

NEW YORK STATE

DEPARTMENT OF SOCIAL SERVICES

40-NORTH PEARL STREET, ALBANY, NEW YORK 12243

BARBARA B. BLUM  
Commissioner



[An Administrative Directive is a written communication to local Social Services Districts providing directions to be followed in the administration of public assistance and care programs.]

**ADMINISTRATIVE DIRECTIVE**

TRANSMITTAL NO.: 80 ADM-85  
[Services]

TO: Commissioners

SUBJECT: Funding for Preventive Services

DATE: October 16, 1980

SUGGESTED DISTRIBUTION: Child Welfare Executives and Supervisory Staff  
Accounting Staff  
Child Placement Agencies  
County Youth Boards  
Other Family and Youth Services Agencies

CONTACT PERSON: Any questions concerning program aspects of this release should be directed to Susan Slotkis, Preventive Services, by calling 1-800-342-3715, extension 49601. Questions concerning the claiming portion of this release should be directed to Bureau of Local Financial Operations, Metropolitan Office, Anthony Funigiello, 212-488-4516, Upstate Office, Irid Gordon at 1-800-342-3715, extension 47567.

I. PURPOSE

The purpose of this Directive is to advise local social services districts of the availability of 50% matching state funds for preventive services for children and families for the period from July 1, 1980 through March 31, 1981. In addition, the Directive will provide information on a series of related programmatic, administrative and fiscal changes affecting preventive services which will be taking effect this year and in 1981.

II. BACKGROUND

The enactment of the Child Welfare Reform Act of 1979 brought about a series of programmatic and fiscal changes which affected the way in which preventive services for children and families is to be provided for and administered. The most immediate change was the increased amount of state funding available on a 50/50 basis for preventive services during the 1979-80 state fiscal year. An additional \$2.2 million in State funds were added to the original appropriation of \$3.75 million to bring the 1979-80 total to \$5.95 million. These funds were

**FILING REFERENCES**

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Social Services Law and Other Legal References	Bulletin/Chapter Reference	Miscellaneous References
75 INF-47 77 ADM-53 79 ADM-74		423 425	SSL Title 4 SSL Title 4A SSL Title 7 SSL Sec. 398.6 (M)		Chapter 53, - Laws of 1977, 1978, 1979; Commissioner Blum's letter dated 6/20/80

DSS-296 (R 78)

available to cover approved preventive expenses incurred through June 30, 1980 (refer to 79-ADM-74). The principal purpose of this Directive is to describe how this program will be administered and funded for the nine month period from July 1, 1980 through March 31, 1981, during which \$4.46 million in State funds will be available for the support of new and ongoing preventive service programs.

This Directive will also describe in a preliminary manner a series of related changes in preventive services for children and families which will be taking effect this year and in 1981. Although these will be more fully explained in subsequent directives, they are summarized here to provide a framework for understanding the transition which is occurring in this service area.

The most significant of these changes is that starting on April 1, 1981, preventive services will be mandated under certain (limited) circumstances. In general, preventive services will be mandated whenever there has been a finding by a social service official that a child will be placed in or returned to foster care, or continued in such care unless such services are provided.

The specific guidelines which local districts will apply in order to determine whether a case qualifies for mandated preventive services will be described fully in a forthcoming directive. These guidelines will require that a structured assessment of the individual family's and child's problems and assets be completed. In the assessment, the parent's willingness and ability to continue caring for their child(ren) will be determined, as well as whether the problems exhibited by the child and/or other family members warrant immediate removal of the child(ren) from the home.

The Child Welfare Reform Act also provides for another category of preventive services recipients in addition to those for whom the local districts are mandated to provide preventive services. After April 1, 1981, preventive services may be provided to children and families who are not at immediate risk of foster care placement and yet do exhibit a need for supportive services.

A major change in the funding of preventive services will also occur on April 1, 1981. The cost of mandated services will be reimbursable by the state at 75%, assuming maintenance of effort and other requirements are met. For non-mandated preventive services the state reimbursement rate will be 50%. Both types of services will be fundable under Title XX, but the particular services for which Title XX will pay, effective October 1, 1980, are limited by the definition of preventive services in the update to the Comprehensive Annual Social Services Program Plan. Preventive Services are provided without regard to income under Title XX and state preventive services funding mechanisms.

The Child Welfare Reform Act placed restrictions upon the availability of 75% state reimbursement for mandated preventive cases. One important restriction is the preventive services maintenance of effort requirement. Under this restriction a district will have to maintain at least the same total level of spending for preventive services which was committed during the 1979 State fiscal year in order to benefit from the enriched 75% reimbursement which becomes available on April 1, 1981. Each district's maintenance of effort amount will consist of two parts. The first part (Part A) will represent an amount calculated on the basis of the district's

1979 Title XX expenditures for preventive services, and districts will be required to commit Title XX funds to cover this part of their total maintenance of effort amount. The second part of the maintenance of effort (Part B) will be equal to the district's State 1979 fiscal year total spending under the 50/50 preventive program, and this part can be covered using either Title XX funds or other State reimbursed preventive funds as provided under Section 409-b(1) of the Social Services Law, as amended by the Child Welfare Reform Act. If a district's combined preventive spending amount in future years is less than its total maintenance of effort (Parts A and B), it will not be entitled to any 75% state reimbursement for those preventive expenses which were not paid for through Title XX.

A list of each district's maintenance of effort amounts and a full explanation of how these amounts were calculated was included in a letter from Commissioner Blum dated June 20, 1980, which described the new mandated preventive services program and its various restrictions.

### III. PROGRAM IMPLICATIONS

Although preventive services may be provided through Title XX funding, a number of social services districts have experienced difficulty in providing these services given the limits of their Title XX allocation. It is expected that the allotments provided under this year's appropriation will enable many districts to expand their preventive services efforts as they take advantage of this 50% state funding.

As noted above, it is required for those districts which plan to make use of their preventive services allotment this year to prepare a district-wide and individual application to expend these funds.

Services funded under this appropriation may be provided directly by the local district, or purchased from an approved agency. In accordance with Department Regulation Part 423, Section 423.1(b), an approved agency refers to either an authorized child caring agency as defined in Section 371.10 of the Social Services Law, or an incorporated non-profit social services agency providing services to families. Whichever method is used, the local district must take responsibility for identifying the appropriate cases, authorizing payment, monitoring service provision, maintaining adequate case records, and determining the need for continuation or termination of services at least once every six months.

### IV. REQUIRED ACTION

#### a) PROGRAM SUBMISSION

Districts which intend to use funds under this appropriation must complete and submit Parts 5, 6 and 7 only of DSS-3224, the District-wide Program for Preventive Services. A separate DSS-3223, Individual Program Plan must be completed for each program, to be included as part of the District-wide Program for this appropriation. Parts 1-4 on DSS-3224 need not be completed since this information is available in the district's Family and Childrens Service Plan. These attachments are due on November 20, 1980 and should be submitted to:

Mr. Eric Brettschneider  
NYS Department of Social Services  
40 North Pearl Street - 11D  
Albany, NY 12243

If, during the program duration, there are significant program changes or changes in a budget category exceeding 10% in any approved plan, revisions must be submitted for Department review and approval.

Preparation of Program Application

In preparing the District-wide Program, local districts should consider the full range of community needs for preventive services. Generally, these will have been identified during the Family and Children's Services Planning Process. As in the past, districts should direct their attention to gaps in current service delivery, and develop strategies to fill these gaps in a planned manner. In describing the District-wide Program, only those programs which will be funded under the 50/50 preventive allotment covering the period from July 1, 1980 through March 31, 1981 should be reflected. As districts work to identify the programs which will be used during this period, and in the future, they are encouraged to assess their outreach efforts in underserved areas within the community. Consideration should be given to contracting with non-traditional social service agencies that have been identified as working effectively with families in these underserved areas.

Regardless of which particular program or set of programs that a district chooses to support, it is critically important that each program has well-defined purposes and objectives, which lend themselves to assessment of their effectiveness. Again, it is necessary that a separate Individual Program Plan be completed for each program covered under the District-wide Program.

b) PROGRESS REPORTS

Districts are required to satisfactorily complete and submit timely Progress Reports (a sample of form DSS-3225 and instructions is attached). Claims will not be paid for expenditures incurred for any period where progress reporting has not been adequately furnished. These reports must be completed for each program receiving funds under this appropriation, plus a district summary on a quarterly basis. We are also requesting a Final Report to show the cumulative activity for the program duration, for each program and a district summary.

<u>PERIOD</u>	<u>DUE</u>
July 1 - September 30	October 31
October 1 - December 31	January 31
January 1 - March 31	April 30
Cumulative Final Report	May 31

Progress Reports are to be submitted to:

Ms. Susan Slotkis  
Preventive Services, Section 11D  
NYS Department of Social Services  
40 North Pearl Street  
Albany, NY 12243

c) PREVENTIVE SERVICES FOR CHILDREN

DEFINITION: Supportive and rehabilitative services provided to children and their families: a) to avert an impairment or disruption of a family which will or could result in the placement of a child in foster care; b) to enable a child who has been placed in foster care to return to his family at an earlier time than would otherwise be possible; or c) to reduce the likelihood that a child who has been discharged from foster care would return to such care.

Mandated Preventive Services - Preventive services for children is a mandated service upon a finding by social services official that a child will be placed or continued in foster care unless such preventive services are provided and it is reasonable to believe that by providing such services the child will be able to remain with or be returned to the family. Districts will determine eligibility for mandated preventive services on the basis of a case by case assessment. In carrying out this assessment districts will identify the full range of the family and child's problems and assets in determining an appropriate service plan. In order for a case to be authorized as mandated it would be necessary to determine that a child will enter foster care within a specified number of days (60) unless preventive services are provided; or that a child would be removed from foster care within a specified number of days (90) as a result of preventive services being provided.

Non-Mandated Preventive Services - In cases in which preventive services for children are not mandated, such services may be provided to promote ability of families and children to effectively overcome those stresses which could otherwise result in family breakdown.

Preventive services for children can be funded under Title XX and, after April 1, 1981, under Section 409-b of the Social Services Law when the requirements of Section 409-e of the Social Services Law and of Section 428 of State Department regulations for individual services plans are met. Services which may be provided include:

- (i) Case management services are required for all preventive services for children cases. Case management services include: assessing the need for, providing and arranging for preventive services for children and coordinating and evaluating the provision of these services. When more than one agency is providing services in the same preventive services for children case, a single agency shall have responsibility for case management services.

Individual, group or family counseling is required for all preventive services for children cases.

- (ii) The following may be provided as an integral but subordinate part of an approved preventive services for children case plan when these services are necessary to achieve the preventive goals of the plan.

- (a) Parent Aide Services including services provided in the home focusing on the parent which are designed to reduce isolation, foster personal growth and self-esteem, and to increase motivation. Techniques used include, role modeling, listening skills, home management assistance. Education may be provided on parenting behavior and in personal coping behavior.

- (b) Day Services to Children which shall mean a program offering a combination of services including at least social services, psychiatric, psychological, educational and/or vocational services and health supervision, and also including as appropriate, recreational and transportation services, for at least three but less than 16 hours a day and at least four days per week, excluding holidays. If it can be demonstrated that one or more of these services are not needed by the population served, that service may be waived. Only Day Services programs permitted to operate pursuant to Social Services Law Section 431 are eligible for funding under Title XX or Social Services Law Section 409-b.
- (c) Legal advocacy including assistance in arranging for legal services to assure receipt of rights and entitlements.
- (d) Parenting Training including group instruction on parent effectiveness, parent skills development, child development, and may include parent-child interaction groups for enhancing communication skills among family members.
- (e) Day Care Services for Children may be provided for up to 12 months to mandated preventive service clients, and up to six months for non-mandated preventive clients without regard to financial criteria. Fees for preventive day care services will be collected in accordance with the day care fee schedule. However, that schedule will be extended to accommodate levels above the day care maximum.
- (f) Homemaker Services may be provided for up to six months to mandated and non-mandated clients, without regard to financial criteria.
- (g) Housekeeper/Chore Services may be provided for up to six months to mandated and non-mandated clients without regard to financial criteria.
- (h) Housing Improvement.
- (i) Family Planning.
- (j) Unmarried Parents.
- (k) Health Related.
- (l) Employment.
- (m) Educational Services.
- (n) Home Management.

(iii) The following services may be funded until April 1, 1981, as preventive services for children. After April 1, 1981, these services may be provided only by programs which have received prior approval by the State Department of Social Services. Districts may have their programs approved when those programs satisfy criteria to be established by the State Department. Criteria will include limits on the percent of program expenses that can be funded for these services. Such percentage limits will vary for each service. Criteria for approval will also identify limits on funded expenditures for individual cases and require assurance that public funds for these services are otherwise unavailable to the program.

- (a) Clinical services provided by a licensed psychologist or psychiatrist.
- (b) Emergency cash or goods. When any such expenses may be covered by Emergency Assistance to Families, an application for benefits shall be made within five days of the provision of this service.
- (c) Temporary shelter for a parent and child(ren). When any such expenses may be covered by Emergency Assistance to Families, an application for benefits shall be made within five days of the provision of this service.
- (d) Transportation services as required in order to receive appropriate services.

NATIONAL GOAL RELATIONSHIP: III

METHOD OF PROVISION: Direct provision, purchase private, purchase public

FUNDING UNDER OTHER PROGRAMS:

After expiration of the appropriate six or twelve month period for provision of day care, homemaker or housekeeper/chores as preventive services for children, these services may be provided under the respective CASSPP definitions if continuing programmatic need and financial eligibility are established.

The following services are also considered preventive services for children but may not be funded under Title XX:

- (a) Remedial education including assessing the need for, arranging for, and providing remedial instruction and tutoring.
- (b) Recreation including assessing the need for, arranging for, and providing recreational and cultural activities.

Until March 31, 1981, these services may be funded with 50/50 funds from the \$5.95 million appropriation. Beginning April 1, 1981, funding under Section 409-b of the Social Services Law will be available for these services.

CATEGORIES OF INDIVIDUALS ELIGIBLE UNDER TITLE XX:

All individuals without regard to income.

NOTE: Preventive Services for Children will not become a mandated service under New York State Law until April 1, 1981, in conjunction with the provisions of the Child Welfare Reform Act of 1979. Also, starting on this date, 75% state reimbursement will be available for mandated cases which are not supported under the district's Title XX ceiling, for expenses in excess of the maintenance of effort level established for the district.

The State Department will issue new regulations and guidelines which will describe administrative practice for determining and reviewing programmatic eligibility for mandated preventive services. Also, forthcoming will be operating standards and charge limitations for preventive services programs including the delineation of the appropriate circumstances for the provision of particular services, limitations on the use of certain services and the appropriate providers of such services.

Although preventive services for children does not become mandated until April 1, 1981, it is to be provided on a without regard to income basis starting on October 1, 1980.

d) CLAIMING INSTRUCTIONS

DSS-2558-A, Monthly Financial Summary, Preventive Services Program, is the claiming form for local district programs under this appropriation.

Each month, districts are required to submit two copies of DSS-2558-A which will reflect the total expenditures incurred for preventive services under this appropriation (directly operated and purchased services). Detailed information on the completion and submission of this form are found on the reverse side of the form.

Claims may be made retroactively for any approved program which has been in operation during the period beginning July 1, 1980.

It is noted that these expenditures are not to be claimed on the local district's Schedule G as they are separately funded and have to be clearly identified in order to properly charge this fund. The district's regular appropriation and revenue accounts will still be utilized for these programs. Where services are provided directly, the administrative costs (salaries, fringe benefits) for staff who are providing these services should not be claimed on the Schedule D for the same reason.

Form DSS-2558-A must be accompanied by a State Aid Voucher (Form AC-1171) for the amount subject to reimbursement. That amount is found on Form DSS-2558-A, Line E, Column 5.

The following journal entries should be made:

1) AC-1171 Submitted:

Debit A-400 - State and Federal Social Services (Accounts Receivable)  
Credit A-3670 - Purchase of Services (State Revenue)

2) Cash Received:

Debit A-200 - Cash

Credit A-400 - State and Federal Social Services (Accounts Receivable)

3) Payment to Agency:

Debit 6070 - Purchase of Services (Appropriation)

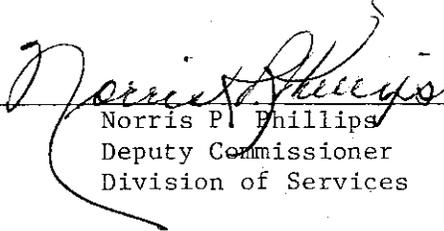
Credit A-200 - Cash

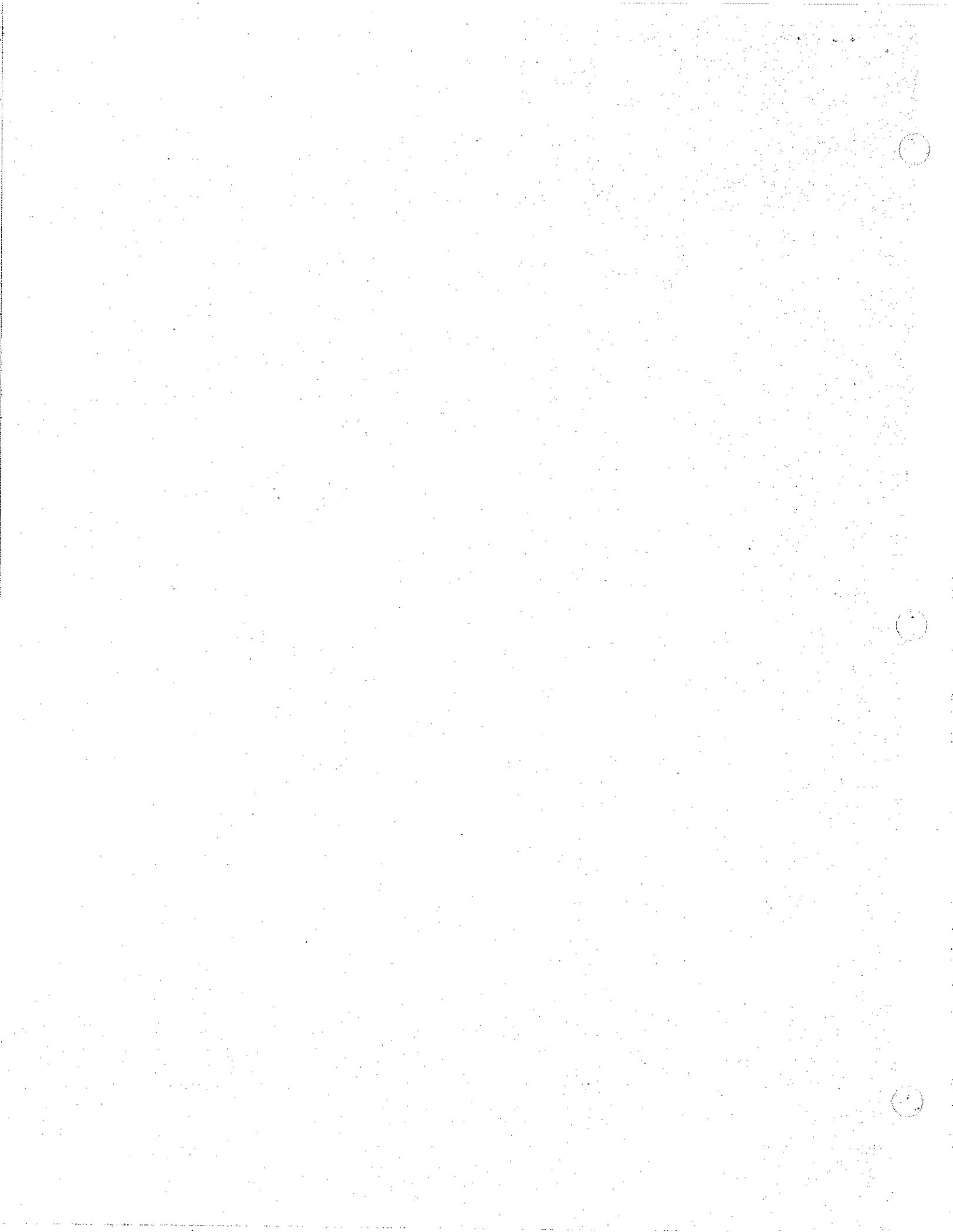
FORMS SHOULD BE ADDRESSED TO: NYS Department of Social Services  
Public Assistance Claims Section  
13th Floor  
40 North Pearl Street  
Albany, New York 12243

V. OTHER INFORMATION

Bulk supply of all forms referred to in this Directive may be ordered by writing to Mr. Ron Platner at

Forms and Publications  
NYS Department of Social Services  
40 North Pearl Street  
Albany, New York 12243

  
Norris P. Phillips  
Deputy Commissioner  
Division of Services



**INDIVIDUAL PROGRAM PLAN  
FOR PREVENTIVE SERVICES**

Complete separately for each program budgeted under this appropriation; attach additional data to describe the program or support state funds request.

DISTRICT	TELEPHONE	<input type="checkbox"/> New
PROGRAM TITLE and address	<input type="checkbox"/> Direct	<input type="checkbox"/> Continuation
PROGRAM DURATION	<input type="checkbox"/> Purchase	<input type="checkbox"/> Amended

INTAKE CRITERIA AND PROCESS (specify target population)

CATCHMENT AREA TO BE SERVED (Specify community board district, borough, municipality) 3. SOURCE(S) OF CLIENT REFERRALS

PROGRAM OBJECTIVE(S)

PLAN FOR CASE MONITORING

6. PLAN FOR SERVICE EVALUATION

STAFF - Include contributed staff services (ex: students, volunteers) as well as paid staff. Indicate expected caseload for line personnel.

NO	JOB TITLE	JOB QUALIFICATIONS	SALARY	AVG. CASELOAD

SERVICES TO BE PROVIDED

*In accordance with the definitions outlined in the Quarterly Progress Report.*

SERVICE	NO. OF CASES	AVERAGE SERVICE DURATION
CASEWORK (Individual/Family)		
a. Information/Referral		
b. Advocacy/Case Management		
c. Counseling/Therapy		
GROUP CONSELING/THERAPY		
EDUCATION		
HOMEMAKER		
PARENT AIDE		
RECREATION		
DAY CARE/FAMILY DAY CARE		
PSYCHIATRIC EVALUATION		
PSYCHOLOGICAL EVALUATION		
EMPLOYMENT		
FINANCIAL ASSISTANCE		
OTHER (Specify)		

9. CASELOAD - TOTAL NUMBERS TO BE SERVED

FAMILIES	CHILDREN	CHILDREN		TOTAL PROGRAM COST
		AT RISK OF PLACEMENT	WHO ARE IN PLACEMENT	
				\$

10. PROJECTED PROGRAM EXPENDITURES

CATEGORY	TOTAL PROGRAM COST	% OF TOTAL
1. PERSONNEL		
2. FRINGE BENEFITS		
3. CONSULTANTS*		
4. TRAVEL/PER DIEM		
5. EQUIPMENT		
6. SUPPLIES		
7. CONTRACTUAL		
8. OTHER		
9. INDIRECT		
<b>TOTAL</b>		

\*Describe Consultant Services

11. PROJECTED PROGRAM INCOME

SOURCE	AMOUNT	% OF TOTAL
STATE SHARE		
LOCAL MATCH TAX LEVY		
LOCAL MATCH PRIVATE		
<b>TOTAL</b>		

12. BREAKDOWN OF PRIVATE FUNDS

TYPE	AMOUNT	SOURCE
CASH CONTRIBUTIONS		
IN KIND DONATIONS**		
OTHER		

\*\*Describe what types of expenditures in Kind Donations will be used for:

SEE FEDERAL GUIDELINES TO BE FOUND IN CFR, TITLE 45, SUBPART "G".

**DISTRICT - WIDE PROGRAM  
FOR PREVENTIVE SERVICES**

DISTRICT	
CONTACT PERSON	PHONE

1. Describe district efforts and outcome to develop programs in high risk areas through community based programs.

2. Estimated number of families requiring service to	prevent foster care placement of children	
	shorten placement or transfer to adoptive placement	

3. Preventive - Oriented Services to be provided through Title XX directly or through Purchase of Services (Ex: Preventive, Adoptive, Day Care, Home Management, Homemaker, Child Protective, Unmarried Parent Services)	NUMBER OF CASES	PROJECTED COST

**TOTAL** .....

4. Preventive - Oriented Services to be provided through other special funding directly or through Purchase of Services (Ex: research & demonstration, teenage pregnancy grant)	NUMBER OF CASES	PROJECTED COST

**TOTAL** .....

5. Preventive Services Programs under this appropriation (specify direct or Purchase of Services) PROGRAM TITLE	AMOUNT STATE SHARE REQUESTED	NUMBER	
		FAMILIES	CHILDREN

**TOTAL** .....

6. How will the district identify program cases, establish and monitor service plans, and evaluate the program?

**NOTE:** Program Summary is on Reverse  
Add supplemental pages if necessary.

7. BUDGET SUMMARY: Total of all Programs under this appropriation

CATEGORY	TOTAL AMOUNT	% OF TOTAL	STATE SHARES REQUEST	LOCAL SHARE
a. Personnel				
b. Fringe Benefits				
c. Consultants				
d. Travel/Per Diem				
e. Equipment				
f. Supplies				
g. Contractual				
h. Other				
i. Indirect				
<b>TOTAL</b>		<b>100%</b>		

**PREVENTIVE SERVICES PROGRESS REPORT**

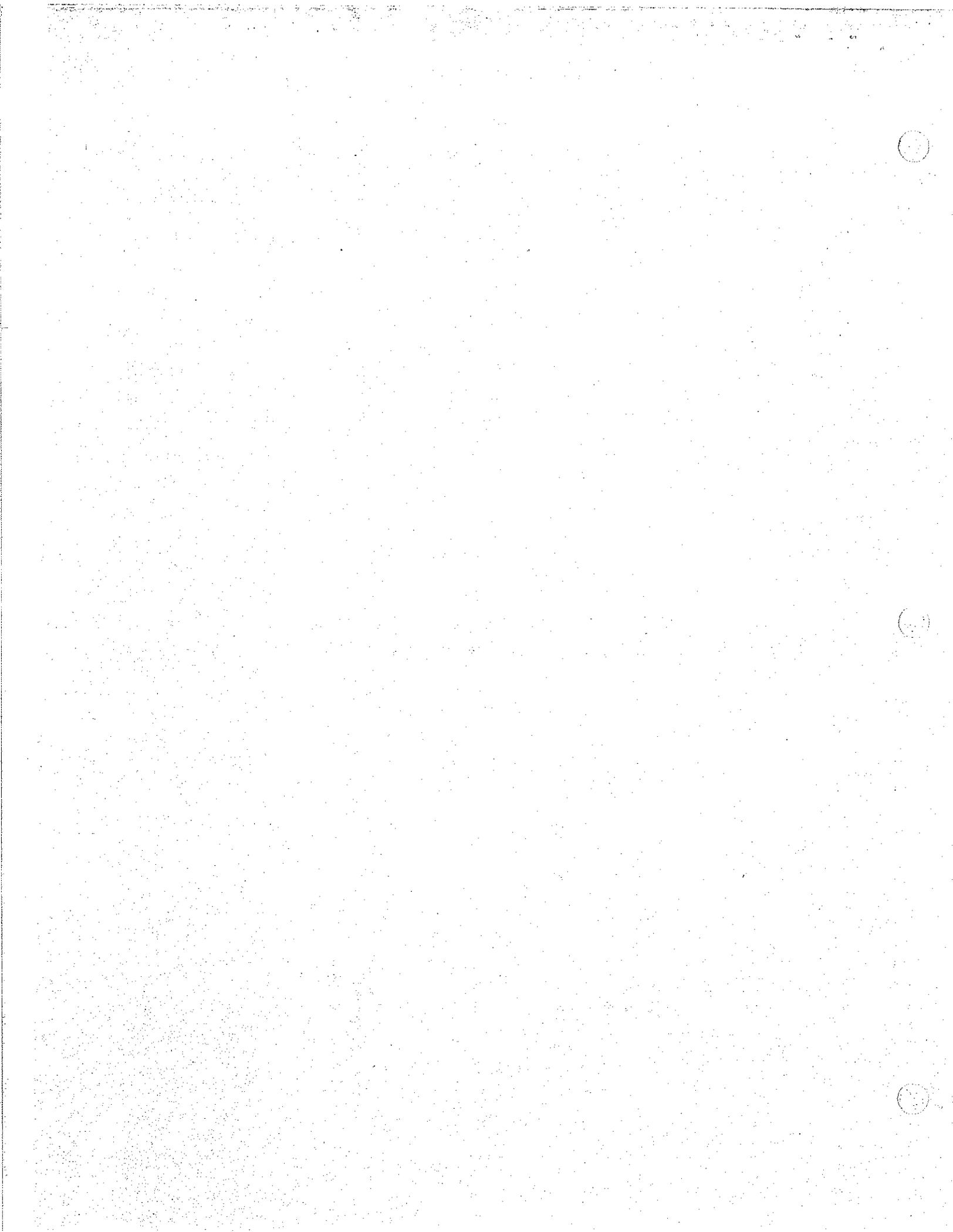
<b>CHECK APPLICABLE BOX(ES)</b>		DISTRICT	PERIOD COVERED
<input type="checkbox"/> INDIVIDUAL PROGRAM	TITLE OF PROGRAM	CONTACT PERSON	TELEPHONE
<input type="checkbox"/> DISTRICT SUMMARY	<input type="checkbox"/> YEAR END		

I. SERVICES PROVIDED (direct/purchased)		CASES		
		NEW	CARRY-OVER	TOTAL
1. CASEWORK (INDIVIDUAL/ FAMILY)	a. Information/Referral .....			
	b. Advocacy/Case Management .....			
	c. Counseling/Therapy .....			
2. Group Counseling/Therapy .....				
3. Education .....				
4. Homemaker .....				
5. Parent Aide .....				
6. Recreation .....				
7. Day Care/Family Day Care .....				
8. Psychiatric Evaluation .....				
9. Psychological Evaluation .....				
10. Employment .....				
11. Financial Assistance .....				
12. Other (Specify) .....				
13. Other (Specify) .....				

II. CASE ACTIVITY		NEW	LOCAL DSS REFERRALS	
1. TOTAL NO. OF CASES	a. Referred .....			
	b. Accepted .....			
	c. Rejected .....			
	d. Withdrawn .....			
	Pending .....			

PRIMARY REASON(S) FOR REJECTION AND WITHDRAWAL (PLEASE LIST)		NEW	CARRY-OVER	TOTAL
2. Total Number of Families Served .....				
3. Total Number of Children Served .....				
4. Total Number of Children at Risk Served and not in Foster Care .....				
5. Total Number of Children Served who are in Foster Care .....				
6. Total Number of Children returned home from Foster Care .....				
7. Total Number of Foster Children where adoptive placement was made .....				
8. Total Number of Children where Foster Care Placement was necessitated: .....				
TOTAL NO. OF CASES CLOSED	a. because of foster care placement .....			
	b. because goals were attained .....			
	c. because clients withdrew .....			
	d. other (specify) .....			
	e. other (specify) .....			

<b>III. TOTAL EXPENDITURES (State and Local)</b>	
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## INSTRUCTIONS FOR PREVENTIVE SERVICES PROGRESS REPORTS

SERVICES TO BE PROVIDED are those performed by the preventive services program directly or through a purchase of service agreement. Services provided by other branches of an agency for which referrals are made by preventive workers are to be counted as "referral" not the service per se, the same for services provided outside the agency. For example, a preventive program is part of a larger parent agency. However, the recreational facilities (and staff assigned) are not budgeted for or paid for out of the preventive appropriation. Therefore, recreation should not be listed for those families. The services may indeed be reflected as "referral" or "advocacy" where appropriate.

The SERVICE DEFINITIONS are to be used to maintain as much consistency in reporting as possible.

A case can be an individual client, a family member, or a group of related members of a family. The tally will indicate the total number of cases seen by each service modality over the course of the report period. Cases may show up more than once, of course, since they may have received more than one service over the course of the report period. The information on case activity of the report will compensate for this overlapping and will reflect the absolute numbers of families and children seen.

For the purposes of this report, the definition of "child at risk" is:

While there is no simple set of criteria that identifies the child who will be separated from his family and placed outside his home, there are general guidelines which can be drawn from the current profiles of children already placed. Professional judgment can discern those families who are at risk of having at least one child removed to placement if preventive services are not provided. Placement may be imminent or likely to occur because of the interpersonal problems in the family structure, maladaptive behavior of the child, inability of the parenting figure to obtain the necessary concrete supports to sustain the family, and similar circumstances.

State aid is available to reduce foster care placement as well as avert placement. Therefore, youngsters currently in care for whom preventive or day services are provided to shorten placement are also designated "at risk". Preventive services may also be provided to children in placement to hasten their transfer to adoptive placements. It is recognized that while many of the children served will be "at risk", siblings may also be served as part of comprehensive services to families. These children are not to be counted in the "at risk" statistics.

With the exception of information/referral and advocacy/case management services, all contacts must be in-person to be counted on this form. With those services extensive telephone discussions may be appropriately counted.

In the CASE ACTIVITY section, reference to foster care placements includes other agency facilities or programs as well as the parent agency.

## SERVICE DEFINITIONS

### CASEWORK SERVICES

Casework services to individuals and families. Such services are divided into three separate categories according to the primary focus of the casework intervention. Such services, either to a child or family member(s), are performed by staff designated as caseworkers or case aides, utilizing the principles and skills of casework practice.

#### a. Information/Referral

The provision of information to a client about outside resources (either in the community or branches of the parent agency) to advise, assist or arrange for the client to obtain the services. Information/referral services rely on the worker's brief assessment of client needs, knowledge of resources available such as legal, education, public assistance, or consumer services. Information/referral contacts, depending on the nature of the inquiry, are usually performed on a one- or two-contact basis.

#### b. Advocacy/Case Management

Advocacy is a worker's intervention on behalf of a client who requires assistance in negotiating systems and resources such as those which deal with housing, medical services, the courts, etc. This involves the active participation and extensive follow-up by the worker to attempt to assure the client's receipt of needed services. Case management services involve the coordination of several services being provided or planned to be provided to clients within or outside the agency. This includes the development, monitoring, and/or arrangement of services through a defined service plan, including review of service plans and objectives to assure comprehensive services to clients.

#### c. Counseling/Therapy

The therapeutic process performed by a trained or experienced social worker which combines at least: psychosocial assessment, problem identification, perception of the client's emotional state, relationships, and social functioning level, and problem-solving. The process uses the professional relationship to assist clients in problem-solving through exploration of the social/interpersonal environment which results in a defined service plan.

### GROUP COUNSELING/THERAPY

Those therapeutic services performed by a group worker or therapist trained in the group process; services are provided simultaneously to at least three unrelated persons. The component of services includes at least: group assessment, group development, use of the group dynamics, exploration of the interpersonal dynamics, and attempts to resolve conflicts through the group process.

## EDUCATION

Those services which include tutoring, remediation, education testing/assessment, consultation with clients around child's educational needs.

## HOMEMAKER

Services performed in the client's home by a person who has received training in homemaking skills from a Department approved training program. Such services include assisting families in household management tasks, money management, nutrition and health standards, food preparation and child-rearing skills.

## PARENT AIDE

A specially trained para-professional provides services in the client's home focusing on the parent. A parent aide provides the supportive relationship that is designed to reduce isolation, to foster personal growth and self-esteem, and to increase motivation. Techniques used include role modeling, listening skills, problem-solving skills, crisis intervention, and positive reinforcement. Education may be provided on parenting behavior and in personal coping behavior through modeling, discussion, and sharing. Help with home management may also be provided but is seen as a means to encourage client growth. Parent aides generally carry very small caseloads to ensure frequent visits in the home.

## RECREATION

Those planned activities for individuals or groups, such as leisure-time activities, sporting events, cultural enrichment outings, arts and crafts. While staff supervision or observation of clients may be a component, the thrust of the service is enjoyment of activity, not remedial per se.

## DAY CARE/FAMILY DAY CARE

Services to children 6 weeks to 14 years of age for a portion of the day in a group or family day care setting licensed by the State Department of Social Services.

## PSYCHOLOGICAL EVALUATION

Individual assessment performed by a person certified as a psychologist by the State Education Department.

## PSYCHIATRIC EVALUATION

Individual assessment performed by a person licensed to practice psychiatry in New York State.

## EMPLOYMENT

Services which include job counseling (exploration of the client's interest and potential for employment), job placement, provision of actual employment, vocational and pre-vocational testing, counseling and training.

## FINANCIAL ASSISTANCE

Provision of cash to clients to meet emergency or temporary needs, or the provision of snacks, meals, clothing, in-kind supports in lieu of cash, or transportation costs to facilitate client utilization of services.

