

NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
PREVENTIVE SERVICES AGENCY ATTESTATION

The Family First Prevention Services Act (FFPSA) allows states to expand their priorities to implement evidence-based programs (EBPs) to prevent foster care placement. The services are provided under an organizational structure and treatment framework that involves understanding, recognizing, and responding to the effects of all types of traumas and in accordance with recognized principles of a trauma-informed approach to facilitate resilience and healing. In choosing an EBP, the preventive services agency (Agency) must meet and maintain the following requirements. The Agency, by and through a designated individual with authority to bind the agency, must attest to meeting these program requirements as outlined below.

Section I

Agency Name:

Agency Address:

The Agency's legal status is: (check appropriate box)

- an authorized agency as defined in paragraphs (a) and (b) of subdivision 10 of section 371 of the New York State Social Services Law; or
- a not-for-profit corporation as defined in paragraph 5 of subdivision (a) of section 102 of the New York State Not-for-Profit Corporation Law; or
- a public agency that receives prior approval from the department that provides a program of preventive services as defined under 18 NYCRR 423.2(b).

Attach documentation necessary to prove the agency's legal status.

The Agency employs a trauma-informed model of care (TIC), which adheres to standards provided by the New York State Office of Children and Family Services (OCFS) and section 471(e)(4)(B) of the federal Social Security Act.

The Agency's training plan minimally requires all staff to complete trauma-informed care training (see learning objectives that qualify for a trauma training set forth in Attachment A) at onboarding.

Please specify the training utilized to satisfy this requirement:

Please indicate any additional steps the Agency is taking to achieve a culture of trauma-informed care:

- The Agency has a mechanism to evaluate implementation of TIC.
- The Agency provides ongoing development through coaching and supervision of TIC skills.
- The Agency engages in continuous quality improvement related to TIC implementation.

Section II	
The Agency will provide an EBP Model from the list below. Please check appropriate box(es)	
EBP Model	Required Manual
<input type="checkbox"/> Brief Strategic Family Therapy (BSFT)	Szapocznik, J., Hervis, O., & Schwartz, S. (2003). <i>Brief Strategic Family Therapy for Adolescent Drug Abuse</i> (NIH Pub. No. 03-4751). National Institute on Drug Abuse
<input type="checkbox"/> Familias Unidas	Estrada, Y., Pantin, H. M., Prado, G., Tapia, M. I., & Velazquez, M. R. (2020). <i>Familias Unidas Program: For the families of Hispanic adolescents: Intervention manual</i> . University of Miami.
<input type="checkbox"/> Family Check-Up (FCU)	Dishion, T. J., Gill, A. M., Shaw, D. S., Risso-Weaver, J., Veltman, M., Wilson, M. N., Mauricio, A. M., & Stormshak, B. (2019). <i>Family Check-Up in Early Childhood: An Intervention Manual</i> (2nd ed.) [Unpublished intervention manual]. Child and Family Center, University of Oregon
<input type="checkbox"/> Functional Family Therapy (FFT)	Alexander, J.A., Waldron, H.B., & Robbins, M.S., & Neeb, A. (2013). <i>Functional Family Therapy for Adolescent Behavior Problems</i> . American Psychological Association
<input type="checkbox"/> Healthy Families America (HFA)	Healthy Families America. (2018) <i>Best Practice Standards</i> . Prevent Child Abuse America. Healthy Families America. (2018). <i>State/Multi-Site System Central Administration Standards</i> . Prevent Child Abuse America.
<input type="checkbox"/> Homebuilders	Kinney, J., Haapala, D. A., & Booth, C. (1991). <i>Keeping Families Together: The HOMEBUILDERS Model</i> . New York, N.Y: Taylor Francis.
<input type="checkbox"/> Motivational Interviewing (MI)	Miller, W. R., & Rollnick, S. (2012). <i>Motivational Interviewing: Helping People Change</i> (3rd ed.). Guilford Press
<input type="checkbox"/> Multisystemic Therapy (MST)	Henggeler, S. W., Schoenwald, S. K., Borduin, C. M., Rowland, M. D., & Cunningham, P. B. (2009). <i>Multisystemic Therapy for Antisocial Behavior in Children and Adolescents</i> (2nd ed.). Guilford Press.
<input type="checkbox"/> Nurse-Family Partnership (NFP)	<i>Nurse-Family Partnership (2020) Visit-to-visit guidelines</i> . New nurses also learn the visit-to-visit guidelines, which provide a consistent content and structure for each of the 64 planned home visits. (CEBC).
<input type="checkbox"/> Parent-Child Interaction Therapy (PCIT)	Eyberg, S., & Funderburk, B. (2011) <i>Parent-Child Interaction Therapy Protocol: 2011</i> . PCIT International, Inc.
<input type="checkbox"/> Parents as Teachers (PAT)	<i>PAT Foundational Curriculum - Parents as Teachers National Center, Inc. (2016), Foundational Curriculum</i> ; Parents as Teachers National Center, Inc. (2014), <i>Foundational 2 Curriculum: 3 Years through Kindergarten</i>

Section III
The Agency (please check all boxes):
<input type="checkbox"/> Attests to providing all data deemed necessary for federal and state reporting requirements, as directed by OCFS.
<input type="checkbox"/> Attests to conducting Statewide Central Register (SCR) database checks, as required by New York State Law and OCFS regulations and policies.
<input type="checkbox"/> Attests to understanding and agrees it is the Agency's responsibility and duty to update any and all requirements and changes immediately, or as soon as practicable, and to contact its assigned OCFS regional office. Further, it is the Agency's duty to maintain all required accreditations and licenses as required by this Agency's application, including any changes to both federal and state requirements, without any lapse in coverage, and to update the regional office(s) of respective changes.
<input type="checkbox"/> Attests to timely cooperation with OCFS or their designee's evaluations and monitoring of programs and services provided.

Section IV	
ATTESTATION	
I hereby certify, under penalty of perjury, that I am duly authorized to subscribe and submit this attestation on behalf of the Agency (name): .	
I further certify that the information contained in this application is accurate, true, and complete in all material respects. I further certify that I understand all the rules and requirements of operating a preventive services agency.	
NAME:	TITLE:
SIGNATURE: X	DATE: / /

Attestations must be submitted to ocfs.sm.agency.ff.attest@ocfs.ny.gov for entry into the CONNECTIONS system.

Section V		
OCFS ASSIGNMENT OF VENDOR ID		
The Agency has been assigned the following resource and vendor IDs for purposes providing the listed below EBPs.		
Name of EBP	Resource ID	Vendor ID

ATTACHMENT A**Informed and Resilience Building Care Modules and Learning Objectives****Introduction to Trauma and Toxic Stress**

- Understand the impacts of toxic stress and trauma
- Recognize the impact of racial trauma and its effects

Trauma: The Mind and the Body

- Explain the neurobiology of the human stress response
- Describe the science behind our ability to recover

Wellness, Resilience, and Healing

- Understand the frameworks of wellness, resilience, healing-centered engagement, and post-traumatic growth
- Identify practical elements of an environment that fosters wellness, resilience, and healing

Trauma Informed Approaches

- Describe the components and core values of trauma-informed care
- Connect practical strategies with each core value

Compassion Resilience | Care for Providers: An Essential Skill

- Summarize the spectrum of the helpers' experience
- Learn strategies that individuals can use to support themselves
- Learn strategies that organizations can use to support themselves