museum in Poughkeepsie, NY has partnered with foster care to provide increased visitation for families the museum.

Strategy 1c. The Caseworker will complete the Rapid Indicator Tool to Identify Children Who May be Sex Trafficking victims or at risk of being a sex trafficking victim for every child in the family. If prompted to do so by the score, the caseworker will complete a Comprehensive Screening and will follow steps outlined in 15-OCFS-ADM-16. All DCFS staff will have the name of the Safe Harbour Liaison in D.C. and will do outreach as deemed necessary. At any time, during the life of the foster care/adoption case, if worker suspects or is concerned about the possibility of trafficking, subsequent screenings will be completed.

IV. Adoption

Adoption Self-Assessment

Describe the success and challenges the district has experienced since the last plan update in the program area. Noting the data and trends as identified in Appendix C, and the cumulative district consultations (Appendix B-1 through B-6), describe the underlying conditions or factors that influence your performance in meeting the needs of children, youth, adults and families (as applicable)

Success and Challenges

2016 SELF ASSESSMENT REPORT
TARGET 1a: One hundred percent (100%) of children who are freed for adoption by DC Family Court will be assigned an adoption worker within two weeks.

RESULT: Adoption Workers were identified within two weeks for all children freed for adoption and they have adoption workers identified and assigned to cases within two weeks.

TARGET 1b: A minimum of one freed foster care youth will secure an adoptive resource through the Wendy's Wonderful Kids Program.

RESULT: One freed child was referred to Wendy's Wonderful Kids Program in 2016.

TARGET 1c: A minimum of eighteen (18) meetings per year between DCFS adoption and foster care staff will be held.

RESULT: 31 meetings were held between DCFS Adoption and Foster Care Staff to discuss cases.

Conditions or Factors

Due to many factors, including children's complex needs, NYS, DCDCFS and family court time frames and available adoption resources, it may be longer than 24 months from the date of foster care placement to the date of adoption. DCDCFS, Dutchess County Family Court and other community agencies are working together to develop strategies to more quickly achieve the permanency goal of adoption for children.

Adoption Outcomes

Outcomes are based on the district's performance as identified through the data and trends in the Self-Assessment. Outcomes should be expressed as desired changes within a program area to address the underlying conditions or factors as noted in the district's Self-Assessment. The outcomes must be related to the use of OCFS funding, and/or required areas of services by the social services district and Youth Bureau. Districts may incorporate outcomes from their Child and Family Services Program Improvement Plan (PIP). List the district's outcomes for this program area and identify quantifiable indicators (measures) of the desired changes that you will use to track progress.

Outcomes

OUTCOME 1: Once a child under 13 or over 14 who consents to being adopted is completely freed in Dutchess County Family Court, a permanent family will be found for the child.

OUTCOME 2: Children who are removed from their birth families will be ensured stability, continuity, and an environment that supports all aspects of their development (Title IV-B Goal 2).

Indicators

Indicator 1a. One hundred percent (100%) of children who are freed for adoption by DC Family Court will be assigned an adoption worker within two weeks.

Indicator 1b. A minimum of one freed foster care youth will secure an adoptive resource through the Wendy's Wonderful Kids Program.

Indicator 1c. A minimum of eighteen (18) meetings per year between DCFS adoption and foster care staff will be held.

Indicator 2a. All youth in Adoption cases will be screened for indicators of Child Sex Trafficking before or at the time of completion of the next FASP coming due.

Adoption Strategies to Achieve Outcomes

Describe the 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 designation of what agency(ies) or department(s) is/are responsible for implementation. Explain how OCFS-administered funding supports achievement of outcomes.
Strategy 1a. Additional foster parents qualified to care for children aged 0-21 are always needed, so Dutchess continually recruits families to provide foster care and be adoptive resources.

Strategy 1b. DCFS will provide one to one orientation for people who are unable to attend monthly orientation to increase the pool of foster/adoptive parents. We will also provide Deciding Together training in the home for families who have barriers to attending evening trainings.

Strategy 1c. DCFS will refer pre-adoptive families to Post Adoption Services prior to adoption being finalized as a means of support to the child and family.

Strategy 1e. DCFS will continue to use Family Finding Strategies to locate family/resources/adoptive parents.

Strategy 2a. The Caseworker will complete the Rapid Indicator Tool to Identify Children Who May be Sex Trafficking victims or at risk of being a sex trafficking victim for every child in the family. If prompted to do so by the score, the caseworker will complete a Comprehensive Screening and will follow steps outlined in 15-OCFS-ADM-16. All DCFS staff will have the name of the Safe Harbour Liaison in D.C. and will do outreach as deemed necessary. At any time, during the life of the foster care/adoption case, if worker suspects or is concerned about the possibility of trafficking, subsequent screenings will be completed.

V. Detention

Detention Self-Assessment

Describe the success and challenges the district has experienced since the last plan update in the program area. Noting the data and trends as identified in Appendix C, and the cumulative district consultations (Appendix B-1 through B-6), describe the underlying conditions or factors that influence your performance in meeting the needs of children, youth, adults and families (as applicable).

Success and Challenges

2016 OUTCOMES—REPORT

TARGET1a. One hundred (100%) percent of youth remanded to detention for a Juvenile Delinquency act will be assessed using the approved NYS OCFS validated detention tool.

RESULT Achieved. The submitted and approved DRAI plan has been fully implemented. Staff training was completed at the time of implementation for all staff members who are responsible for completing the assessments. Training is also ongoing for new staff members as needed. All JD youth who appeared before the Family Court Judge had a DRAI completed.

TARGET1b. Dutchess County will acquire sufficient data regarding the issue of disproportionate minority confinement to determine the scope of the problem in the county.

RESULT Discussion regarding disproportionate minority confinement at Juvenile Justice Committee and Court Involved Youth were agenda items. NYS OCFS Child welfare data indicates that Dutchess County has a high disparity rate for African American and Hispanic/Latino children and their families in the child welfare system. Addressing disproportionate minority representation locally will require that all of the stakeholders, including the County Executive and staff, Family Court Judges and other personnel, the County Attorney, Department of Social Services, Law Guardians and Probation have a common understanding of the use of the detention screening tool and the alternative detention options available. Ongoing communication through our standing committees, such as the Court Involved Youth Committee and Juvenile Justice Committee is a necessary component to assess and improve our efforts in this area. We must continue to meet to add outcomes and any process issues that might be addressed to improve outcomes. The Office of Probation has obtained some training materials designed to increase awareness of this issue among our staff.

TARGET 1c. Ten (10) youth will be discharged from detention to Juvenile Pre-trial services.

RESULT Achieved. 47 youth were discharged from detention to one or more Juvenile Pre-Trial Services Including Electronic Home Detention, Release Under Supervision and/or Curfew Monitoring.

TARGET 1d. Ten (10) youth will be placed on Juvenile Pre-trial services as an alternative to being placed in detention.

RESULT Achieved. 167 youth were placed on Juvenile Pre-Trial services (Including Electronic Home Detention, Release Under Supervision and/or Curfew Monitoring,) as an alternative to being placed in detention.
TARGET 1e. Seventy percent (70%) of youth who receive curfew monitoring services will avoid detention or out-of-home placement.

RESULT Not Achieved. 55% of youth who received pre-dispositional curfew monitoring services avoided detention and out of home placement. The fact that this target was not achieved is of significant concern and has been noted by the stakeholders. It is believed that the failure to achieve this target is in part due to a number of temporary factors and some system issues that will be addressed in the coming year. Moving forward, DCFS, the Probation Department and the County Attorney’s office intend to look at the issue of out of home placement through a series of ongoing meetings where the use of detention and placement will be reviewed. We intend to focus on and make improvements to how cases are processed through the juvenile justice system with a view toward improving outcomes.

We continue to view curfew monitoring as both a valuable resource in reducing length of stay in detention and as an alternative to detention.

TARGET 1f. Sixty-five percent (65%) of youth who receive electronic monitoring services will avoid detention or out-of-home placement.

RESULT Not Achieved. 55% of youth who received pre-trial electronic monitoring services avoided detention and out of home placement. Although this goal was not achieved, we continue to view electronic monitoring as a valuable alternative to out of home placement. It is often utilized to delay or shorten the length of stay in detention. It is believed that the recent addition of a Family Court Judge and an Assistant County Attorney along with improvements to case processing will facilitate the appropriate use of this resource and then the rate of success will rise in the near future.

Conditions or Factors

As the courts have incorporated the use of the various pre-dispositional services, there has been a trend to often utilize curfew monitoring initially or RUS alone and then increase supervision to a more intense program such as the electronic monitoring program. Alternatively more intense monitoring programs may be "stepped down" to a less intense program for instance, from Electronic Monitoring to Curfew monitoring to RUS alone. As a result, in many cases the youth exhibiting the highest risk are ultimately assigned to the most intense form of supervision in an effort to provide structure and address their needs in lieu of detention. It should be noted that respondents are often released from detention to one of the pre-dispositional programs as well.

It is crucial that all of the stakeholders, including the County Executive and staff, Family Court Judges and other personnel, the County Attorney, Department of Social Services, Law Guardians and Probation have a common understanding of the use of the detention screening tool and the alternatives to detention options available. Ongoing communication through our standing committees, such as the Court Involved Youth Committee and Juvenile Justice Committee is a necessary component to assess and improve our efforts in this area. We continue to meet to address outcomes and any process issues that might be addressed to improve outcomes.

Resources also affect our outcomes. We instituted the Juvenile Pre-Trial program without any additions to staff. The two Family Court Units have also been impacted by a number of staff retirements. They have continued to deliver services effectively despite the unprecedented staff turnover.

Detention Outcomes

Outcomes are based on the district's performance as identified through the data and trends in the Self-Assessment. Outcomes should be expressed as desired changes within a program area to address the underlying conditions or factors as noted in the district's Self-Assessment. The outcomes must be related to the use of OCFS funding, and/or required areas of services by the social services district and Youth Bureau. Districts may incorporate outcomes from their Child and Family Services Program Improvement Plan (PIP). List the district's outcomes for this program area and identify quantifiable indicators (measures) of the desired changes that you will use to track progress.

Outcomes

OUTCOME 1: The Dutchess County Office of Probation and Community Corrections will work collaboratively with the Family Court, County Attorney's Office, Law Guardians and the Department of Community and Family Services to ensure that youth in detention have been objectively screened with a validated assessment tool and all alternatives to detention options have been fully utilized.

Indicators

Indicator 1a. One hundred (100%) percent of youth remanded to detention for a Juvenile Delinquency act will be assessed using the approved NYS OCFS validated detention tool.

Indicator 1b. Dutchess County will acquire sufficient data regarding the issue of disproportionate minority confinement to determine the
scope of the problem in the county.

Indicator1c. Ten (10) youth will be discharged from detention to Juvenile Pre-trial services.

Indicator1d. Ten (10) youth will be placed on Juvenile Pre-trial services as an alternative to being placed in detention.

Indicator1e. Seventy percent (70%) of youth who receive curfew monitoring services will avoid detention or out-of-home placement.

Indicator1f. Sixty five percent (65%) of youth who receive electronic monitoring services will avoid detention or out-of-home placement.

Detention Strategies to Achieve Outcomes

Describe the 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 designation of what agency(ies) or department(s) is/are responsible for implementation. Explain how OCFS-administered funding supports achievement of outcomes.

Strategies

Strategy1a. Youth in detention for a Juvenile Delinquency act will be screened using an objective detention screening tool approved by OCFS.

Strategy1b. DC Probation as a member of the Court Involved Youth Committee will examine disproportionate minority confinement in secure and non-secure detention.

Strategy1c. Based on the results of the screening tool, a recommendation for release to the least restrictive alternative to detention program will be made where indicated.

Strategy1d. Efficacy of and planning for alternative to detention options shall be driven by available data.

VI. Youth Development

Youth Development Self-Assessment

Describe the success and challenges the district has experienced since the last plan update in the program area. Noting the data and trends as identified in Appendix C, and the cumulative district consultations (Appendix B-1 through B-6), describe the underlying conditions or factors that influence your performance in meeting the needs of children, youth, adults and families (as applicable).

Success and Challenges

2015 SELF ASSESSMENT REPORT

TARGET1a. Employment/internship funded programs will meet 70% of their outcomes.

RESULT: Six programs funding in 2015 (Cornell Cooperative Ext, Mill St Loft, Spark Media, T/Hyde Park Rec, T/Pleasant Valley Rec, Northeast Community Council,) yielded an average of 95% of their outcomes met.

TARGET1b. 90% of the meetings will be attended to allocate the WIB SYEP funding each year.

RESULT: 100% of the meetings for WIB SYEP were attended. Additionally, one youth member of the Youth Board participated on the SYEP Proposals committee.

TARGET2a. 70% of youth served will successfully complete their program services and not enter/enter the Juvenile Justice system.

RESULT: Youth Services Unit provided free counseling services to youth and their families throughout the entire county. 178 youth were served and 89.3% of the closed cases successfully completed their goals to improve behavior and/or coping skills and were linked to services to avoid out-of-home placement.

TARGET2b. Funded programs that link youth to intervention and treatment services will meet 60% of their outcomes.

RESULT: Two programs were funded in 2016 (HRH River Haven Shelter and HRH River Haven Independent Living) and they met their
outcomes with an average of 99%.

TARGET2c. Funded programs that provide increased opportunities to increase levels of physical fitness will meet 70% of their outcomes.

RESULT: Five programs were funded (CAPE, Family Services Inc, HRH Enrichment, T/Hyde Park and T/Red Hook) and they met their outcomes with an average of 92%.

TARGET3a. A minimum of one scholarship will be awarded annually.

RESULT: Two DCC students were each awarded $1,500 scholarships.

TARGET4a. Funded programs that promote constructive use of time during out of school hours will meet 70% of their outcomes.

RESULT: Six programs were funded (T/Beekman Rec, Northeast Community Council, Hudson River Housing, Mediation Center, Mental Health America, and T/Hyde Park Recreation) and they met their outcomes with an average of 90%.

TARGET4b. Community service funded programs will complete at least one community service project and/or meet 80% of their outcomes.

RESULT: Two programs were funded (Northeast Community Council and Grace Smith House) and they met their outcomes with an average of 92%.

TARGET4c. The Youth Council will successfully complete at least three community service projects, one leadership training, and host four guest speakers to address teen related issues.

RESULT: The 2014-2015 Dutchess County Youth Council had 20 members representing eleven high schools, including public, private and alternative high schools. Youth Council members completed six community service projects, attended one youth conference, and hosted seven guest lecturers on various topics. The teen members gained leadership skills in public speaking, decision making, consensus building, group facilitation, and teamwork.

TARGET 4d. Funded programs that offer skill building experiences will meet 75% of their outcomes.

RESULT: Two programs were funded (Mediation Center and Northeast Community Council) and they met their outcomes with an average of 95%.

TARGET 4e. Funded programs to reduce youth violence will meet 75% of their outcomes.

RESULT: One program was funded (Hands On the Hudson Valley/Voluntary Action Center) and it met 85% of its intended outcomes.

TARGET 5a. Funded programs that provide services to children and youth victims of violence will meet 75% of their outcomes.

RESULT: One program was (Family Services Inc) and met 100% of its outcome to provide services to youth victims of violence.

TARGET 5b. Funded programs that provide education on personal safety and domestic violence will meet 75% of their outcomes.

RESULT: Two programs were funded (Child Abuse Prevention Center and Mediation Center) and they met their outcomes with an average of 94%.

TARGET 5c. Attendance of at least 70% of the varying committee/coalition meetings each year.

RESULT: Youth Services staff participated in at least 85-90% of the meetings held for several interagency committees throughout the year including the Children's Provider Committee, Juvenile Justice Committee, ECCSI Committee, Dutchess Co Juvenile Reentry Consortium, WIB Summer Youth Employment, Hudson Valley Youth Bureau Association, and the ICP Workgroup.

Conditions or Factors

NYS OCFS funding streams, SDPP and YDDP, ended on 12/31/13 and on 1/1/14, a new funding stream called Youth Development Program will took effect. Families are experiencing greater stressors across milieu. The Developmental Assets model has been
institutionalized in many of our nonprofit agencies which are directly reflected in their youth programming. The Division of Youth Services will continue to promote the Developmental Assets in program development. We will also continue to increase opportunities for young people to develop leadership skills, life skills, and to provide their “voice” in youth program.

Youth Development Outcomes

Outcomes are based on the district's performance as identified through the data and trends in the Self-Assessment. Outcomes should be expressed as desired changes within a program area to address the underlying conditions or factors as noted in the district’s Self-Assessment. The outcomes must be related to the use of OCFS funding, and/or required areas of services by the social services district and Youth Bureau. Districts may incorporate outcomes from their Child and Family Services Program Improvement Plan (PIP). List the district’s outcomes for this program area and identify quantifiable indicators (measures) of the desired changes that you will use to track progress.

Outcomes

OUTCOME 1. Youth will be prepared for their eventual economic self-sufficiency. (LA1ES, Goal11)

OUTCOME 2: Children and youth will have optimal physical and emotional health. (LA2PEH, Goal21)

OUTCOME 3: Children will leave school prepared to live, learn and work in a community as contributing members of society. (LA3ED, Goal31).

OUTCOME 4: Children and youth will demonstrate good citizenship as law abiding, contributing members of their families, schools and communities. (LA4CVC, Goal41).

OUTCOME 5: Families will provide children with safe, stable and nurturing environments. (LASFAM, Goal 51)

OUTCOME 6: NYS communities will provide children, youth and families with healthy, safe thriving environments. NYS Communities will provide children, youth and their families with opportunities to help them meet their needs for physical, social, moral and emotional growth. (LA6COM, Goals 61 &

62)

Indicators

Indicator 1a. Funded programs will meet 70% of their outcomes.

Indicator1b. 90% of the meetings will be attended to allocate the WIB SYE funding each year.

Indicator 2a. 70% of youth served will successfully complete their program services and not enter/reenter the Juvenile Justice system.

Indicator 2b. Funded programs will meet 60% of their outcomes.

Indicator 2c. Funded programs will meet 70% of their outcomes.

Indicator 3a. The YBCC will award a minimum of one scholarship annually.

Indicator 3b. Funded programs will meet 70% of their outcomes.

Indicator 3c. Funded programs will meet 70% of their outcomes.

Indicator 4a. Funded programs will meet 70% of their outcomes.

Indicator 4b. Funded programs will meet 70% of their outcomes.

Indicator 4c. The Youth Council will successfully complete at least three community service projects, one leadership training, and host four guest speakers to address teen related issues.

Indicator 4d. Funded programs will meet 75% of their outcomes.

Indicator 5a. Funded programs will meet 75% of their outcomes.

Indicator 5b. Attendance of at least 70% of the varying committee/coalition meetings each year.
Indicator 6a. Funded programs will meet 70% of their outcomes.

Indicator 6b. Funded programs will meet 70% of their outcomes.

Indicator 6c. Funded programs will meet 70% of their outcomes.

Youth Development Strategies to Achieve Outcomes

Describe the strategies that will be implemented to achieve the identified outcomes, including those strategies that support your Child and Family Services Plan outcomes. Each strategy should include the timeframe for completion and designation of what agency(ies) or department(s) is/are responsible for implementation. Explain how OCFS-administered funding supports achievement of outcomes.

Strategies

Strategy 1a. To provide youth with Life Skills Supports the Youth Board will support services to enhance the skills of youth in areas of self-care, daily living, personal finance and budgeting, managing interpersonal relationships, information technology, and other topics that develop the skill set of youth to reach independence. (YBCC Priority SOS 0123)

Strategy 1b. Director of Youth Services will participate on the WIB Summer Youth Employment Program grant allocation process.

Strategy 2a. Youth Services will provide direct support services to youth and families to promote emotional health. (Youth Services Unit)

Strategy 2b. To provide access to services, the Youth Board will support services that link youth to intervention and treatment services. (YBCC Priority SOS 0231; 0234; 0235)

Strategy 2c. To promote optimal physical health, the Youth Board will support programs that provide opportunities to increase levels of physical fitness. (YBCC Priority SOS 0232)

Strategy 3a. To assist county youth in achieving higher education, the Youth Board will provide scholarships at Dutchess Community College.

Strategy 3b. To provide academic support services to youth, the Youth Board will support programs that offer resources to support youth’s optimal academic performance. (YBCC Priority SOS 0311)

Strategy 3c. To provide Drop Out Prevention Services, the Youth Board will support programs or services designed to support retention of all students, and the prevention of dropouts from the most at risk youth.

Strategy 4a. To increase safe places out of school time services, the Youth Board will support programs that promote constructive use of leisure time, access to a variety of enrichment activities and foster success in school and life. (YBCC Priority SOS 0424)

Strategy 4b. To increase youth leadership and empowerment opportunities, the Youth Board will fund programs that provide character education, leadership skills development and/or community/civic activities. (YBCC Priority SOS 0420)

Strategy 4c. The Division of Youth Services will organize and sponsor the DC Youth Council to provide high school students opportunities and training for youth leadership, youth empowerment and develop civic values.

Strategy 4d. The Youth Board will fund programs that offer skill building experiences, such as social competencies, arts and cultural awareness, athletics and recreation, health information, and conflict resolution. (SOS 0422, 0423, and YBCC Priority SOS 0424)

Strategy 5a. To increase family supports, the Youth Board will fund programs that focus on strengthening families and communities so they can foster the optimal development of children, youth, and adult family members. (YBCC Priority SOS 0521)

Strategy 5b. To improve service coordination and interagency collaboration, The Division of Youth Services staff will participate on interagency committees/coalitions to address youth violence, family issues, substance abuse, and other youth related matters.

Strategy 6a. To increase mentoring supports for youth, the Youth Board will fund programs which link youth to positive role models that are sustained over a period of time. (YBCC Priority SOS 0628)

Strategy 6b. To increase youth opportunities for community service and activism, the Youth Board will fund programs which link youth
to volunteer projects and with opportunities to be civically engaged. (YBCC Priority SOS 0634)

Strategy 6c. To increase Runaway and Homeless Youth (RHY) prevention and support, the Youth Board will fund services to the RHY population that include case management, information dissemination, referral services, counseling, street outreach, hotlines, and mediation.

VII - Domestic Violence

Domestic Violence Self-Assessment

Describe the success and challenges the district has experienced since the last plan update in the program area. Noting the data and trends as identified in Appendix C, and the cumulative district consultations (Appendix B-1 through B-6), describe the underlying conditions or factors that influence your performance in meeting the needs of children, youth, adults and families (as applicable).

Success and Challenges

2016 SELF-ASSESSMENT REPORT

Target 1. A minimum of 175 families per year will receive direct services or consultation services from the domestic violence liaison (DVL)

RESULT In 2016 of 481 victims contacted by the DVL's completed a safety plan.

Conditions or Factors

Domestic violence often goes unreported. It may exist and workers may be unaware. Risk is highest when the decision to separate is made. Safety is an issue in reporting and leaving the abuser may cause homelessness.

Domestic Violence Outcomes

Outcomes are based on the district's performance as identified through the data and trends in the Self-Assessment. Outcomes should be expressed as desired changes within a program area to address the underlying conditions or factors as noted in the district's Self-Assessment. The outcomes must be related to the use of OCFS funding, and/or required areas of services by the social services district and Youth Bureau. Districts may incorporate outcomes from their Child and Family Services Program Improvement Plan (PIP). List the district's outcomes for this program area and identify quantifiable indicators (measures) of the desired changes that you will use to track progress.

Outcomes

OUTCOME 1: Victims of family violence, both child and adult will be afforded the safety and support necessary to achieve self sufficiency and/or to promote their continued growth and development (child). (Title IV-B goal 3).

Indicators

Indicator 1a. A minimum of 175 families per year will receive direct services or consultation services from the domestic violence liaisons.

Indicator 1b. Two in-service trainings will be conducted

Indicator 2c. Two cross trainings will be conducted.

Domestic Violence Strategies to Achieve Outcomes

Describe the 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 designation of what agency(ees) or department(s) is/are responsible for implementation. Explain how OCFS-administered funding supports achievement of outcomes.

Strategies

Strategy 1a. Two domestic violence liaisons will be located in Dutchess County DCFS Children's Services division to act as a resource and support to Children's Services staff members in their work with families dealing with domestic violence issues.

Strategy 1b. The DVL's will conduct in service trainings for CPS staff.
Strategy 1c. The CPS/DVL’s will conduct cross training for DV service providers and child welfare staff.

VIII. Child Care

Child Care Self-Assessment

Describe the success and challenges the district has experienced since the last plan update in the program area. Noting the data and trends as identified in Appendix C, and the cumulative district consultations (Appendix B-1 through B-6), describe the underlying conditions or factors that influence your performance in meeting the needs of children, youth, adults and families (as applicable)

Success and Challenges

2016 SELF-ASSESSMENT-REPORT

TARGET 1a. 100% of families guaranteed childcare will have funds available to them during the fiscal year.

RESULT Sufficient Funds were available so that all families guaranteed childcare

TARGET 1b. 75% of investigations are completed timely.

RESULT 100% of investigations were completed in a timely manner.

Conditions or Factors

Worsening economic conditions in the County have increased need and forced the district to limit eligibility in the optional categories of eligible families to those whose income is at or below 100% of the SIS.

Child Care Outcomes

Outcomes are based on the district’s performance as identified through the data and trends in the Self-Assessment. Outcomes should be expressed as desired changes within a program area to address the underlying conditions or factors as noted in the district’s Self-Assessment. The outcomes must be related to the use of OCFS funding, and/or required areas of services by the social services district and Youth Bureau. Districts may incorporate outcomes from their Child and Family Services Program Improvement Plan (PIP). List the district’s outcomes for this program area and identify quantifiable indicators (measures) of the desired changes that you will use to track progress.

Outcomes

OUTCOME 1: Dutchess County will make available and accessible child care to families eligible for child care services under the NYSCCBG program

Indicators

Indicator 1a. One hundred percent (100%) of families guaranteed childcare will have CDBG funds available to them during the fiscal year.

Indicator 1b. Seventy five percent (75%) of investigations are completed in a timely manner.

Child Care Strategies to Achieve Outcomes

Describe the 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 designation of what agency(ies) or department(s) is/are responsible for implementation. Explain how OCFS-administered funding supports achievement of outcomes.

Strategies

Strategy 1a. CCBG expenditures will be monitored so that funding remains available throughout the year for families guaranteed childcare.

Strategy 1b. Child care Front End Detection investigations will be completed in a manner that will allow the avoidance of improper payments while processing of applications within 30 days.

IX. Runaway and Homeless Youth
Runaway and Homeless Youth Self-Assessment

Describe the successes and challenges the district has experienced since the last plan update in the program area. Noting the data and trends as identified in Appendix C, and the cumulative district consultations (Appendix B-1 through B-6), describe the underlying conditions or factors that influence your performance in meeting the needs of children, youth, adults and families (as applicable).

Success and Challenges

2016 Runaway and Homeless Youth SELF ASSESSMENT

TARGET 1a: 100 youth including runaway, homeless, victims of alleged abuse, maltreatment or human trafficking, and/or PINS/JD youth in need of respite will receive short-term residential care and case management services through Hudson River Housing's OCFS certified RHYA emergency shelter known as River Haven.

RESULT 1a: 80 youth in need of respite were housed and received case management services through Hudson River Housing's OCFS certified RHYA emergency shelter known as River Haven in 2016. The number served was lower than projected in part due to longer lengths of stay and duplicate stays. Staff have identified the need for increased outreach. Targeted outreach was curtailed over the past few years due to budget constraints. A River Haven Youth Advisory Board will assist with development and implementation of outreach plan in 2017.

TARGET 1b: At discharge from the shelter, 95% of the youth served will be re-united with their families or placed in an otherwise safe and appropriate residence.

RESULT 1b: 99% of the youth discharged were re-united with their families or placed in an otherwise safe and appropriate residence (including court ordered placement). Only one youth exited to an unknown destination.

TARGET 1c: At least 80% of the youth served by HRH's River Haven Shelter will be diverted from 'out of home' placement through the juvenile justice, mental health or child welfare systems.

RESULT 1c: 89 of the 80 youth served (86%) met the target.

TARGET 1d: HRH's River Haven Independent Living Support Program (ILSP) will provide at least 60 older homeless and at risk youth with case management services and other supports so that 75% of those served will have stable and appropriate housing and will be employed and/or enrolled in educational/vocational training at time of discharge

RESULT 1d: 45 youth were served through HRH's River Haven Independent Living Support Program (ILSP) in 2016. Of those discharged in 2016, 84% had stable housing and were employed and/or enrolled in educational/vocational training at exit. This Program, a long term recipient of OCFS RHYA Part II funding, was not funded through RHYA in 2016 due to a change in funding criteria (currently only certified residential programs are eligible). The Program was continued by HRH in 2016, but fewer youth than planned were served as efforts got underway to restructure the Program. (Further comments follow at the end of this section).

TARGET 1e: HRH will provide young adult specific, supportive transitional housing for at least 8 homeless individuals between the ages of 18 and 25, 80% of whom will have secured stable housing and advanced their self-sufficiency by time of discharge.

RESULT 1e: HRH provided 8 units of young adult specific, supportive transitional housing throughout 2016. Eight (8) of the 9 participants discharged in 2016, (89%) secured stable housing and advanced their self-sufficiency by time of discharge. Target exceeded.

TARGET 1f: RHY service providers will receive training on topics including human trafficking, LGBT issues, and youth development to increase awareness and sensitivity to the needs of the RHY target population and ensure program data accurately identifies and reflects the characteristics and experiences of the young people served.

RESULT 1f: Target was met and new assessment tools implemented at the River Haven Shelter to better identify RHY who are victims of or at high risk of becoming victims of human trafficking.

Target 2a. The RHYS/CoC and/or a designated RHYA Service Provider will attend at least 75% of the ICP & DCHC (COC) meetings, share information about RHYS needs & services at least annually and participate in the ICP and CoC planning processes.

RESULT 2a: The RHYS/CoC and/or a designated RHYA Service Provider participated in the ICP and CoC planning processes and were represented at 100% of the ICP & DCHC (COC) meetings in 2016. Information about RHYS needs & services was shared throughout the
Target 2b. RHY staff will be represented on the Probation Department's Court Involved Youth Committee, the Committee on Human Trafficking, the Children's Services Providers' Committee and other local committees as needed to help ensure the needs of RH youth and their families are addressed in a coordinated manner.

RESULT 2b: RHY staff maintained representation on the above committees throughout 2016.

Conditions or Factors

Hudson River Housing's River Haven Youth Shelter, a 12 bed NYS RHYA certified Part I Shelter for youth under age 18, continued to serve as a key resource for County runaway/homeless youth and their families as well as a safe haven for victims and potential victims of abuse, maltreatment and human trafficking. Under contract with OCFS, half of the RH beds were funded and reserved for respite care as an alternative to detention and out of home placement for court involved/at-risk youth. Increased County and NYS funding associated with serving these youth populations, resumption of a federal grant and additional RHY Part I funding are expected to alleviate budgetary shortfalls that have constrained RHY outreach efforts and reduced service capacity in recent years.

As of 2016 there were no longer any NYS RHYA PART II certified transitional housing programs or PART II funded services for 16 to 21 year old homeless youth operating in Dutchess County. Specific outcome indicators related to these services will not be included for 2017. Hudson River Housing (HRH), the former operator of these RHY Part II services, continues to tap other resources to provide less intensive residential and non-residential services for homeless youth. While the loss of funding has resulted in service gaps, HRH has been able to modify its programming to serve 18-25 year olds, now that it is no longer bound to stay within the RHYA statutory upper age limit of 20.

The Governor's recent State of the State Address confirms a strong commitment to meeting the needs of runaway and homeless youth throughout NYS. Consistent with the recommendations of NYS's Interagency Council on Homelessness and efforts already toward older homeless youth, the Governor plans to advance legislation to provide counties the option to serve 21 to 24 year-olds in residential programs for RHY and to increase the current maximum length of stay permitted in these residences. The Governor will direct state agencies to collaborate in an effort to ensure a consistent definition of homelessness is used across all agencies that work with runaway and homeless youth.

The Dutchess County RHYSC and RHY staff will closely follow these significant changes and actively seek opportunities to develop, expand and/or modify RHY programming to best address local needs. Outcomes related to serving older homeless may be added to the ICP, as these NYS initiatives are implemented.

Runaway and Homeless Youth Outcomes

Outcomes are based on the district's performance as identified through the data and trends in the Self-Assessment. Outcomes should be expressed as desired changes within a program area to address the underlying conditions or factors as noted in the district's Self-Assessment. The outcomes must be related to the use of OCFS funding, and/or required areas of services by the social services district and Youth Bureau. List the district's outcomes for this program area and identify quantifiable indicators (measures) of the desired changes that you will use to track progress.

Outcomes

OUTCOME 1: Dutchess County will provide runaway and homeless youth and their families with opportunities to meet their needs for physical, social, moral, and emotional growth (LA6COM, Goal 62)  

OUTCOME 2: Dutchess County will ensure the coordination of all available county resources for RHI youth and their families.

Indicators

Indicator 1a.100 youth including runaway, homeless, victims of alleged abuse, maltreatment or human trafficking, and/or PINS/JD youth
in need of respite will receive short-term residential care and case management services through Hudson River Housing's OCFS certified RHYA emergency shelter known as River Haven.

Indicator 1b. At discharge from the shelter, 95% of the youth served will be re-united with their families or placed in an otherwise safe and appropriate residence.

Indicator 1c. At least 80% of the youth served by HRH's River Haven Shelter will be diverted from 'out of home' placement through the juvenile justice, mental health or child welfare systems.

Indicator 1d. HRH's River Haven Independent Living Support Program (ILSP) will provide at least 60 older homeless and at risk youth with case management services and other support so that 75% of those served will have stable and appropriate housing and will be employed and/or enrolled in educational/vocational training at the time of discharge.

Indicator 1e. HRH will provide young adult specific, supportive transitional housing for at least 8 homeless individuals between the ages of 18 and 25, 80% of whom will have secured stable housing and advanced their self-sufficiency by time of discharge.

Indicator 1f. RHY service providers will receive training on topics including human trafficking, LGBT issues, and youth development to increase awareness and sensitivity to the needs of the RHY target population and ensure program data accurately identifies and reflects the characteristics and experiences of the young people served.

Indicator 2a. The RHYSIC and/or a designated RHYA Service Provider will attend at least 75% of the ICP & DCHC (COC) meetings, share information about RHY needs & services at least annually and participate in the planning process.

Indicator 2b. RHY staff will be represented on the Probation Department's Court Involved Youth Committee, the Committee on Human Trafficking, the Children's Services Providers' Committee and other local committees as needed to help ensure the needs of RH youth and their families are addressed in a coordinated manner.

Runaway and Homeless Youth Strategies to Achieve Outcomes

Describe the 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 designation of what agency(ies) or department(s) is/are responsible for implementation. Explain how OCFS-administered funding supports achievement of outcomes. Districts may incorporate outcomes from their Child and Family Services Program Improvement Plan (PIP). 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.

Strategies

Strategy 1a. Dutchess County will ensure that runaway, homeless and other at risk have access to safe emergency housing, respite care and services by funding, supporting and monitoring Hudson River Housing’s (HRH’s) River Haven Shelter, a 12-bed NYS certified RHYA Part 1 emergency shelter (Under contract with DCFS, 4 RH beds will be reserved for voluntary respite care and 1 RH bed will be used to prevent and reduce detention stays).

Strategy 1b. To ensure older homeless youth have the support and opportunities needed to become self-sufficient, Dutchess County will fund, support and monitor HRH’s River Haven Independent Living Support Program a RHYA Part II Non-Residential Case Management Program.

Strategy 2a. To ensure the coordination of all available resources for runaway and homeless youth and their families, the RHY Services Coordinator and/or RHY Service Providers will represent the needs of RHY population in County planning processes including the ICP & the DC Housing Consortium's Continuum of Care (CoC) homeless service plan.

Strategy 2b. RHY Services Coordinator will ensure that RHY have full access to educational services as entitled under the law.

X. Adult Protective Services

Adult Protective Services Self-Assessment

Describe the success and challenges the district has experienced since the last plan update in the program area. Noting the data and trends as identified in Appendix C, and the cumulative district consultations (Appendix B-1 through B-6), describe the underlying conditions or factors that influence your performance in meeting the needs of children, youth, adults and families (as applicable).
Success and Challenges

2016 SELF ASSESSMENT REPORT

TARGET 1a: The Team will develop a training protocol and conduct five (5) sessions per year.

RESULT: Adult Services Director worked collaboratively with our Administration Team, Mediation Center Coalition on Elder Abuse and Adult Services staff to develop power point presentations on Elder Abuse, PSA and Adult Services in Dutchess County. Adult Services staff conducted PSA overviews to Hospice, Hyde Park Family Practice, Mid-Hudson Regional Homecare and Interfaith Residence for seniors. Adult Services staff attended 13 OFA Senior Picnics and the Annual Golden Gathering. These events provided a venue to meet and distribute information and material to hundreds of seniors. Adult Services Director presented an overview of PSA to community partners at our Agency sponsored Navigating the System event in May. Adult Services Director and Director of TA presented an overview of Adult Services (Housing and PSA) and Temporary Assistance to NYS Parole Officers and Supervisors. Adult Services Director participated in NYS Assembly Woman Didi Barrett's community gathering focused on addressing needs of seniors aging in rural areas. Adult Services Director and Supervisors continued to meet with Vassar Brothers Hospital Social Work/Case Management Representatives to exchange information on services and improve communication in discharge planning.

TARGET 1b: The Team will review a minimum of ten (10) difficult cases per year.

RESULT: 11 cases were presented to the Case Consultation Team.

TARGET 2a: Eight (8) service providers will be invited to speak to staff to facilitate collaborative service plans (2 per year).

RESULT: Adult Services sponsored three In-service presentations at DCFS: Coalition on Elder Abuse, Hamaspik MLTC overview and Hudson River Housing overview of temporary and permanent housing options and supportive programs for homeless, low income, veterans, persons with persistent mental health issues and youth. Adult Services staff were also invited to participate in monthly Agency sponsored presentations that included overviews on Hoarding, Social Security Administration, Mental Health America and the provision Health Home and Case Management Services.

TARGET 2b: A Supervisor or Director will attend all meetings of the Coalition on Elder Abuse, provide updates at staff meetings and develop a resource/contact list for case manager use in servicing abuse cases.

RESULT: Director attended 9 scheduled Coalition on Elder Abuse member meetings. Resource list was distributed to Adult Services Staff. Adult Services Director, Deputy Commissioners, PSA Supervisors and staff participated as a vendor and group facilitator at the Annual World Elder Abuse Awareness Day community event. Deputy Commissioner also participated in Multi-Disciplinary Committee meetings. Adult Services Director, Mediation Center Executive Director and Elder Abuse Coalition Members presented an overview of Elder Abuse and Services to Senior Housing Managers.

TARGET 2d: The Director or the Supervisor will attend all Housing Consortium meetings and report back to staff any programs services pertinent to housing needs of PSA population.

RESULT: The Director and/or Supervisor attended all scheduled Housing Consortium Meetings and participated in the annual Homeless Point in Time Survey.

TARGET 2e: The Supervisor will attend all C.A.S.E. meetings and provide a report at monthly staff meetings. The Supervisor will share a list of C.A.S.E. resources with case managers.

RESULT: Supervisor attended 3 C.A.S.E. meetings at Office for Aging and shared information at staff meetings and Agency Administration.

TARGET 2f: The Adult Services Director will form an internal team at DCFS to outline Agency needs and targeted goals and objectives. The team will also investigate other task force models in the state with positive outcomes. The team will conduct community outreach and facilitate the formation of the task force meetings and develop a resource/contact list for case manager use in servicing abuse cases.

RESULT: Adult Services Director participated in two Round Table discussions on Elder Abuse sponsored by Senator Serino. Collective dialogue on identifying state, federal and local resources and opportunities for enhancing responses and services to address elder abuse continued. Director continues to reach out to the local District Attorney Office to enhance current PSA reporting and
investigation processes for suspected adult abuse or financial exploitation. Our Agency is supporting the Mediation Center of Dutchess Coalition on Elder Abuse's planned application in 2017 to Lifespan for a mini-grant to establish or expand Enhanced Multidisciplinary Teams for review cases of financial exploitation of older adults and increase collaboration and case investigations of possible elder financial exploitation.

Conditions or Factors

The goal of Adult Protective Services is to assist individuals to remain safely in their homes' communities. This must always be a consideration. Often victims of abuse or financial exploitation are unwilling to report the perpetrators to the police fearing loss of their homes or the incarceration of a family member. Mental illness, substance abuse, ability to perform the activities of daily living must always be considered.

In 2016 the district received 577 PSA referrals, completed 470 PSA assessments, managed 34 Guardianship cases, obtained 2 Access Orders, managed 98 Representative Payee cases, and completed 173 Housing Services Intakes. Comparatively, in 2015 the district received 609 PSA referrals, completed 522 PSA assessments, managed 34 Guardian cases, managed 97 Representative Payee cases and completed 149 Housing Services Intakes. Although there was a 10% decrease in completed assessments, there was no change in the amount of cases that required ongoing services. The cases continue to present in crisis and difficult to service due to restricted access for persons who have challenges in engaging with mainstream service agencies. In 2016, the district focused on participating in community events and activities centered around Elder Abuse Education and Housing. The district participated in three community round table discussions sponsored by state elected officials, 14 large scale community events and provided or funded 15 presentations to community agencies, including law enforcement and local college students. Housing became a priority in 2016 with Executive Order 151 and regulatory changes and clarifications by OTDA regarding the administration of benefits and services and requirements for districts to provide oversight and inspections for temporary housing locations. Our district is fortunate to have strong partnerships with all County Housing Service providers and collaboratively addressed new mandates and program requirements.

The total amount of PSA referrals decreased by 5% and assessments decreased by 10% from 2015 to 2016. Guardianship and Representative Cases remained the same.

Housing Services Intakes increased 14% from 149 in 2015 to 173 in 2016. With the increase in intakes, the district saw an increase of 30% in total emergency housing expenditures from $1,540,523 in 2015 to $2,191,981 in 2016, a 25% increase in amount of persons provided emergency housing from 342 in 2015 to 453 in 2016 and an increase of 23% in the average length of stay in temporary housing from 64 days in 2015 to 83 days in 2016. Affordable housing remains an obstacle to securing permanent housing, especially for families and individuals with Temporary Assistance as the only source of financial support.

Adult Protective Services Outcomes

Outcomes are based on the district's performance as identified through the data and trends in the Self-Assessment. Outcomes should be expressed as desired changes within a program area to address the underlying conditions or factors as noted in the district's Self-Assessment. The outcomes must be related to the use of OCFS funding, and/or required areas of services by the social services district and Youth Bureau. Districts may incorporate outcomes from their Child and Family Services Program Improvement Plan (PIP). List the district's outcomes for this program area and identify quantifiable indicators (measures) of the desired changes that you will use to track progress. Districts are required to address at least two of the following State-determined adult services goals:

1. 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.
2. 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.
3. To utilize multi-disciplinary community resources to improve assessments as well as develop service plans which reduce risk and protect adults.
4. To provide protective services in the least restrictive manner, respecting the adult's rights to self-determination and decision-making.

Outcomes

OUTCOME 1: Impaired adults who are abused, neglected or exploited by others will have their situation thoroughly investigated and be protected.

OUTCOME 2: DCFS will utilize multi-disciplinary community resources to improve assessments and to develop service plans which
reduce risk and protect adults.

Indicators

Indicator 1a. The Team will develop a training protocol and conduct five (5) sessions per year.

Indicator 1b. The Team will review a minimum of ten (10) difficult cases per year.

Indicator 2a. Eight (8) service providers will be invited to speak to staff to facilitate collaborative service plans (2 per year).

Indicator 2b. A Supervisor or Director will attend all meetings of the Coalition on Elder Abuse, provide updates at staff meetings and develop a resource/contact list for case manager use in servicing abuse cases.

Indicator 2c. The Director or the Supervisor will attend all Housing Consortium meetings and report back to staff any programs services pertinent to housing needs of PSA population.

Indicator 2d. The Supervisor will attend all C.A.S.E. meetings and provide a report at monthly staff meetings. The Supervisor will share a list of C.A.S.E. resources with case managers.

Indicator 2e. The Adult Services Director will form an internal team at DCFS to outline Agency needs and targeted goals and objectives. The team will conduct community outreach and work with community partners to explore options for an Adult Abuse M.D.T. in Dutchess County.

Adult Protective Services Strategies to Achieve Outcomes

Describe the 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 designation of what agency(ies) or department(s) is/are responsible for implementation. Explain how OCFS-administered funding supports achievement of outcomes.

Strategies

Strategy 1a. The DCFS funded Mediation Center Coalition on Elder Abuse will conduct 9 public information sessions, 3 of which target professional organizations, about adult abuse to enable the public to better recognize and report on it.

Strategy 1b. Adult Services will present difficult cases to an internal DCFS Case consultation Team.

Strategy 2a. Service providers will be invited to speak to DCFS staff.

Strategy 2b. Adult Services Director and/or Supervisor will attend meetings of the Coalition on Elder Abuse to strengthen relationships with network providers, assess the needs of older adults as they relate to abuse and neglect, and identify systemic issues that require analysis to improve outcome of service delivery in Dutchess County.

Strategy 2c. The Supervisor of the DCFS Housing Unit and the Director of Adult Services will participate in Dutchess County Housing Consortium meetings and share information about housing opportunities with the DCFS Adult Services Unit.

Strategy 2d. An Adult Services Supervisor will attend Council of Agencies Serving the Elderly (C.A.S.E.) meetings to expand network of supportive service providers of the elderly and provide PSA information to same providers.

Strategy 2e. The Department of Community and Family Services and The Adult Services Director will support and work with The Mediation Center Coalition on Elder Abuse in the development of a Multidisciplinary Team to review cases of suspected financial abuse of older adults and increase collaboration of services and case investigations of possible abuse.

Plan Monitoring

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.

The ICP Workgroup will monitor the status of the various strategies annually. The Youth Service's Child and Family Services Plan outcomes and strategies are reflected in the yearly Division's goals and shared with the Youth Board, Commissioner of DCFS and County Executive. The Youth Service's Child and Family Services Plan outcomes and strategies are reviewed annually and shared with the Youth Board and the Commissioner of DCFS. The summary of Funded OCFS Program Services Annual Outcomes is also shared.
Brief updates are included in the Youth Services emails to contract agencies as needed. The annual status of the Youth Services are reported to the County Executive for his State of the County Address in January. The annual status of DCFS achievements is reported to the County Executive for his State of the County Address and achievements are disseminated to a wider audience with the Department’s Annual report. DCFS Administrative Staff meeting minutes are sent to the CE, Legislature and DCFS Commissioner’s Advisory Committee. Both DCFS and Youth Services goals and achievements are discussed during the course of the quarterly Health and Human Services Cabinet meetings. Opportunities to increase cross-system support and/or processes to improve outcomes for families and children will be studied are recommended to the County Executive. The Cabinet is involved in the long term project to incorporate outcome language into county direct contracted services. Probation shares bi-annually strategies achieved with the Juvenile Justice Committee.

Priority Program Areas

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

Overall our economic indicators have worsened since 2007 resulting in a significant increase in the number families under stress. Suicides continue to increase as identified by the Medical Examiner as well as the abuse of opiates. Exacerbating this is the loss of services in the community with Mid-Hudson Regional Hospital having closed its adolescent psychiatric beds and reducing its adult psychiatric beds, and Hudson River Psychiatric Center’s closing in October 2011. Although the Adolescent Partial Hospitalization Program (PHP) offers an intensive treatment program designed to keep adolescents (ages 12 – 18), in the community and prevent inpatient hospitalization, children and youth requiring in-patient are placed in facilities outside the county causing disruptions for them and their families in treatment, support and long term planning options.

Domestic violence homicides increased during 2010 along with DV calls both to Emergency Response and provider hotlines. We must strive to prevent the loss of funding to existing services in this economic climate. Addressing transitioning youth successfully to adult services is still a need.

The Youth Board and Coordinating Council have identified the following Life Areas (LA) and Services, Opportunities & Supports (SOS) as funding priorities for the Division of Youth Services: LA Economic Security with SOS Life Skills Supports;

LA Physical & Emotional Health with SOS’s Alcohol and Substance Abuse Prevention Services, Year Round/Seasonal Activities, Mental Health Supports, Disability Supports; LA Education w SOS’s Academic Support Services, Dropout Prevention Services; LA Citizenship/Civic Engagement with SOS’s Youth Leadership/Empowerment Opportunities, Safe Place Out of School Time Services; LA Family with SOS Family Supports; and LA Community with SOS’s Mentoring Supports, Community Service/Youth Activism Opportunities, Runaway and Homeless Youth Prevention and Support Services, Runaway and Homeless Youth Shelter (NYS Certified Programs only), and Youth Bureau Administration. The main priority for Runaway and Homeless Youth is to maintain the current level and quality of services.

Financing Process

☐ Check if No Change in This Section

Describe the financing for the district’s services.

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.

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).

Describe how purchase service contracts will be monitored.

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.
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 Update cycle?

☐ Yes

☐ No

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

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.

☐ Previously submitted active MOU still in effect.

☐ If changed, please send a copy or provide narrative summary below.

Narrative Summary

Cooperative Agreement made by and between Dutchess County Department of Community and Family Services (hereinafter referred to as the "Department") with offices at 60 Market Street, Poughkeepsie, NY 12601 and Dutchess County District Attorney (hereinafter referred to as the "DA") with offices at 236 Main Street, Poughkeepsie, NY 12601. WHEREAS, the Department investigates reports of suspected child abuse and maltreatment; and WHEREAS, 18 NYCRR 432.3 requires that the Department provide notice and forward copies of those reports to the DA that the DA has specified; NOW THEREFORE, the Department and the DA agree with the terms and conditions hereinafter stated: 1. Child Protective Services (CPS) will immediately give telephone notice and forward a copy of all State Central Register Reports of Suspected Child Abuse or Maltreatment which involve the death of a child to an attorney in the Dutchess County District Attorney’s Office Special Victims Bureau, pursuant to SSL 424.4. 2. CPS will contact a police officer in the appropriate jurisdiction at the earliest practicable time, regarding each State Central Register report of physical abuse or "neglect," when the neglect allegation includes an accusation of any person inflicting physical injury to a child that may not rise to the level defined in Social Services Law as abuse or an allegation involving the providing of alcoholic beverages and/or illegal drugs to a child, to arrange for simultaneous or parallel investigations when a criminal investigation is deemed necessary by the police. 3. CPS workers will return telephone calls received from the District Attorney’s Office within one business day. Assistant District Attorneys will return telephone calls received from CPS within one business day. 4. When so requested, each agency will provide the other with updates regarding the status of their respective investigations and/or cases relating to child abuse and maltreatment. 5. No monetary consideration shall be payable by either DSS or the District Attorney for performance under this Memorandum of Understanding.

Is your district amending its Child and Family Services Plan (CFSP) or Annual Plan Update (APU)?

☐ Yes

(Check "Yes" or "No" for each Appendix listed below to indicate whether or not there was an amendment to that Appendix. If the Appendix was amended, check "Yes" or "No" to indicate the section that was amended.)

☐ No

(If this box is checked, no further action is needed on this Appendix)

Appendix K #2 – Child Care Administration
Appendix L – Other Eligible Families if Funds are Available

Appendix M #1 – Reasonable Distance, Recertification Period, Family Share, Very Low Income, Federal and Local Priorities (Required)

Appendix M #2 – Case Openings, Case Closings, and Waiting List (Required)

Appendix M #3 – Fraud and Abuse Control Activities and Inspections (Required)

Appendix N – District Options (Required)

Appendix O – Funding Set-Asides (Optional)
Appendix P – Title XX Child Care (Optional)

Are there changes to this appendix?
☐ Yes ☐ No

Appendix Q – Additional Local Standards for Child Care Providers (Optional)

Are there changes to this appendix?
☐ Yes ☐ No

Appendix R – Payment to Child Care Providers for Absences (Optional)

Are there changes to this appendix?
☐ Yes ☐ No

Appendix S – Payment to Child Care Providers for Program Closures (Optional)

Are there changes to this appendix?
☐ Yes ☐ No

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

Are there changes to this appendix?
☐ Yes ☐ No

If you have checked "Yes," check all of the sections that changed or did not change below.

I. Transportation
☐ Yes ☐ No

II. Differential Payment Rates
☐ Yes ☐ No

III. Enhanced Market Rate for Legally-Exempt Family and In-Home Providers
☐ Yes ☐ No

IV. Sleep
☐ Yes ☐ No

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

Are there changes to this appendix?
☐ Yes ☐ No

If you have checked "Yes," check all of the sections that changed or did not change below.

I. Child Care Exceeding 24 Hours
☐ Yes ☐ No

II. Child Care Services Unit
☐ Yes ☐ No

III. Waivers
☐ Yes ☐ No

IV. Breaks in Activities
☐ Yes ☐ No

APPENDIX L

Other Eligible Families if Funds are Available

Listed below are the optional categories of eligible families that your district can include as part of its County Plan. Select any categories your district wants to serve using the NYSCCCBG funds and describe any limitations associated with the category.
<table>
<thead>
<tr>
<th>Optional Categories</th>
<th>Option</th>
<th>Limitations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Public Assistance (PA) families participating in an approved activity in addition to their required work activity.</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2) PA families or families with incomes up to 200% of the State Income Standard when child care services are needed for the child to be protected because the caretaker is:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a) participating in an approved substance abuse treatment program</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2b) homeless</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>2c) a victim of domestic violence and participating in an approved activity</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>2d) in an emergency situation of short duration</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>3) Families with an open child protective services case when child care is needed to protect the child.</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>4) Families with incomes up to 200% of the State Income Standard when child care services are needed for the child to be protected because the child's caretaker:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a) is physically or mentally incapacitated</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>4b) has family duties away from home</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>5) Families with incomes up to 200% of the State Income Standard when child care services are needed for the child’s caretaker to actively seek employment for a period up to six months. Child care services will be available only for the portion of the day the family is able to document is directly related to the caretaker engaging in such activities.</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>6) PA families where a sanctioned parent or caretaker relative is participating in unsubsidized employment, earning wages at a level equal to or greater than the minimum amount under law.</td>
<td>Yes</td>
<td>If working towards lifting sanction</td>
</tr>
<tr>
<td>7) Families with incomes up to 200% of the State Income Standard when child care services are needed for the child’s caretaker to participate in:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a) a public or private educational facility providing a standard high school curriculum offered by or approved by the local school district</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>7b) an education program that prepares an individual to obtain a NYS High School equivalency diploma</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>7c) 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</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>7d) a program providing literacy training designed to help individuals improve their ability to read and write</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>7e) an 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</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>7f) 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's degree or certificate of completion</td>
<td>Yes</td>
<td>Temporary Assistance recipients only with approval of DC DFCS Employment Worker</td>
</tr>
<tr>
<td>7g) 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</td>
<td>Yes</td>
<td>Temporary Assistance recipients only with approval of DC DFCS Employment Worker</td>
</tr>
<tr>
<td>7h) a pre-vocational skill training program such as a basic education and literacy training program</td>
<td>Yes</td>
<td>If approved by the DC DFCS Employment Worker, and the program does not exceed 6 months</td>
</tr>
<tr>
<td>7i) a demonstration project designed for vocational training or other project approved by the Department of Labor</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

Note: The caretaker must complete the selected programs listed under Section 7 within 30 consecutive calendar months. The caretaker cannot enroll in more than one program.

8) PA recipients or 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 caretaker’s earning capacity) as long as the caretaker is also working at least 17 1/2 hours per week. The caretaker must demonstrate his or her ability to successfully complete the course of study. 

Yes Temporary Assistance recipients and low-income families for attendance at a college or university in courses that are conducted on the campus, not online

9) PA recipients or 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 caretaker’s earning capacity as long as the caretaker is also working at least 17 1/2 hours per week. The caretaker must demonstrate his or her ability to successfully complete the course of study.

Yes Temporary Assistance recipients and low-income families for attendance at a college or university in courses that are conducted on the campus, not online

10) PA recipients or 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 caretaker's earning capacity as long as the caretaker is also working at least 17 1/2 hours per week. The caretaker must demonstrate his or her ability to successfully complete the course of study.

Yes Only Temporary Assistance recipients at a college or university in courses that are conducted on the campus, not online
APPENDIX M #1

Reasonable Distance, Recertification Period, Family Share, Very Low Income, Federal and Local Priorities

I. Reasonable Distance

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

The following defines "reasonable distance":

For the purpose of determining whether child care is accessible to a TANF recipient who is a caretaker relative of a child under the age of 13, Dutchess County defines a reasonable distance as one-way travel time up to one and one half hours from home to a work activity with a stop at a child care provider.

Describe any steps/consultations made to arrive at your definition:

Dutchess County has a public transportation system and uses the "2 mile" rule for employment purposes. If an individual resides outside of the two mile radius to public transportation, alternate arrangements are explored. This is in consistent with Dutchess County's employment plan.

II. Recertification Period

The district's recertification period for low income child care cases is every:

twelve months

III. Family Share

"Family Share" is the weekly amount paid towards the costs of the child care services by the child's parent or caretaker. Your district must select a family share percentage from 10% to 35% to use in calculating the amount of 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 district 30%.

Note: The family share percentage selected here must match the percentage entered in the Program Matrix in the Welfare Management System (WMS).

IV. Very Low Income

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

"Very Low Income" is defined as 100% of the State Income Standard.

V. Federal and Local Priorities

1. The district must rank the federally mandated priorities. Cases that are ranked 1 have the highest priority for receiving child care assistance. These rankings apply to case closings and case openings.

Very low income as defined in Section IV:

Rank 1

Families with incomes up to 200% of the State Income Standard that have a child with special needs and a need for child care:

Rank 2

Families with incomes up to 200% of the State Income Standard that are experiencing homelessness:

Rank 3
2. Does the district have local priorities?

No

If yes, list below and rank beginning with Rank 4.

APPENDIX M #2

Case Openings, Case Closings, and Waiting List

I. Case Openings When Funds Are Limited

If a social services district does not have sufficient funds to provide child care services to all families who are applying, the district may decide to open certain categories of families as funds become available. The district must open federal priorities first. If the district identified local priorities, they must be opened next.

After the federal and local priorities, identify the basis upon which the district will open cases if funds become available. Check only ONE of the options listed below and describe the process for opening.

☐ Open based on FIRST COME, FIRST SERVED.

☐ Open based on INCOME.

If opening based on income, check one of the boxes below:

☐ The district will open cases starting from the lowest income to the highest income.

☐ The district will open cases based on income bands, starting from the lowest income band to the highest income band.

If the district will open cases based on income bands, list the income bands, starting from the band that will be opened first:

☐ Open based on CATEGORY OF FAMILY.

If opening based on category of family, list below the remaining category 2 and 3 families included in 18 NYCRR §415.2(a)(2) and 18 NYCRR §415.2(a)(3) that are not federal or local priorities in the order they will be opened first.

☐ Open based on INCOME AND CATEGORY OF FAMILY.

If opening based on income and category of family, list below the incomes (from lowest to highest income) or income bands (from lowest income band to highest income band), and the remaining category 2 and 3 families included in 18 NYCRR §415.2(a)(2) and 18 NYCRR §415.2(a)(3) that are not federal or local priorities in the order they will be opened first.

☐ Open based on OTHER CRITERIA.

If opening based on other criteria, describe the criteria the district will use to select cases to be opened:

II. Case Closings When Sufficient Funds Are Not Available

If a social services district does not have sufficient funds to continue to provide child care assistance to all families in its current caseload, the district may decide to discontinue child care assistance to certain categories of families. The district must close federal priorities last. If the district identified local priorities, they must be closed next to last. After the federal and local priorities, describe the basis upon which the district will close cases if sufficient funds are not available.

If no priorities are established beyond the federally mandated priorities and all funds are committed, case closings for families that are not eligible under a child care guarantee and are not under a federally mandated priority must be based on the length of time they have received services (must choose #1 below).

Check only one of the options for closing listed below and describe the process for closing.

☐ Close based on AMOUNT OF TIME receiving child care services.

If closing based on amount of time, check one of the boxes below:
The district will close cases starting from the shortest time receiving child care services to the longest time.

Close based on INCOME.

If closing based on income, check one of the boxes below:

- The district will close cases starting from the highest income to the lowest income.
- The district will close cases based on income bands, starting from the highest income band to the lowest income band.

If the district will close cases based on income bands, list the income bands starting from the band that will be closed first:

Close based on CATEGORY OF FAMILY.

If closing based on category of family, list the category 2 and 3 families included in 18 NYCRR §415.2(a) that are not federal or local priorities in the order they will be closed.

Close based on INCOME AND CATEGORY OF FAMILY.

If closing based on income and category of family, list below the incomes (from the highest to lowest income) or income bands (from the highest income band to the lowest income band), and the category 2 and 3 families included in 18 NYCRR §415.2(a) that are not federal or local priorities in the order they will be closed.

Close based on OTHER CRITERIA.

If closing based on other criteria, describe the criteria the district will use to select cases to be closed:

III. Waiting List

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

No

APPENDIX M #3

Fraud and Abuse Control Activities and Inspections

I. Fraud and Abuse Control Activities

1. 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 payments in addition to procedures for referring such applications to the district’s front-end detection system.

Below is the approved Front End Detection System Plan for Operations for NYSCCCBG Child Care Cases and Investigative Unit Operations Plan for Dutchess County: DUTCHES COUNTY FRONT END DETECTION SYSTEM PLAN FOR OPERATIONS FOR NYSCCCBG CHILD CARE CASES Prepared by: Chris Corman, Supervisor of Special Investigations, (845) 485-3044 FEDS Contact Person: Chris Corman, Supervisor of Special Investigations, (845) 486-3044 60 Market Street, Poughkeepsie, New York 12601 1. The following criteria will prompt a Child Care FEDS Referral: • Self-employed but without adequate business records to support financial assertions • Childcare provider lives in the same household as child • Working off the books • Applicant unsure of own address • Applicant has no documentation to verify his/her identity or the identification is suspect • Documents or information provided are inconsistent with application, such as different name used for signature • Prior history of denial, case closing, or overpayments resulting from an investigation • No absent parent information or information is inconsistent with application • P.O. Box used as a mailing address without reasonable explanation 2. Childcare Unit Process and Procedure: The FEDS referral will be reviewed for each Childcare eligibility interview. When one or more of the circumstances listed above occurs, the referral form and the appointment notice are completed by the Childcare worker. The referral is given to the Childcare supervisor with the case record. The supervisor reviews the referral and, if appropriate, sends the FEDS referral to the Special Investigations Unit (SIU) within 24 hours of the date of application. 3. Special Investigations Unit Process and Procedure: The FEDS referral will be logged in and assigned immediately. The investigation will begin within forty-eight (48) hours. The investigation will include collateral contacts and home visits when necessary, computer checks and further interviews with the applicant. A written report will be provided to the Childcare worker within five (5) days of the completion of the investigation.
an investigation cannot be completed within five (5) days, an oral report will be given to the Childcare worker within forty-eight (48) hours and a written report as soon as the investigation can be completed. All Investigations will be completed in a manner that is consistent with the processing of applications within thirty (30) days. a) Investigative unit processing, includes logging, tracking and brief description of investigative unit processes (i.e., home visit, collateral contact, age, etc.). Also includes the targeted timeframes for reporting investigative results back to eligibility worker for final determination. 4. Procedure for Reporting Final Disposition: The lower section of the Investigation Unit's report has a section for the case disposition. The childcare worker will complete this section when processing the case. The original of the form will be sent to SIU for report purposes. The copy will be filed in the case record. 5. Methodology for completing the monthly FEDS report. The SIU Supervisor has a program in place on his computer to summarize the monthly FEDS activity. The SIU Supervisor will prepare the monthly report of FEDS complaints and investigations and forward the report to OTDA via e-mail by the 10th of the following month. The FEDS program has been operational for Family Assistance, Safety Net and Medicaid since 1/93. SIU currently has four (4) Investigators involved with both FEDS and fraud referrals. Dated: 2/9/10

2. 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.

For all Low income and Transitional Child Care cases, a recertification application is completed yearly (copy attached). An Employment Questionnaire (copy attached) is also completed yearly. This results in contact every six months. Verification of income is required at each contact. A new enrollment form is only required at recertification. For Child Care for TA individuals in training, participating in WEP, attending approved drug/alcohol treatment, or employed, a new enrollment form is required yearly. All informal providers must submit forms to the Child Care supervisor who reviews them and forwards them to the Child Care Council for approval. Payment is made only if provider is approved and verification of attendance/participation is received. Payment is made for actual hours of participation plus reasonable travel time.

3. 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.

Dutchess currently has approximately 72 providers who are not day care centers in the CACFP Program. The Council forwards the attendance forms from each inspection to the Department where annually 20% of the providers are selected for a point in time review. The Supervisor of the Day Care Unit contacts the Child Care Council member who is in charge of the site visits on a monthly basis and requests a list of 3-4 providers that had site visits done that month along with the names of the children present at the time of the visit. He will then compare the information to the attendance forms for that provider to verify that DSS was billed correctly. Any discrepancies will be referred to the Special Investigations Unit for further action.

II. Inspections of Child Care Provider Records and Premises

The district may choose to make announced or unannounced inspections of the records and premises of any provider/program that provides child care for subsidized children for the purpose of determining whether the child care provider is in compliance with applicable laws and regulations and any additional requirements imposed on such a provider by the social services district per 16 NYCRR §515.4(h)(3).

The district has the right to make inspections prior to subsidized children receiving care of any child care provider, including care in a home, to determine whether the child care provider is in compliance with applicable laws and regulations and any additional requirements imposed on such a provider by the district.

The district must report violations of regulations as follows:

- Violations by a licensed or registered child care provider must be reported to the applicable Office of Children and Families (OCFS) Regional Office.
- Violations by an enrolled or enrolling legally-exempt child care provider must be reported to the applicable Enrollment Agency.

1. Does the district choose to make inspections of such child care providers/programs?
   No

If Yes: Provide the details of your inspections plan below.

- The following types of subsidized child care providers/programs are subject to this requirement:
  - Legally-Exempt Child Care
  - In-Home
  - Family Child Care

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Ι. Districts have some flexibility to administer their child care subsidy programs to meet local needs. Districts must complete Question 1 below. Note that all districts must complete the differential payment rate table in Appendix T.

The district selects (check one):

☐ none of the options below

☒ one or more of the options below

II. Districts must check the options that will be included in the district's county plan and complete the appropriate appendix for any option checked below.

1. ☐ The district has chosen to establish funding set-asides for NYSCBG (complete Appendix O).
2. ☐ The district has chosen to use 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 licensed or registered child care providers that have been accredited by a nationally recognized child care organization (complete Appendix T).
8. ☐ The district has chosen to pay a differential rate above the required 5%, up to 15% higher than the applicable market rates for child care services during non-traditional hours (complete Appendix T).
9. ☐ The district has chosen to pay a differential rate for child care providers caring for children experiencing homelessness above the required differential amount (complete Appendix T).
10. ☐ 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).
11. ☒ The district has chosen to pay for child care services while a caretaker who works the second or third shift sleeps (complete Appendix T).
12. ☐ The district has chosen to make payments to child care providers who provide child care services exceeding 24 consecutive hours (complete Appendix U).
13. ☐ The district has chosen to include 18-, 19- or 20-year-olds in the Child Care Services Unit (complete Appendix U).
14. ☐ The district requests a waiver from one or more regulatory provisions. Waivers are limited to those regulatory standards that are not specifically included in law (complete Appendix U).
15. ☐ The district has chosen to pay for breaks in activity for low income families (non-public assistance families) (complete Appendix U).
16. ☐ The district has chosen to use local equivalent(s) of OCFS required form(s). Prior to using a local equivalent form the district must obtain OCFS, Division of Child Care Services (DCCS) written approval.

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.

If the district elects to use the OCFS-6025, Application for Child Care Assistance, and makes no changes other than adding the district name...
APPENDIX T

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

I. Transportation

1. Will your district provide transportation?

Note that if the district is paying for transportation, the Program Matrix in WMS should reflect this choice.

☐ No

☐ Yes

If "Yes" above, please describe any circumstances and limitations your district will use to reimburse for transportation. Include what type of transportation will be reimbursed (public vs. private) and how much your district will pay (per mile or trip).

II. Differential Payment Rates

1. Districts must complete the Differential Payment Rate Percent (%) column in the table below for each of the four (4) differential payment rate categories. For the two (2) categories that require a state minimum five percent (5%) differential payment rate, the district must enter "5%" or, if it chooses, a higher rate up to 15%.

The other two (2) differential payment rate categories in the table below are optional. If the district chooses not to set differential payment rates, the district must enter zero. If the district chooses to set a differential payment rate, enter the appropriate percentage up to 15 percent (15%). Note that if the district selects a differential payment rate for nationally accredited programs, then that rate must be in the range of five percent (5%) to 15 percent (15%).

<table>
<thead>
<tr>
<th>Differential Payment Rate Category</th>
<th>Differential Payment Rate Percent (%)</th>
<th>Instructions for Differential Payment Rate Percent (%) Column</th>
</tr>
</thead>
<tbody>
<tr>
<td>Homelessness: Licensed and Registered Providers State required minimum of 8%</td>
<td>5%</td>
<td>Enter a percentage (%): 5% to 15%. (Must enter at least 5%)</td>
</tr>
<tr>
<td>Homelessness: Legally-Exempt Providers</td>
<td>0%</td>
<td>Enter 0% or a percentage (%) up to 15%.</td>
</tr>
<tr>
<td>Non-traditional Hours: All Providers State required minimum of 6%</td>
<td>5%</td>
<td>Enter a percentage (%): 5% to 15%. (Must enter at least 5%)</td>
</tr>
<tr>
<td>Nationally Accredited Programs: Licensed and Registered Providers</td>
<td>0%</td>
<td>Enter 0% or a percentage (%) from 5% to 15%.</td>
</tr>
</tbody>
</table>

2. Payments may not exceed 25% 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 25% maximum is insufficient to provide access within the district to accredited programs or care provided during non-traditional hours and/or care provided to children experiencing homelessness.

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

1. 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 completed 10 or more hours of training annually and the training has been verified by the legally-exempt caregiver enrollment agency.

☐ No.

☐ Yes.

If "Yes" above, indicate percent, not to exceed 75% of the child care market rate established for registered family day care: %

IV. Sleep

1. The following describes the standards the district will use to evaluate whether to pay for child care services while a caretaker that works a
second or third shift sleeps, as well as any limitations pertaining to payment:
The district will pay for child care while a parent or caretaker relative works a second or third shift when the parent or caretaker relative requests it and the Day Care Unit Director and the Deputy Commissioner determine that it is necessary to allow him/her to get a minimum of 6 hours sleep per day.

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

APPENDIX U

Child Care Exceeding 24 Hours, Child Care Services Unit, Waivers, and Breaks in Activities

I. Child Care Exceeding 24 Hours

1) 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 district 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

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

II. Child Care Services Unit (CCSU)

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

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

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

OR

b. 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

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

III. Waivers

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

DC DOCS requesting waiver approval for the following regulatory requirements under Part 404 and child care services regulation under Part 415 of Title 18 of the official Compilation of Codes, Rules and Regulations of the State of New York so that Dutchess County can encourage participation in the Early Head Start Child Care Partnership BSF program by allowing flexibility in areas that will promote continuity of service for children. Flexibility in eligibility periods: For BSF participants only, waive 18 NYCRR sec. 404.1(d) which requires that re-determination be made not less frequently than every 12 months. The waiver will allow districts to match child care eligibility periods to the Early Head Start Child Care Partnership program period regardless of disruption in the parent's eligibility. This waiver applies only to the children participating in an Early Head Start-Partnership Babies Step Forward (BSF) program and not to other children who may be receiving child care services in the same household.
If there are other children receiving child care subsidies in the same household, changes impacting eligibility MUST be reported to DCDFS. Flexibility in reporting changes in family circumstances: For BSF participants only, waive 18 NYCRR sec. 415.3(b) which requires applicants and recipients to report immediately any change in financial circumstances, living arrangements, employment, household composition, or other circumstances that affect the family’s need or eligibility for child care services. This waiver would relax the income documentation/verification requirement and revise the re-determination process to relax/eliminate the need for parents to report even small changes in their circumstances that lead to a loss of eligibility for child care. This waiver would pertain if the parent only* has a child or children participating in an Early Head Start Partnership BSF program. This waiver would NOT apply to households that move out of Dutchess County. The household MUST inform DC DFS when it moves out of Dutchess County. *Households with additional children in the household receiving subsidies who are not participating in the Early Head Start BSF program would continue to be required to report all changes impacting eligibility. Potential adverse impact: Some eligible households may be denied child care subsidies but only if all funding for the Low income Subsidy program is exhausted and no other funding is available.

IV. Breaks in Activities

1) 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.

If your district will pay for breaks in activities, indicate below for how long of a break that the district will pay for (check one):

- Two weeks
- Four weeks

2) 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.

Section 1: Designation of Lead Agency (check one):

- Probation
- LDSS

Section 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.

<table>
<thead>
<tr>
<th>Service Category</th>
<th>Geographic Area</th>
<th>Service Gap</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Residential Respite – Required</td>
<td>Hudson River Housing Inc.: River Haven provides emergency housing and support services for runaway and homeless youth and young people who can otherwise benefit from short-term/respite housing due to family conflict/emergency, risk of court placement, or other issues. The River Haven Shelter is certified by NYS to house youth ages 10 through 17. Staff are available 24/7 to handle requests for housing, and provide related services including:</td>
<td>No</td>
</tr>
</tbody>
</table>
referrals, information, counseling and crisis intervention for adolescents and their families. River Haven serves all of Dutchess County.

b. Crisis Intervention 24 hours/day – Required
Office of Probation: Mon., Wed., 9:00 a.m. - 6:00 p.m., Thurs. and Tues. 8:00 a.m. - 6:30 p.m., Friday 8:00 a.m. - 5:00 p.m. Other days/hours: Dutchess County Department of Mental Hygiene HELPLINE for mental health emergencies and River Haven Shelter for respite and housing emergencies. All are available to all of Dutchess County 24/7. No

c. Diversion Services/other alternatives to detention – Required
Dutchess County Office of Probation, Diversion Services, Alternatives to Detention including: Pre-trial Services, Electronic Monitoring, Curfew Monitoring, and JRISC are available on a pre-trial basis as an alternative to detention. These services are available county wide. Dutchess County No

d. Alternative Dispute Resolution Services – Optional
No longer available on site. Families can still be referred for this service off site and they will be charged a fee for service. Yes

e. Other: Functional Family Therapy (FFT)
Our two co-located Collaborative Solutions Team members, a psychologist from Astor Community Based Services and an M.S.W. from the Department of Mental Hygiene provide FFT in addition to consultation and referral on high and medium risk cases. A probation officer is also a trained FFT therapist and provide FFT to PINS Diversion families on a part-time basis. At any given time, 18 PINS Diversion families receive FFT on site.

f. Other: Functional Family Therapy (FFT)
Dutchess Co. Probation offers this service on site. There are two Astor Therapist and a Department of Community and Behavioral Health worker who are co-collated at probation providing FFT therapy, as well as one probation officer who provide FFT. No

Section 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.

<table>
<thead>
<tr>
<th>PINS Diversion Services Protocol</th>
<th>Responsible Agency(ies)</th>
<th>Brief Description of How Provided</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Provides an immediate response to youth and families in crisis (includes 24 hours a day response capability)</td>
<td>☑️ Probation ☑️ LDSS ☑️ Both ☑️ Other (name) River Haven</td>
<td>Families can contact the Dutchess County Office of Probation and Community Corrections Monday, Wednesday and Fridays between the hours of 9:00 a.m. and 5:00 p.m. and Tuesdays and Thursdays between the hours of 8:30 a.m. and 6:30 p.m. for an immediate response to families and youth in need of services. On days and times outside of those hours, families can contact the River Haven Shelter or, for psychiatric emergencies, the Dutchess County Department of Mental Hygiene Helpline. The River Haven Shelter can provide respite services and the Emergency Department located at St. Francis Hospital can provide emergency psychiatric services. The local police agencies can be contacted in situations where violence is present.</td>
</tr>
<tr>
<td>b. Determines the need for residential respite services and need for alternatives to detention</td>
<td>☑️ Probation ☑️ LDSS ☑️ Both ☑️ Other (name)</td>
<td>If a family is in crisis, the probation officer engages any combination of a member of the Collaborative Solutions Team, the Sr. Probation Officer and/or supervisor of the Family Court Diversion Unit to meet with the family immediately at the office, home or school. They assess if the youth or family member requires an emergency psychiatric evaluation or respite housing either at the River Haven shelter or with an appropriate friend or family member.</td>
</tr>
</tbody>
</table>
We currently use the DRAIS for any youth referred as the result of alleged Juvenile Delinquent behavior(s) that are forwarded to Family Court. We have an array of alternative to detention options which may be recommended for any youth who is being considered for detention.

<table>
<thead>
<tr>
<th>c. Serves as intake agency — accepts referral for PINS diversion services, conducts initial conferencing, and makes PIN eligibility determinations</th>
</tr>
</thead>
</table>
| ☐ Probation  
| LDSS  
| ☐ Both  
| ☐ Other (name)  |

The Sr. Probation Officer or the intake/officer who will be conducting the initial interview schedules the initial interview schedules the initial conference. In cases of emergencies, the Sr. Probation Officer or Unit Administrator will make arrangements for the family to be seen immediately by the appropriate staff. This may include a member of the Collaborative Solutions Team when indicated.

All youth under the age of 18 who fit the legal criteria of a PINS will be considered for diversion services. The Sr. Probation Officer of the Dutchess County Office of Probation and Community Corrections Family Court Intake/Diversion Unit will review all complaints to determine if they meet eligibility requirements. If questionable, the Unit Administrator will review the complaint for a final determination.

Every potential respondent shall qualify for adjustment services. Exceptions to this would include the respondent's refusal to cooperate with adjustment services or a run away. In these cases, every effort will be made to locate and engage the potential respondent so as to avoid a petition to court. Family Court is used as a last resort when diversion efforts are unsuccessful.

<table>
<thead>
<tr>
<th>d. Conducts assessment of needs, strengths, and risk for continuing with PIN behavior</th>
</tr>
</thead>
</table>
| ☐ Probation  
| LDSS  
| ☐ Both  
| ☐ Other (name)  |

At intake, a YASI pre-screen is completed. As research is clear that low-risk youth are better served in a non-juvenile justice setting, low risk youth eligible may be referred to the Dutchess County Youth Services Unit for services. A full YASI assessment is completed on all medium and high risk youth who have agreed to diversion services. Upon signed consent from parent(s) and youth, a MAYSi screening is also conducted for the purpose of determining any mental health issues that would indicate the need for further evaluation on an emergency basis or for linkages to a mental health provider.

<table>
<thead>
<tr>
<th>e. Works with youth and family to develop case plan</th>
</tr>
</thead>
</table>
| ☐ Probation  
| LDSS  
| ☐ Both  
| ☐ Other (name)  |

For moderate and high risk youth the assigned probation officer will develop a case plan based on the needs and strengths identified by the YASI. The family will take an active part in the case planning process and will sign off on the plan. The case plan must be specific and measurable and correlate to the assessment. YASI updates will be conducted at 90 day intervals and at closing to measure progress. Should risk levels increase or protective factors decrease, a plan to address these factors must be noted in the case plan.

<table>
<thead>
<tr>
<th>f. Determines service providers and makes referrals</th>
</tr>
</thead>
</table>
| ☐ Probation  
| LDSS  
| ☐ Both  
| ☐ Other (name)  |

All medium and high risk cases that are accepted for PINS Diversion services are presented to the PINS Review Committee, which is comprised of the Collaborative Solutions Team, Probation supervisor/designee, Astor Clinical supervisor and JRISC therapist, to match needs with services including, but not limited to, J-RISC, FFT, Astor Services for Families and Children, Lexington Center for Recovery and the Collaborative Solutions Team. The PINS Review Committee meets weekly to review all cases.

<table>
<thead>
<tr>
<th>g. Makes case closing</th>
</tr>
</thead>
</table>

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Cases where the goals of the case plan have been met shall be considered for successful case closure. In these instances, the probation officer submits the YASI reassessment with a summary of the youth’s progress to the Sr. Probation Officer or Unit Administrator. In instances where the case has not been successfully diverted and the probation officer in consultation with the Sr. Probation Officer or Unit Administrator determines that diversion efforts have been exhausted and that there is no substantial likelihood that the youth and family would benefit from continued services, a petition may be submitted to Family Court. Unless there are emergency circumstances, generally there is a meeting with the supervisor, probation officer and family and/or consultation with Collaborative Solutions Team members prior to final determination for a petition to be filed.

Section 4: PINS Diversion Services Plan

Development of PINS Diversion Services Plan and MOU

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

The ICP Committee continues to meet as does the Court Involved Youth Committee and the Juvenile Justice Committee.

List stakeholder and service agency involvement in planning.

Dutchess County Department of Community & Family Services: Attends the ICP, Court Involved Youth and Juvenile Justice Committees.

Dutchess County Office of Probation: Attends the ICP, Court Involved Youth and Juvenile Justice Committees. Hudson River Housing, River Haven: Attends the ICP, Court Involved Youth and Juvenile Justice Committees.

Dutchess County Division of Youth Services: Attends ICP, Court Involved Youth Committee and Juvenile Justice Committee

Astor Community Based Services: Attend the Court Involved Youth Committee and Juvenile Justice Committee

Dutchess County Attorney’s Office: Attends the Court Involved Youth and Juvenile Justice Committees

City of Poughkeepsie Police Department Attends the Juvenile Justice Committee

Community Representative Attends the Juvenile Justice Committee Attorney: Kent Pritchard: Attends the Court Involved Youth Committee

Family Court Personnel: Attend the Court Involved Youth Committee

Non-Secure Detention Provider: Attends the Court Involved Youth Committee

Mental Health America: Attends the ICP meetings.

B. Please define the PINS Diversion population in your county for 2016. Specifically, please provide the following as whole numbers (not %):

1. Number of PINS Diversion referrals filed by parents: 122
2. Number of PINS Diversion referrals by schools: 129
3. Number of PINS Diversion referrals other sources: 0
4. Number of PINS Diversion cases closed as Successfully Diverted: 169
5. Number of PINS Diversion cases closed as Unsuccessful and Referred to Petition: 80

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

We continue to use the YASI data to examine the numbers of high risk youth entering our system and to determine dynamic risk reduction and dynamic protective factor increase at the time of closing. We also continue to use this data to assess the efficacy of programs and to match youth with the greatest risk and needs to our more highly structured programs.

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.

<table>
<thead>
<tr>
<th>Identify Outcome (For PINS Diversion Population)</th>
<th>Specify Indicator (Enter as a whole number to indicate a numeric or % change)</th>
<th>Strategy/Plan to achieve (Who, what, and when)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item 1 <strong>OUTCOME 1:</strong> Families, including nuclear, extended and adoptive families are strengthened and supported so they are able to raise, nurture, and ensure their children's connections to their heritage and in planning for their children's futures and Dutchess County will provide PINS Diversion youth and their families with opportunities to help them meet their needs for physical, social, moral and emotional growth such that 75% of PINS complaints received do not result in a petition to Family Court</td>
<td>Item 1</td>
<td>Item 1. The Dutchess County Office of Probation will operate a Diversion Unit that provides intake, assessment services and case planning services for families that target criminogenic areas of need and risk and utilize a strength-based approach to increase protective factors and reduce dynamic risk. 2. The Dutchess County Office of Probation will use the pre-screen YASI to identify low risk youth who can be diverted from PINS Intake 3. When a recommendation for out of home placement is being considered, the case will be reviewed by the Dispositional Review Team. 4. Dutchess County Office of Probation will continue to refer appropriate families to River Haven’s Respite Program. 5. DC Probation in its leadership role on the Juvenile Justice Committee will oversee the accomplishments of the DSS/Probation MOU and track the number of PINS youth placed in DSS custody. 6. DC Probation will participate in the Juvenile Justice Committee and the Court Involved Youth Committee to look at processes, procedures.</td>
</tr>
<tr>
<td>Item 2 <strong>OUTCOME 2:</strong> Dutchess County will assist youth in assuming personal responsibility for their behavior and refraining from violence so that 75% of youth served are diverted.</td>
<td>Item 2</td>
<td>Item 2. For school-filed PINS complaints DC Probation will meet with the family, school officials, probation officer to give an opportunity for the school and family to present issues of concern and to come to an agreement on strategies to address the issues. 2. DC Probation Staff will implement the empathy workshops or cognitive/behavioral curriculums with a focus on life skills, substance abuse education, moral reasoning or other evidence based interventions. 3. Collaborative Solutions Team members and one Probation Officer will provide Functional Family Therapy at the Office of Probation on a part-time basis. 4. The Dutchess County Office of Probation will provide curfew monitoring services when funding is available.</td>
</tr>
</tbody>
</table>

**2017 Child Welfare Planning Addendum**

**Introduction**

In 2016, the federal Administration for Children and Families (ACF) conducted a Child and Family Services Review (CFSR) in New York State. This CFSR showed several areas in need of improvement. As a result, OCFS is required to submit a Program Improvement Plan (PIP) to ACF and to improve performance on six safety and permanency outcome indicators.

The process of improving outcomes is developmental, and begins with a clear understanding of underlying factors that impact current performance. This 2017 Child Welfare Planning Addendum component of the APU provides counties with a vehicle to document the county's performance on six CFSR safety and permanency indicators and to document the Planning Team that will convene throughout 2017 to analyze the CFSR indicators, engage in a self-assessment process, develop strategies, and monitoring. Thereby, serving to systematically develop the next five year County Child and Family Services Plan.

Use this addendum to present your county's performance on six CFSR indicators and your preliminary assumptions about factors that contribute
to your performance. Additionally, provide information about the County Planning Team.

Using the template, below, please respond to the following categories:

1. Current Performance

An initial step in planning and quality improvement is to identify your performance on a set of standard indicators. Using the format below, please report your performance on the six federal CFSR safety and permanency indicators. Also document any variation you notice among age groups, race/ethnicity, and/or time frames.

<table>
<thead>
<tr>
<th>CFSR Safety and Permanency Outcome Indicators</th>
<th>County Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a. What is your county’s performance on the CFSR indicators? This information will assist with identifying areas most in need of improvement, and guide the focus of the 2017 diagnostic and needs assessment process. Using the CFSR data that is available through this link, please complete the table below with your county’s performance on each indicator.</td>
<td>1b. Does your county performance show any notable difference in age, race/ethnicity or gender for the individual CFSR indicators within a specific wave and/or over time? If yes, note below. If there is no notable difference, please indicate no notable difference.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>* Wave 3 Data is Preliminary</th>
<th>County Wave 1</th>
<th>County Wave 2</th>
<th>County Wave 3</th>
<th>NYS Wave 3</th>
<th>National Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>S1: Maltreatment in Foster Care</td>
<td>18.7%</td>
<td>24.3%</td>
<td>17.9%</td>
<td>16.3%</td>
<td>8.5%</td>
</tr>
<tr>
<td>S2: Recurrence of Abuse/Maltreatment</td>
<td>16.7%</td>
<td>19.3%</td>
<td>17.9%</td>
<td>18.0%</td>
<td>9.1%</td>
</tr>
<tr>
<td>P1: Permanency within One Yr. - Admissions</td>
<td>27.4%</td>
<td>16.3%</td>
<td>22.5%</td>
<td>34.2%</td>
<td>40.5%</td>
</tr>
<tr>
<td>P2: Permanency for Youth In Care 1-2 years</td>
<td>22.4%</td>
<td>11.9%</td>
<td>24.4%</td>
<td>23.5%</td>
<td>43.6%</td>
</tr>
<tr>
<td>P3: Permanency for Youth In Care 2+ years</td>
<td>19.4%</td>
<td>30.9%</td>
<td>33%</td>
<td>29.2%</td>
<td>30.3%</td>
</tr>
<tr>
<td>P4: Re-entry</td>
<td>3.4%</td>
<td>0%</td>
<td>6.5%</td>
<td>10.7%</td>
<td>8.3%</td>
</tr>
</tbody>
</table>

We have shown improvement in this area in the latest wave. There was significant decrease in maltreatment in foster care with males and among African American children. There were increases among White and Hispanic children. We have shown improvement in this area in the latest wave. There was significant reduction in recurrence among males, African American and Hispanic children. There was an increase among White children.

We have shown improvement in this area in the latest wave. There was significant reduction in recurrence among males, African American and Hispanic children. There was an increase among White children.

We have shown improvement in this area in the latest wave. The increase in Permanency was seen most among both male and female children, children 0-8 yrs old, White and Hispanic children.

We exceed the NYS and National Average in this area. The increase was most prevalent among female children. Less youth between 14-17 yrs old were in care during wave 3. There was a slight increase among white children being discharged to permanency.

In Wave II, no children re-entered foster care within 12 months and in Wave III, two children reentered foster care within 12 months.

2. County’s Assumptions about factors that contribute to current performance

Throughout this planning process, the county will work through a diagnostic process that clarifies and improves an understanding of the underlying factors that contribute to both high and low performance. This process often begins with statements that portray the commonly held ideas about the most likely factors that impact performance. These are assumptions about the key underlying factors.

In this section, please provide information that identifies and describes your preliminary assumptions about your performance on the CFSR indicators.

| Preliminary Assumptions about Factors that Contribute to Performance |
|--------------------------|-------------------------------------------------------------------|
| CFSR Indicators          | 2. What are your assumptions about the underlying or contributing factors to your current performance? |
| S1: Maltreatment in Foster Care | We are presently entering incident dates in Indicated CPS Reports involving children who were/or in foster care. We are doing this on past reports as well as current reports. We suspect when all of the Incident dates have been entered to reflect whether the maltreatment occurred prior to foster care placement or during foster care placement. This percentage will decrease. |
| S2: Recurrence of Abuse/Maltreatment | We have increased our rate of consolidating reports in the past two years. In 2015, we consolidated approximately 17% of the total number of reports that came in that year. In 2016, we consolidated approximately 15% of the total number of reports that came in that year. The Wave II data ends in September 2014. As of September 2015, Dutchess County is at 14.2% Recurrence. |
3. 2017 County Planning Team

As a foundational step, each county must create a County Planning Team to systematically work through a process of diagnosing the county's performance and analyzing root causes, recommending solutions intended to improve outcomes, and developing methods to monitor the implementation of those strategies and its impact.

A team of 6-12 people is recommended and may include internal LDSS representatives from various program areas (i.e.: CPS, foster care, adoption, training, analytics, etc.) and levels of the organization (Director of Services, supervisors, caseworkers, support staff, etc.). Consideration should be given to including community representatives as well. To accomplish this work, you will need a team that can bring a variety of points of view to this diagnostic assessment and recommendation work. Note: an effective diagnostic process involves the review of child-specific information, therefore, when considering Planning Team membership, consider your ability to discuss confidential information. A county may consider using an existing team, such as a Local Implementation Team (LIT), to serve as the Planning Team.

Team members should be asked to make a commitment for at least one year. While some turnover may be unavoidable, consistent membership will be needed to accomplish this work effectively. During the implementation of the five-year county plan stating in 2018, the team will monitor the implementation of the strategies and their impact.

<table>
<thead>
<tr>
<th>Considerations for Involving External Stakeholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Note, that an effective diagnostic process involves the review of child-specific information, therefore, when considering Planning Team membership, consider your ability to discuss confidential information.</td>
</tr>
<tr>
<td>The county may organize this team to also include community partners such as court personnel, law enforcement, contract providers, university partners, and other allies. It should pay particular attention to external stakeholders from program areas included in the plan (domestic violence, youth development, PINS, runaway/homeless youth, detention, child care, etc.).</td>
</tr>
<tr>
<td>If, however, the Local Department of Social Services (LDSS) determines that its membership will be limited to internal LDSS staff, then a formal process to include external stakeholder input must be designed. Examples include: periodically inviting external stakeholders to the meetings or having team representatives formally reach out to various stakeholder groups.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2017 Planning Team</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Team Chairperson:</strong> Identify the team chair or co-chairs by name, title, and organizational affiliation</td>
</tr>
<tr>
<td><strong>Membership:</strong> If an individual is identified, please list name, organizational affiliation and title. If a specific individual is not identified, please list the organizational affiliation and program area of anticipated members.</td>
</tr>
<tr>
<td><strong>Frequency of Meetings: describe frequency and length of meetings</strong> Engaging in a thorough diagnostic and planning process requires a time commitment. Although not prescriptive, OCFS recommends, at a minimum, monthly half day meetings with</td>
</tr>
</tbody>
</table>
supplemental work conducted between meetings.

<table>
<thead>
<tr>
<th>Plan for Involving External Stakeholders:</th>
<th>We will do outreach to external stakeholders in 2017 to get at least one rep on the team.</th>
</tr>
</thead>
<tbody>
<tr>
<td>If external stakeholder are not regular members of the Planning Committee, please describe how they will be involved in the diagnostic/planning process?</td>
<td>We will report updates from monthly meetings to the Commissioner.</td>
</tr>
</tbody>
</table>

Organizational Leadership: What is the process for involving or communicating with the LDSS Commissioner?