In August, you received a memorandum, 94 LCM-93, outlining the revised Consolidated Services Planning Process. The purpose of this memo is to provide you with the final guidelines and related materials for conducting an effective planning process. In addition, this memorandum announces the availability of small technical assistance grants available to districts to assist in restructuring local planning activities.

The Planning Guidelines are divided into four sections. Section One provides an overview and general description of the Consolidated Services Planning Process. Section Two provides more detailed instructions for completing each phase of the Consolidated Services Planning Process. Section Three is a comprehensive technical assistance guide that is designed to assist districts in constructing the needs assessment process and focusing local data collection and analysis efforts. Section Four includes a series of worksheets and optional formats that the county can use for organizing the plan document. This last section is not appended to this LCM, but is being forwarded to your Staff Development Coordinator along with a copy of this LCM and the Planning Guidelines.

You will recall that among the changes in the Consolidated Services Planning process is increased flexibility in the planning cycle. The district may establish a plan cycle of two, three or four years. In addition, the
district may establish its own annual cycle as well. The district may establish a submission date any time between October 30 and March 30, with an effective date 30 days after submission. It is imperative that immediately upon receiving this LCM that you work in conjunction with the appropriate Services and Community Development Regional Director and adult services representative to establish a submission date for your district's Consolidated Services Plan. It is NOT necessary for you to establish the length of time of your planning cycle. This decision may emerge out of the local planning process and be declared in the plan that you submit.

These revised Guidelines represent a significant departure from previous planning cycles. These changes are forged by the new directions set forth in the Department's child welfare reform agenda entitled Families for Kids ASAP. These changes also reflect New York State's implementation of the federal Family Preservation and Support Act (Title IV-B subpart 2). As stated in 94 LCM-93, this revised Consolidated Services Planning Process is a central component of New York State's Title IV-B planning process. The Department continues to rely upon Social Services districts to translate State goals into an effective service delivery response. In addition, the local planning process provides the most accessible mechanism for ensuring the broadest possible community involvement and cross-system collaboration.

The Family Preservation and Support Act allows states to invest a portion of the first year allocation of new Title IV-B funds in planning. New York State has elected to make almost the entirety of its planning funds available to local districts to support local planning efforts. The funds, which require no match, may be used for the following two purposes:

- Creating the capacity to develop outcomes and monitor county progress against measurable indicators.
- Enhancing community involvement throughout the planning process

Activities in this category might include one-time projects to: collect data that is not available through automated or other ongoing sources; develop a mechanism to routinize the availability of certain data indicators; or, constructing baseline information for future planning and evaluation.

- Enhancing community involvement throughout the planning process

Activities in this category might include sponsoring community forums or other events to elicit input from the general community, providers, consumers of services and other key stake holders; conducting surveys and other data collection efforts to ascertain the opinions of various stake holders; or, promoting interagency involvement in the planning Process.

Based on county size, maximum allocations have been established for each social services district. These allocations are listed on an attachment to this memorandum. To access these funds, the district must submit a request for funds not to exceed the county's maximum allocation. The request must include a brief proposal for the use of the funds and a budget. **ALL REQUESTS FOR THESE FUNDS MUST BE RECEIVED BY FEBRUARY 15, 1995. NO REQUESTS WILL BE ENTERTAINED AFTER THAT DATE.** The approval letter to the district will include claiming instructions.
In accordance with federal law, these funds must be expended and all claiming completed by September 30, 1995. This is important to keep in mind when developing a proposal for these funds.

Applications for planning funds should be submitted to Deputy Commissioner Frank Puig, to the attention of Suzanne Zafonte Sennett. A copy of the request should be forwarded to the appropriate Services and Community Development Regional Director.

In addition to revising the Consolidated Services Plan, the Department has been an active partner in an interagency effort to craft the Comprehensive Plan for Children and Youth. This joint effort to coordinate the planning requirements across many of the agencies serving children and youth will be piloted this year in approximately eight counties. Counties participating in this effort will receive technical assistance to ensure that the interagency planning effort effectively responds to the planning needs of the child welfare system. Please note that while the Comprehensive Plan for Children and Youth will replace significant portions of the Consolidated Services Plan dealing with family and children services, those sections dealing with domestic violence and adult services will need to be submitted separately. To assist counties electing to participate in this interagency initiative, the planning funds described earlier this memorandum may be used to support a district's involvement in this alternative planning process.

These two planning initiatives reflect an exciting revitalization of our work on behalf of children, youth, families and dependent adults. They also demonstrate a new partnership between this Department and counties in shaping a shared agenda for the next decade and beyond. Staff from each of our offices stand ready to assist you as you initiate your planning efforts.

Peter Brest
Associate Commissioner
Office of Housing and Adult Services

Frank Puig
Deputy Commissioner
Division of Services and Community Development

William Gould
Director
Office of Field Operations
## PLANNING GRANTS
### DISTRICT MAXIMUM ALLOCATIONS

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Guidelines and Instructions for Preparing
the Local Consolidated Services Plan
1995-99

The following material includes four major components. First, the Overview establishes a general framework for the planning process, including the timetable of events, criteria for approval, and how and where to submit the Report. The Instructions, then, detail the specific requirements related to the development of the Plan. The third section includes Technical Assistance materials. Section Four contains Forms and Optional Formats for actually compiling the plan document.

October 1994
While the Consolidated Services Planning process has been an important component of ongoing agenda and strategy setting for over a decade, it was also apparent that the structure and purpose of the planning process required revisions if it were to continue to be a useful tool. Through consultation with local districts, the Department constructed the following guideposts for revising Consolidated Services Planning:

- Elevate and simplify the purpose of the plan to being a broad direction setting process that brings together a cross section of the community.
- Construct the Consolidated Services Planning process so that it serves as an integral component of New York State's planning efforts under Title IV-B of the Social Security Act.
- Create links across other major aspects of the mission shared by the Department and its local partners.
- A State supervised/county administered system of services is only successful when there is a clarity of mission and desired statewide direction, and a shared commitment and understanding of this mission and direction at the State and county levels.

**Outline of the Revised Consolidated Services Planning Process**

These guideposts dictate a movement away from planning that centers around "process" and activities in discrete service areas and replaces it with a comprehensive assessment and a cohesive plan for how services and other State and local actions can further the shared State/local mission. Therefore, the organizing feature of the Consolidated Services Planning process is no longer service types, but rather, a finite set of goal statements that offer a statewide vision and direction for family, children and adult services and the basis for the establishment of county-developed measurable outcomes. The goal statements provide a strong focus for planning, yet are purposely broad enough to encompass all of the services for which the district is responsible and, allow a county to define its unique issues/challenges within the goals. They also reinforce the interrelationship between these goals and the Department's goals in other aspects of our mission, including: Jobs FIRST; the Neighborhood Based Alliance (NBA) Initiative; Reforming Services to the Homeless; and, Implementing Operational and Management Improvements.

The goal statements listed in these guidelines emerged from federal and State law and policy, the numerous voices heard through the community visioning process supported through Families for Kids ASAP and direct consultation with social services districts during the development of the planning guidelines.
Local goals and activities for each service type will not be required, as has been the case in previous years. Instead, the social services district will be required to decide how various services should be strengthened, developed or maintained in order to increase the county's ability to reach the goal and the county-developed outcome measure. These deliberations are to be conducted in consultation with the community and with the support of Department staff. Starting from goals and outcomes, the social services district has the challenge and flexibility to assess and build on the community's current capacity to achieve these outcomes for: the general population; specific sub-populations; ethnic and cultural groups; age groups; and/or, geographic communities and neighborhoods. In assessing current capacity, the district is reminded to look beyond its own resources to include other service delivery systems, schools, and targeted initiatives such as NBA sites, Community Services Projects funded through APPS, PINS Diversion efforts, Coordinated Children's Services Initiatives, Community School sites and others.

Clearly, removing the artificial structure around the planning process does not diminish the effort and commitment required for effective planning. It simply allows that effort to be targeted to meaningful activity rather than making sure that regulatory requirements and forms are properly adhered to. In that vein, you will note the following additional changes and/or deletions in the planning guidelines:

- The county may set the length of its multi-year cycle at 2, 3, or 4 years.
- The district may specify its submission and effective dates within a six month window.
- The Organizational Chart requirements will be met by the district's assurance that the organizational chart (Org-Plus) submitted to the Division of Quality Assurance and Audit for the Random Moment Survey process is current.
- A district may seek a waiver pursuant to 18NYCRR 407.11 to the requirement to submit estimates of clients to be served in each of the Title XX services. The planning guidelines include a pre-print of a waiver request.
- The district will submit a simplified budget overview without the need to estimate claiming levels across specific funding streams.
- The application for Enhanced Funding for Child Protective Pre-Determination Services has been separated from the planning process. A simple application form documenting the county's eligibility for these funds has been developed and is included in the guidelines (Section 3: Forms and Optional Formats). The county may submit this form at any point in the year that it seeks to document its compliance and establish funding eligibility. This precludes a delay in overall plan submission or approval while the county is making efforts to reach compliance. It also eliminates the need for a formal plan amendment procedure if you seek to establish compliance after your plan has been approved.

Action related to the review and approval/disapproval of the application for pre-determination services funds will in no way impact upon the timeline for the review and/or approval of the County's Plan.
While the actual application for the funds is a discrete process, the county is encouraged to use the planning process to develop strategies necessary for coming into, or remaining in compliance with case load and other enhanced performance standards for timely investigative activities and other child protective services, as set forth in departmental regulations.

- Appendix E, Program Assurances has been eliminated, with any necessary program assurances merged into the Legal Assurances.

- The process for seeking Departmental approval for entering into a Public Purchase contract for preventive services has been simplified and much of the detailed documentation has been removed from the Plan. Public purchase of preventive services is a useful tool for enhancing the coordination of services in many instances. The use of this, or any other mechanism for shaping an effective service delivery response should be clearly supported by the county's needs assessment and outcome statements, and be reflected within the county strategies.

Department regulations 18NYCRR 432.2 require prior approval of a public purchase of preventive services. This requirement must be met by submitting to the appropriate Services and Community Development Regional Office, 30 days prior to the execution of the proposed contract, a letter of intent to enter into such a contract. The request to enter into a public purchase contract will be assumed to be approved unless the Regional Office notifies the county of an objection or the need for further information from the county prior to making a determination. For the county's convenience, Section 3 of these planning guidelines includes a list of information that must be contained in the submission to the Services and Community Development Regional office.

**Relationship to the development of the New York State plan for Family Preservation and Support (Title IV-B of the Social Security Act)**

The goal statements that will shape this planning cycle represent an interim stage in the development of a set of State-level measurable outcomes for assessing Statewide efforts to strengthen and support the families, children and adults of New York State. Over the next year, the Department will be developing a multi-year plan in accordance with the provisions of Title IV-B of the Social Security Act. The Department, in describing to the federal Department of Health and Human Services its proposed approach to Title IV-B planning, highlighted the role of Consolidated Services Planning in refining the goals and establishing measurable outcomes to which New York State will commit itself in its Title IV-B plan.

The Department accepts the responsibility for bringing together the many voices and viewpoints necessary to forge a strong consensus on goals and outcomes. However, even as that consensus is forged, the implications and steps necessary for reaching those goals will vary significantly across the 58 social services districts. Therefore, the Consolidated Services Planning Process will play two important roles. First, it will provide a local perspective in refining the goals themselves. Second, it is the crucial mechanism for districts to develop a blueprint for shaping a system of services and supports that reflects the principles of family support and preservation.
Therefore, the outcomes that counties develop in response to the State Goal Statements and present in their Consolidated Services Plans, along with input received through other State-level planning activities, will significantly shape New York State's Title IV-B Plan. Further, the locally defined strategies will be the building block for shaping State program, policy and funding opportunities for the remainder of the planning cycle.

**Statewide Goal Statements**

The goal statements around which counties are asked to initiate their Consolidated Services Plan are as follows:

**FAMILY AND CHILDREN SERVICES**

FAMILIES, INCLUDING NUCLEAR, EXTENDED AND ADOPTIVE FAMILIES WILL BE STRENGTHENED AND SUPPORTED IN RAISING AND NURTURING THEIR CHILDREN; IN ENSURING THEIR CHILDREN'S CONNECTIONS TO THEIR HERITAGE; AND IN PLANNING FOR THEIR CHILDREN'S FUTURE.

CHILDREN WHO ARE REMOVED FROM THEIR BIRTH FAMILIES WILL BE ENSURED STABILITY, CONTINUITY AND AN ENVIRONMENT THAT SUPPORTS ALL ASPECTS OF THEIR DEVELOPMENT.

VICTIMS OF FAMILY VIOLENCE, BOTH CHILD AND ADULT, WILL BE AFFORDED THE SAFETY AND SUPPORT NECESSARY TO ACHIEVE SELF-SUFFICIENCY (ADULT), AND/ OR TO ENSURE THEIR CONTINUED GROWTH AND DEVELOPMENT (CHILD).

ADOLESCENTS IN FOSTER CARE AND PREGNANT, PARENTING AND AT-RISK TEENS IN RECEIPT OF PUBLIC ASSISTANCE WILL DEVELOP THE SOCIAL, EDUCATIONAL AND VOCATIONAL SKILLS NECESSARY FOR SELF-SUFFICIENCY. (While not required, County's are encouraged to expand the scope of this goal to include pregnant, parenting and at-risk teens regardless of their association with public assistance)

**ADULT SERVICES**

IMPAIRED ADULTS WHO ARE ABUSED, NEGLECTED OR EXPLOITED BY OTHERS, WILL BE IDENTIFIED, HAVE THEIR SITUATION THOROUGHLY INVESTIGATED, AND BE PROTECTED.

IMPAIRED ADULTS WHO ARE AT RISK OF HARM; UNABLE TO MAKE DECISIONS ON THEIR OWN BEHALF; AND REFUSE NECESSARY SERVICES, WILL BE ASSESSED AND SERVED PURSUANT TO THE APPROPRIATE LEGAL INTERVENTION.

THE MENTAL HEALTH, DEVELOPMENTAL, HEALTH AND SOCIAL SERVICES NEEDS OF IMPAIRED ADULTS WILL BE THOROUGHLY ASSESSED TO ASSURE THAT APPROPRIATE SERVICES PLANS ARE DEVELOPED.

ADULTS WHO ARE UNABLE TO LIVE ON THEIR OWN WILL BE PLACED IN APPROPRIATE RESIDENTIAL CARE FACILITIES INCLUDING SMALL HOME-LIKE SETTINGS.
Components of the Plan

For the Consolidated Service Plant, the following information is REQUIRED OF ALL DISTRICTS:

(a) County Assessment for each State Goal
(b) County Outcome Statements and Measurable Indicators
(c) County Strategies for 1995
(d) Summary of Issues Requiring State Attention or Intervention
(e) Summary of Staff Development Issues
(f) Program Information Matrix (Appendix F)
(g) Listing and Description of Authorized Non-Residential Domestic Violence Services
(h) Community Involvement
(i) Summary Budget Projections and Matrix of Relationship between Outcomes and Services
(j) Commissioner's Signature
(k) Legal Assurances
(l) Signature of the chief elected officer of the county or the chairperson of the legislative body in those districts without a chief elected officer.

(m) Introduction page

The following sections are REQUIRED ONLY UNDER SPECIFIC CIRCUMSTANCES (noted for each item):

(a) Estimate of Persons To Be Served (Required only if county does not seek a waiver)

(b) Enhanced CPS funding for post-determination services—For districts seeking Child Protective Services enhanced reimbursement for post-determination services, instructions and requirements are included in the guidelines. In addition, the technical assistance materials on conducting a needs assessment for each of the State Goals Statements includes specific issues that must be addressed by counties seeking these funds.

If the district has submitted its JOBS plan, the district SHOULD NOT resubmit the child care portion of the plan as part of this Annual Implementation Report. Department staff in the Office of Employment Programs and Office of Family and Children Services will collaboratively review the JOBS plan and accept this submission as meeting both sets of planning requirements.
Please review the section entitled Overview and Outline of the Revised Consolidated Services Planning Process for other sections that have been revised or deleted for this planning cycle. Districts may include additional information as may be determined locally to clarify or strengthen the plan's local agenda setting function.

Criteria for Approval of the Consolidated Services Plan

While the County Consolidated Services Plan must be reviewed and approved by the New York State Department of Social Services, the revised planning process is best served by redefining that review and approval process. To the greatest extent, the Plan is the result of a locally defined process, supported through State technical assistance. Clearly, the Statewide Goals create a basic construct for the planning process. Further, through consultation with Regional Staff from the Office of Field Operations, Services and Community Development and Housing and Adult Services, we have communicated additional issues and opportunities to be incorporated into the County Consolidated Services Plan.

In this context, the resultant plan may be best characterized as a memorandum of agreement between the State and the county describing an agenda for meeting shared goals and outcomes. Thus, the Department's review will be guided by its interest in assisting the county in shaping the most effective agenda possible and the Commissioner's approval represents a commitment to work closely with the county in the implementation of the Plan.

The criteria for approval shall be that:
1. All of the State Goal statements were considered as part of the needs assessment process.
2. The Plan is internally consistent (e.g. needs assessment, county outcomes and strategies are related). 
3. The Plan complies with requirements of the planning process, including those addressing community involvement.
4. The Plan contains all required information and required enclosures.

Submission of the Consolidated Services Plan

The original and two copies of the Plan shall be submitted to the Commissioner. At the same time, two copies of the Plan should be sent to the appropriate Regional Office for Family and Children Services. Please make sure that all pages are numbered.

The addresses are as follows:

Commissioner Michael J. Dowling
New York State Department of Social Services
40 North Pearl Street
Albany, New York 12243

Mr. William Dorr,
Mr. Fred Cantlo, Director
Acting Director
Metropolitan Regional Office
NYS DSS Family and Children Services
80 Maiden Lane
New York, New York 10038

Mr. William Dorr,
Mr. Fred Cantlo, Director
Acting Director
Metropolitan Regional Office
NYS DSS Family and Children Services
80 Maiden Lane
New York, New York 10038

Albany Regional Office
NYS DSS Family and Children Services
40 North Pearl Street
Albany, New York 12243
As part of the Office Automation (OA) initiative, participating counties may automate their CSP submission process. All of the forms and optional formats have been re-formatted on-line. All instructions and forms are contained in the FCS file of the E-Form drawer in the Electronic Library.

**Other Information**

Questions concerning the content or process for completing the Consolidated Services Plan that are related to Family and Children Services should be directed to the appropriate Regional Office of the Division of Services and Community Development. Questions related to Adult Services should be directed to the appropriate program representative in the Office of Housing and Adult Services. A listing of contact names and phone numbers is included in SECTION TWO. Requests for technical assistance should be directed to these individuals.

**Planning Calendar**

Historically, plans have been submitted in October to be effective the following January. Counties will now be able to submit plans anytime between October and March 30, with an effective date three months after submission. Districts will be required to notify the Department by October 30 of their proposed submission date. You are strongly encouraged to consult with your Services and Community Development Regional Office in establishing an alternative submission date so that regional technical assistance resources can be maximized.
SECTION TWO: INSTRUCTIONS FOR COMPLETING THE CONSOLIDATED SERVICES PLAN

To assist districts in reporting succinctly on their planning activities, standardized formats have been provided. The use of the forms is optional on the part of the district. However, whether or not the district uses the forms, they should be reviewed to provide a sense of the acceptable scope and brevity of required information.

A. NEEDS ASSESSMENT

Scope

Counties are required to undertake a comprehensive needs assessment that addresses all of the State Goal Statements for both Adult Services and Family and Children Services. In addition over the course of the FULL planning cycle, it is expected that the county will work towards outcomes and implementation strategies that respond to the full range of issues raised through the needs assessment process.

In determining its ability to achieve each of the goal statements, each district must assess the status of its service delivery system, including the capabilities and responsiveness of other key services providers and other units within the local department of social services whose support and cooperation is essential for the effective delivery of services though family and children services or adult services.

SECTION THREE is a technical assistance guide for conducting a needs assessment based on the State Goals. In addition to narrative discussion of the intent and scope of the Goal statements, there are also suggestions on how a county might approach assessing current capacity of the county to achieve each State Goal. Data the county might examine is discussed. Data indicators readily available through current data systems as well as information that the county might seek to construct through local survey, data collection and analysis are referenced.

In addition to specific suggestions for each State Goal, SECTION THREE also contains general suggestions for approaching the needs assessment process. These suggestions focus on the importance of determining differences in need and capacity across different neighborhoods and segments of the community. The guidelines also offer additional reminders about the importance of assessing current patterns and approaches of service delivery across major service programs and relating them, as appropriate to each of the outcome statements. Finally, the technical assistance materials highlight the importance of building upon the planning processes and findings of related planning efforts such as NBA, APPS, and PINS Diversion.

The written guidelines are only one aspect of State assistance in the planning process. The Services and Community Development Regional Offices and the Office of Housing and Adult Services are essential resources for local planning. Services and Community Development Regional staff will be contacting social services districts to provide assistance in analyzing State-generated data and clarifying other issues and concerns relevant to the Family and Children Services goals and planning process. Adult Services staff will be available to social services districts to provide similar supports related to the Adult Services goals.
Part of an effective assessment process is contrasting estimates of need with current service capacity. Historically, the planning guidelines have required the completion of a chart listing estimates of clients who will require each of 21 different services. As an alternative, these guidelines encourage the district to assess whether the profile of clients and the needs they are presenting match the profile of services the district is providing - in terms of type of service, location of services, as well as capacity levels for various services.

A district may determine that it already is operating at an optimal level with regard to a particular goal statement. If so, this should be documented in the summary of the needs assessment findings. The county will not be expected to develop additional "enhancing" outcomes or strategies in such circumstances. However, the county must document its commitment and ability to maintain the present level of performance.

**Documentation**

Documentation of the Needs Assessment process should provide a clear picture of the issues and concerns which the county seeks to address, and a simple "road map" of how the statistical and anecdotal data collected through the needs assessment process led the county to these conclusions.

Counties are strongly encouraged to review data provided through CCRS quarterly and annual reports, MAPS, KIDS COUNT and other State generated data as important tools in the local assessment process. Counties are also encouraged to make these resources readily available to community members interested in participating or learning about local planning activities. Given the availability of these resources, the county is neither expected nor encouraged to include extensive excerpts of these materials in the plan document itself. Rather, the documentation should focus on how these bend other available data sources contributed to the conclusions reached.

Similarly, if the county either conducted other data collection and/or needs assessment activities or reviewed data available through other systems (e.g. systems maintained by other public agencies) the plan document should acknowledge the various sources that were consulted but need only focus on key findings that shaped the county's conclusions. This is especially crucial in counties operating other initiatives with a strong planning component. Examples of such initiatives include: NBA, APPS, PINS Diversion, Coordinated Children's Services Initiative, and others. It is expected that the county will facilitate access to the data cited if either members of the public or representatives of the Department request further documentation.

**B. DEVELOPING A PLAN OF ACTION**

The social services district, based on its needs assessment, will develop:
- county-specific outcomes; measurable indicators that they will use to monitor their progress; and strategies that strengthen its ability to reach these outcomes.
Outcomes

The county-specific outcomes, like the State goals, will most likely not be organized along program lines. Rather, for a county to enhance outcomes in a particular area, it will need to link services into a meaningful strategy. For example, an outcome related to increasing the level of safety of children within their families might require strategies that crosswalk preventive, child protective, and domestic violence activities.

An outcome must be expressed in a measurable change in the status of individuals or groups of individuals. An example of an outcome statement might be:

"Increase by 20% the number of frail elderly who remain in community-based housing after they are no longer able to maintain their own households."

A statement that would NOT meet the definition of an outcome would be:

"Increase by 20% the number of community workers available to visit the frail elderly."

The county is not required to have a one-for-one match between county outcome statements and State goals. A county may have more than one outcome for a single State goal. Conversely, a county may have an outcome that may relate to more than one State Goal. It is expected that taken together, the county outcomes will address all of the State goals for Family and Children services, and at least two of the Adult Services goals.

Based on a county's assessment, its outcomes and strategies may be targeted to one or more populations or segments of the county. For example, the greatest increase in the incidence of children returning to foster care in a county may be among children aged 10 through 12; or the incidence of domestic violence may be extremely high among workers in a major industry that is undergoing reorganization and down-sizing. The county might appropriately focus its outcomes and strategies on these findings.

Measurable Indicators

Outcomes will be linked to one or more measurable indicators that will be used to track progress in meeting the outcome. The indicators may be drawn from data produced by a Department supported system, a local data collection procedure, or through some sampling technique described in the plan.

For example, if a county sets as an outcome:

Eighty percent of youth leaving foster care to their own responsibility will be either self-supporting or attending a vocational or post-secondary educational program 2 years after discharge.
Indicators might be based on:

- a random survey of former foster youth; OR,
- A cross-match of CCRS discharge data and Public Assistance data; OR,
- A county-developed system for tracking youth on supervision.

Strategies

Strategies are the activities the district proposes to undertake in order to achieve the county outcome(s). It is at the strategy level that the district will outline proposed changes in service delivery and other activities for linking appropriate resources and programs within the social services system and across public and private agencies.

It is important to keep in mind the length of the planning cycle you have selected. The multiple year cycle offers the county broad flexibility in structuring and prioritizing its actions. The strategies related to one or more of the State goals and county outcomes may commence in the second, or later year of the plan cycle (depending on the length of the planning cycle the county sets for itself). This allows the county to allocate finite resources while acknowledging multiple priorities. It also recognizes that the strategies, even across goal statements may be interrelated, and best addressed sequentially.

For each outcome, the district is asked to provide an overview of all of the strategies it intends to employ over the course of the planning cycle. It is expected that strategies proposed for later years in the plan cycle may still be in formative stages. Only for those strategies that will commence in 1995 is the county required to provide the additional information discussed below.

For strategies to be initiated in 1995, the district should provide information on proposed changes in services, - in terms of service types, approaches, and changes in capacity levels. Strategies should define the roles to be played by district staff, other providers and community organizations and other local district units/offices in order to assure that the desired enhancement is accomplished.

In addition, a strategy may call for a realignment of staffing or organizational design. Such information should be presented as part of the strategy. Please note that a separate organizational chart is no longer a required section of the plan. However, the district is responsible for ensuring that an accurate staffing chart is on file with the Department as required for the Random Moment Survey.

A strategy may also focus on the development of mechanisms for collaborative planning and service delivery. For example, as part of reaching an outcome related to keeping youth within their own community, a district may seek to improve the level of cooperation and collaboration with local schools through the establishment of a school/local district consortia.

Let us continue on with the example started earlier concerning the self-sufficiency of foster care youth. We are presuming in this example that the needs assessment noted that few foster care youth had early positive work experiences. Among the county strategies might be the following:

Strategy 1. The county will create a job development program for
summer and part-time work opportunities and community service placements. The district and the county employment office will jointly fund this center, which will by December, 1996 reach the following annual utilization levels:

- place and coach 60 youth in community service placements;
- 50 youth in part-time employment during the school year; and,
- 80 youth in summer employment.

Relationship to Service Categories

The purpose of these revised planning guidelines is to shift the emphasis from planning around services to planning for community and client needs. However, in order to ensure a meaningful translation of the plan in to action, it will be important to have a clear understanding of the overall implications for key services across all of the community's objectives and strategies. Appendix C has been reformatted to allow the district to note the relationship between specific service categories and the outcomes and strategies devised by the county. The format in Appendix C is optional. However, the information is required.

C. SHAPING AN EFFECTIVE STATE RESPONSE

For a social services district to commit to outcomes, it must have the necessary State support. Part of the plan must be dedicated to thinking through and requesting State support in the areas of technical assistance, waivers, training and other state interventions. Therefore, social services districts are asked to address the following two new areas relating to necessary State action in describing their response to each outcome statement.

Issues Requiring State Attention or Intervention

Particularly given the emphasis on reformulating child welfare services and practices, it is expected that the implementation of the county plan will require a strong State/ local partnership. The social services districts should identify specific State actions and/or support that will be necessary for the social services district to achieve its outcomes. For example, the district may request assistance in constructing the ability to track a particular indicator. Or, the social services district may require a regulatory waiver in order to establish a proposed program. Or, the social services district may need technical assistance or information on others who have already developed a particular program model. Or, the district may seek support and assistance in developing linkages or collaborative models with other systems, such as schools. The information will shape regional and central office actions on behalf of the county. In addition, a state-wide analysis of these issues will figure prominently in the State's Title IV-B plan.
Shaping a Responsive Staff Development Agenda

Districts are also asked to provide the Department an assessment of the kinds and level of training support that will be needed to implement proposed strategies. For example, if the county is predicting a significant increase in youth coming into care who are HIV+, or is planning to merge the functions of currently distinct staff units over the next two years, the social services district may have related training needs which will need to be met. We seek to promote and strengthen the link between services planning and staff development planning. We strongly encourage the involvement of your staff development coordinator in this process. Department staff from the Office of Human Resource Development are available to assist social services districts in structuring an in-depth training needs assessment. This reference in the plan will not serve as an application for specific training programs, but rather, will give social services districts a more integrated mechanism for defining trends and shaping training priorities for subsequent year(s). It will augment information gathered by the Office of Human Resource Development through other aspects of the training needs assessment process.

D. IMPLICATIONS FOR SPECIFIC POPULATIONS/ PROGRAMS

Domestic Violence

The revised planning approach strengthens the focus on domestic violence. A review of the State goal statements will reveal that an entire goal area addresses prevention and intervention of family violence. It is the Department's intent to support the effort underway across districts to better link domestic violence services with the broader array of services and supports needed to prevent or break the cycle of domestic violence.

Beyond the establishment of county outcomes and strategies, the plan also serves as the mechanism for designating approved providers of non-residential services to victims of domestic violence. An optional format for identifying these agencies is included in SECTION FOUR of these guidelines. Please note that because this is a new planning cycle, agencies identified in the past planning cycle must be listed again. However, once the county plan is approved, this designation will be in force for the entirety of the county's planning cycle unless the county specifically removes that designation or the agency is found to be in substantial non-compliance with Department regulations. In designating an agency as a non-residential domestic violence service providers, the social services district must attest to the fact that this provider meets the standards defined in NYCRR Book 18 Part 462. Such an assurance has been added to the Legal Assurances.

Enhanced Reimbursement for Child Protective Post-Determination Services

Chapter 707 of the Laws of 1988 provides for 75 per cent reimbursement for expenditures above an established maintenance of effort for either or both pre-determination and post-determination child protective services. Districts are free to seek enhanced funding for either pre-determination or post-determination services, or both. Of course, the district may also elect to seek neither source of enhanced funding. The procedures for pre-determination services have been discussed in an earlier section of these guidelines.
Chapter 707 requires that a district seeking enhanced reimbursement for post determination services develop a Community Services Assessment and Plan for the purpose of assessing the quality, availability, and accessibility of both child protective services and preventive services in order to be eligible for enhanced funding for post-determination services. It also calls for the coordination of the child protective services and the preventive services component according to recommendations from the community child welfare assessment and planning committee. The recommendations of the committee must also serve as the basis for the specific priorities and activities set forth in the Community Service Assessment and Plan.

Those portions of the Community Services Assessment and Plan which relate to the provision of mental health, alcoholism, and substance abuse services must be included in the annual plans which are required by mental hygiene law to be submitted as part of the local services or unified services plan.

These requirements, instituted in 1988, were among the early mechanisms for recognizing and drawing linkages between the child protective services and public assistance, mental health, substance and alcohol abuse issues and services. The vital importance of these ties is now so fully understood within the child welfare system that the intent of Chapter 707 is better served by integrating the consultation and assessment requirements into the broader planning strategy.

In a later section of these guidelines on community involvement, the specific public participation requirements required by various sections of Social Services Law are outlined. All of the requirements concerning the composition and processes of the Community Needs Assessment Committee are included in this discussion. Districts are encouraged to integrate the functions of this planning body into broader ongoing planning structures.

Within the technical assistance guidance for conducting a needs assessment for each of the State goal statements are specific sections which must be incorporated into the county's needs assessment if the county is seeking enhanced post-determination funding. In summarizing the findings of the community's needs assessment, those findings that emerged from the assessment questions related to the Community Services Assessment should be designated as such.

Similarly, County outcomes and strategies which are designed to respond to the Community Services Assessment findings should be marked as such. This can be accomplished by using an asterisk or foot note. It is also acknowledged that the findings of the assessment and the resultant outcomes and strategies will most probably be related to and impact upon other programs and priorities within the district. Not only is this acceptable, it clearly demonstrates the progress of the district in developing an integrated service delivery response.

TASA

In reshaping the Consolidated Services, the current TASA planning requirements were also more effectively woven into the overall CSP planning process. One of the Family and Children Goals statements calls for a more coherent look at the needs of two groups of teens at particular risk of
dependency: the TASA-eligible population and teens in foster care. Much research points to the overlap both in the strategies for assisting these two populations, and in the actual individuals who make up these two populations.

The specific TASA planning requirements focus on the strategy to be used for implementing the case management services outlined in the Teenage Services Act. The goal statement places this specific requirement into a more informative context for shaping prevention and intervention efforts for the pregnant, parenting and at-risk population. However, this broader focus must be balanced with a streamlined mechanism for actually reporting any proposed changes in the administration or structure of the county's TASA program. Therefore, the Department has prepared an optional form to report amendments in those aspects of the plan where changes are most likely to be required. The form can be found in the SECTION FOUR of these guidelines. The district is free, however, to submit its revisions in a locally developed format instead.

E. COMMUNITY INVOLVEMENT

Scope

The intent of community involvement or public participation is to provide broad-based information and perspective to the development of the plan. The public hearing continues to be a required part of the process. Social services districts are encouraged to structure and time the hearing to be of maximum benefit to planning. This might include structuring the public hearing as an opportunity for reviewing data during the initial stages of the needs assessment process, or as validly, using it as an opportunity to engage the community in a discussion on the local implications of the State Goal Statements. Districts are also encouraged to use alternative methods and structures for conducting the public hearing. For example, a radio call in show featuring the commissioner and key staff discussing the plan and taking phone calls might reach more community residents than a traditional public hearing.

Consultation and community involvement in the plan's development should not be limited to a single public hearing. Social services districts can gain much from the depth of knowledge available through consultation with all relevant constituents, including the public and private service provider community, schools, other community representatives and the actual consumers of service.

The Department is confident that districts will see the revisions to the planning process as an important opportunity to encourage a greater voice for families, adults and youth who are the actual consumers of services. As you are aware, the community visioning process conducted as part of the Families for Kids ASAP initiative proved to be a powerful tool for gathering input from consumers and providers alike. Technical assistance on implementing such approaches locally is available through Services and Community Development Regional Offices.

In addition to building opportunities to hear from consumers of services, the revised planning process is designed to encourage the development of connections both in the planning process and the implementation stage with
community institutions that are essential to a strength-based community, youth and family development model. Therefore, while continued collaboration with treatment communities is essential, so, too, is collaboration with schools, family support programs, youth development agencies and other such organizations. Similarly, districts are reminded to build on the strengths and insights offered by neighborhood based efforts such as NBA.

We encourage social services districts to tailor community involvement approaches to their local community. For example, developing a liaison with the Community Mental Health Board may be the most effective mechanism for ensuring an effective assessment of the mental health and substance abuse services available to the CPS and child welfare system. Similarly, focus groups or surveys of parents receiving preventive services may inform future program development efforts.

In addition to activities held during plan preparation, it is as important for social services districts to make use of the information and direction gained from consultation and cross-agency involvement that occurs year-round. For example, if representatives of the social services district serve on a Neighborhood Advisory Council within an NBA site or an interagency task force on pre-schoolers with handicapping conditions, relevant discussions and recommendations of these groups can and should be viewed as part of the needs assessment/community involvement aspect of the Consolidated Services Plan. Similarly, if a Youth Bureau-sponsored survey of teens contains valuable information for a county looking to reduce the number of placements through the family court, reflecting these findings within the plan is not only appropriate, it strengthens the county’s capacity to collaborate in identifying and solving problems. In the area of Protective Services for Adults and other Adult Services, social services districts are strongly encouraged to use information obtained at Inter-Agency Task Force or Advisory Committee meetings, as well as from other interagency consultation mechanisms, in the development of outcomes and strategies in response to the Adult Services Goal Statements. The ongoing interagency consultation process should also be used in the implementation and evaluation of a district's outcomes and strategies.

**Legal Requirements**

While local innovation in gaining public participation is encouraged, the following requirements established by statute must be fulfilled:

1. **Public Hearing**

   Section 34-a.3(a) of the Social Services Law requires at least one public hearing to be held at least 15 days prior to submission of the plan to the Department. Section 34-a.3(a) requires the district to advertise the public hearing at least 15 days in advance and the notice of such a hearing must specify the dates and times during the public hearing(s) when the Child Protective Services, Adult Services and Family and Children's Services components of the Consolidated Services Plan are to be considered.

   The local district must make available at the hearing(s) either copies of relevant material provided by the Department or copies of the completed draft plan, depending upon whether the hearing is being used in the development or review phase.
The plan must include:
- the date(s) of such hearing(s);
- how the hearings were publicized (a copy of advertisements and flyers must be attached);
- the number of persons who attended;
- a listing of the organizations/agencies represented at the hearing; and
- a discussion of the issues raised and the impact on the service delivery system.

(2) Protective Services for Adults - Agency Consultation

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

Some of these agencies and organizations from these mandated areas are listed below.

**Aging:** Representatives from the area agencies on aging, senior citizen centers and voluntary organizations which provide services to the elderly population.

**Health:** Representatives from the Public Health Department including public health nurses and the environmental staff of the Health Department, Title XIX funded home care providers and other medical and health service providers.

**Mental Health:** Representatives from the County Mental Health Department, psychiatric and developmental centers, community support systems core agencies, and other organizations and agencies involved in the provision of mental health services to mentally ill, mentally retarded, and developmentally disabled adults.

**Legal:** Representatives from legal aid organizations, the courts, the legal advocacy attorney from the area agency on aging, the County Attorney's office.

**Law Enforcement:** Representatives from the State Police, city, town or village police force, the Sheriff's department and the District Attorney's office.

This section must include:
- specific agencies represented;
- number of meetings held, or frequency of meetings if they are held on a regular basis, or dates of meetings; and
- a discussion of the issues raised and the impact on the service delivery system.

(3) Child Protective Services (CPS)

Section 34-a.4 and Section 423 of the State Social Services Law require that in the development of the Child Protective Services component of the Annual Implementation Report local districts must consult with local law enforcement agencies, the family court, and appropriate public and voluntary
agencies including the societies for the prevention of cruelty to children. Regarding consultation with family court, the family court judge or a designated representative must be involved.

This section must include:
- specific agencies represented;
- number of meetings held, or frequency of meetings if they are held on a regular basis, or dates of meetings; and
- a discussion of the issues raised and the impact on the service delivery system.

(4) Child Welfare Services

Sections 34-a.4 and 409-d of the State Social Services Law require that in the development of the Preventive Services for Children, Foster Care Services for Children and Adoption Services components of the Annual Implementation Report, the districts must consult with other government agencies concerned with the welfare of children residing in the districts, authorized agencies and other concerned individuals and organizations. Examples of these agencies/organizations include: Youth Bureaus or Boards, Departments of Probation, Family Court judges, mental health agencies and legal and law enforcement agencies.

This section must include:
- specific agencies represented;
- number of meetings held, or frequency of meetings if they are held on a regular basis, or dates of meetings; and
- a discussion of the issues raised and the impact on the service delivery system.

(5) Chapter 707 Enhanced Reimbursement for Post Determination Services

The legislation calls for the establishment of a Community Needs Assessment and Planning Committee. Outlined below are the legislative requirements for the composition of this committee. Please note: Districts are not required to establish a new committee for protective and preventive planning if a functioning committee exists which meets the requirements for membership and can be approved for appointment by the county executive (the mayor in New York City).

The committee must be appointed by the chief executive officer of the county or the chairperson of the legislative body in those counties without a chief executive officer. In New York City, the mayor must appoint the members. The individual responsible for appointing the committee must appoint one of the members as its chair.

The committee must consist of the following.
- commissioner of social services or the commissioner's designee;
- director of community services or the director's designee, or in those counties where separate authorities exist for mental health/mental retardation services and for alcoholism services/substance abuse services, the equivalent administrative heads or their designees;
members of other county agencies which provide community services or supervise, regulate or certify organizations or agencies which provide community services; and
representatives of public and private organizations and agencies providing community services.

Documentation

As part of the Community Involvement section of the plan, the district must include information on the composition of the Community Needs Assessment and Planning Committee, or specifically designate the structure or committee that has been designated to serve as the Community Needs Assessment and Planning Committee. This should include a listing of membership on the committee. The Community Involvement Section of the plan must also provide a clear summary of the strategy(ies) employed by the committee in conducting its needs assessment.

The plan document must contain documentation of the date and attendees of the forum(s) held to meet each of the public hearing requirements listed above. The documentation of community involvement should also include the agencies and organizations that participated in various planning activities. Much of the documentation of the issues raised through these community involvement/ public participation efforts should be reflected in the findings of the needs assessment process for each goal. The district is free to construct it summary of community involvement activities and what it learned from these activities in whatever format is most appropriate. However the district is encouraged to limit redundancy in the document caused by repeating in a section on community involvement information that is clearly summarized in other sections of the plan.

The district is encouraged to emphasize in its summary of community involvement a description of activities the district is planning for the remainder of the planning cycle. Thus, the State's review of the plan can be prospective. Of even greater import, the emphasis on future opportunities for input allows the community stakeholders to anticipate and ready themselves for ways that they might have to continue to stay involved.
SECTION THREE

TECHNICAL ASSISTANCE

CONTENTS

LIST OF TECHNICAL ASSISTANCE CONTACTS FOR EACH COUNTY

TECHNICAL ASSISTANCE MATERIALS FOR CONDUCTING NEEDS ASSESSMENTS FOR STATE GOAL STATEMENTS
<table>
<thead>
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<td>Betsy Fischer**(518) 432-2758</td>
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<tr>
<td>Washington</td>
<td>Mary Fitzgerald (518) 432-2778</td>
<td>Michael Monahan</td>
</tr>
<tr>
<td>Wayne</td>
<td>Ross Hayman (716) 238-8201</td>
<td>Kathleen Crowe</td>
</tr>
<tr>
<td>Westchester</td>
<td>Ellen Lally (212) 804-1195</td>
<td>Irv Abelman</td>
</tr>
<tr>
<td>Wyoming</td>
<td>Gwendolyn Bennett (716) 847-3144 or 3145</td>
<td>Michael Monahan</td>
</tr>
<tr>
<td>Yates</td>
<td>Jim Schmitt (716) 238-8201</td>
<td>Kathleen Crowe</td>
</tr>
<tr>
<td>NYC</td>
<td>Ellen Lally (212) 804-1195</td>
<td>Irv Abelman</td>
</tr>
<tr>
<td>St. Regis</td>
<td>Bill Dorr (518) 432-2753</td>
<td></td>
</tr>
</tbody>
</table>

**Adult Services Phone Numbers**

<table>
<thead>
<tr>
<th>Irv Abelman</th>
<th>(212) 383-1755</th>
<th>Thomas Burton</th>
<th>(518) 432-2987</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kathleen Crowe</td>
<td>(518) 432-2985</td>
<td>Michael Monahan</td>
<td>(518) 432-2667</td>
</tr>
<tr>
<td>Janet Morrissey</td>
<td>(518) 432-2864</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Counties will complete a needs assessment for each State Goal Statement. This attachment provides a general discussion of the scope and intent of each of the State Goals Statements. The intent of these discussions is to provide guidance for counties as they conduct the needs assessment phase of the Consolidated Services Plan.

For each goal statement, a general narrative section attempts to convey the implication of this goal statement for the Department's mission. This is followed with suggestions for data available through State and or local sources as well as data the county may seek to collect or estimate that would inform the needs assessment process. To create an overall context for the needs assessment, the section immediately following provides more general guidance and suggestions.

General Guidance:

The needs assessment process will differ greatly across counties. The suggestions offered throughout this document on pertinent data and questions to explore are not intended as a script for the local planning process. They are intended to provide a basis for helping you decide what data you might wish to collect or analyze. Whenever possible, resources for data are included in the discussion.

In many instances, the county will not have access to data related to all of the issues presented in this document. In those instances, it is hoped that the material presented will provide assistance in constructing questions to be pursued through local focus groups, consultation with community experts, and consultation with consumers.

Above all, counties are encouraged to build upon other planning processes within their communities. In addition to the county-wide planning processes conducted by other public systems, such as the Youth Bureau, Mental Health, Job Training, and others, there are other targeted planning activities that will contribute to the needs assessment process. These include PINS Diversion, Adolescent Pregnancy Prevention and Services, and the NBA Strategic Neighborhood Action Plan. All of these plans have a needs assessment section and in many cases will provide data at a neighborhood or community-based level.

Just as New York State encompasses extremely diverse needs and conditions, level of needs may vary greatly across communities within a county. Thus, simply looking at county-wide data may be of limited assistance in truly understanding issues and mapping an effective strategy. For example, a county's overall foster care placement rate may be relatively low. This county-wide figure may mask that the placement rate within a particular municipality may far exceed the county rate, and indeed the Statewide rate. Thus, more closely examining the contributing causes to placement in this particular community in contrast to other sections of the county may provide very different information than a general county-wide review. Such a review might lead to targeting unique activities to reduce placements or develop more community based placements within this particular community.
In addition to looking at geographic subsets, the county may be interested in looking at differences in needs and services across ethnic populations. For example, are preventive services as readily available and effectively used in preventing placements among African American families as for Hispanic families in a particular county? The same principle holds true for other variables such as the age and other demographics.

It is also important to look at differences across different parts or groups within the county as the planning process moves towards constructing outcomes and strategies. For example, if the county data shows an increase in emergency child protective removals, the planning committee may want to take a look at whether this increase is concentrated in any identifiable patterns. For example, is most of the increase accounted for by cases involving parental drug abuse? Or is the growing client population related to teen-headed families? Does this have any implications for who might be brought into the planning process to ensure the development of an effective strategy and/or linkages?

It is acknowledged that current data systems provide limited assistance in providing data on such fine cuts. However, anecdotal data within the county might lead the county to review sample data from a particular perspective.

Here are other general questions you might wish to consider as you evaluate your county's status in relationship to each of the goals statements.

- Are there patterns related to the age of the children, families or adults involved?
- Are problems and or issues concentrated in specific sections of the county? What are some of the characteristics that distinguish the highly effected sections of the county from other less effected county? Do any of these characteristics have implications for developing effective strategies?
- Do the demographics of those using crisis oriented services significantly differ from those referred to services along an earlier point of the continuum. For example, is it more likely that families whose initial interaction with the child welfare system are through the receipt of preventive services are from a different part of the community than those whose initial interaction involves an emergency removal? Do these demographic differences have any implications for designing or targeting services?

There are some indicators that provide an important backdrop for assessing the overall status of a community. These are indicators that are highly associated with a broad range of the issues and problems which these goals address. They are data that give us some sense of the frequency of:

- families with children that are poor;
- families headed by very young parents;
- families headed by a single parent due to either marital disruption or out of wedlock birth;
- crime levels within the community;
- average educational levels of new parents;

(The first four indicators are addressed in New York State's Kids Count. The final indicator can be obtained through Vital Statistics of New York State issued by the New York State Department of Health)
In addition to examining the goal statements from the perspective of the children and families in need, it is also important to assess the current network of services and supports currently in place. Outlined below are a sample of the kinds of questions that the county might consider factoring into its assessment for each of the State goal statement.

- What are the utilization levels of existing services related to each goal statement?
- Is there any information on differences between families for whom current services are effective and those for whom they are not? Does this information provide any insight into developing or refining strategies?
- Is there any data on the perception of the consumers of these services about the adequacy and appropriateness of services they have received?
- Are services located in response to where they are most needed?
- Are there specific groups that are not effectively served within the current service network? Groups might be defined by an ethnic or cultural affiliation, an age group (pre-schoolers, teens, etc.), or other defining characteristic (such as the gay and/or lesbian community)
FAMILY AND CHILDREN SERVICES

Goal #1 FAMILIES, INCLUDING NUCLEAR, EXTENDED, AND ADOPTIVE FAMILIES ARE STRENGTHENED AND SUPPORTED TO BE ABLE TO RAISE, NURTURE, ENSURE THE CHILDREN'S CONNECTIONS TO THEIR HERITAGE, AND PLAN FOR THEIR CHILDREN

A central tenet of our society and the child welfare system is that families are the single best structure for raising and nurturing children. This belief is best realized if families have a similar sense of support and nurturing from their extended family, community and other social institutions. The child welfare system has historically been expected to intervene in families when it appears that they are unable to meet their basic obligations to consistently provide a safe and nurturing environment for their children.

While this basic expectation must continue, this outcome speaks to a commitment to attempt to provide support and skills to families, especially those at risk, thus allowing them to more adequately fulfill their own obligations to their children. This outcome also speaks to the need to acknowledge both the special strengths and needs of families formed through adoption, as well as the supports needed by extended family members who step in to temporarily or permanently assume parenting responsibilities for kin. Finally, this outcome seeks to highlight the role and support needs of birth parents whose circumstances have resulted in a personal or legal determination that they relinquish their role as primary caregiver to their biological child.

As the county assesses its ability to meet this outcome, the following data may prove helpful in forming some basic parameters:

- The percentage of foster care cases for which preventive services were provided prior to placement. (MAPS page 16)
- The percentage of preventive cases for which foster care was subsequently required. (MAPS page 8 provides a frame of reference for examining this indicator. The examination of previous years' MAPS data will also help in establishing trends.)
- Kinship care as a percentage of all foster care placements. (MAPS page 18)
- The number of adoptions with subsidy. (MAPS page 26 and CCRS Summary characteristics page 4)
- The number of children entering foster care from adoptive families.
- Service delivery patterns of such family support services such as housing subsidy, respite, etc.
- PINS and J.D. diversion rates. (County PINS Diversion Plan, County Probation Department DP30)
- The number of voluntary surrenders of parental rights.
To actually assess the effectiveness of current efforts and to better target additional efforts, the county may want to construct some statistical and/or anecdotal information on the following:

- Degree to which the district supports and encourages extended family involvement in serving at-risk families (both formal and informal)
- The degree to which families are empowered to make decisions about their children.
- The level of family participation in service planning.
- Degree to which the demographic targeting and provision of preventive services matches demographic data on foster care admissions. (this might include geographic, cultural and other factors that define community)
Goal #2 CHILDREN WHO ARE REMOVED FROM THEIR BIRTH FAMILIES ARE ENSURED STABILITY, CONTINUITY, AND AN ENVIRONMENT THAT SUPPORTS ALL ASPECTS OF THEIR DEVELOPMENT.

When children are removed from their birth families, the system should be supportive and helpful. Its role should be to minimize separation where return is the goal, and to speed the development of permanent arrangements where return home is not possible. In general, these goals can be achieved through maximizing contact between the child in placement and her birth family, where possible and appropriate, keeping placed siblings in shared placements, expecting that foster parents work with and support biological parents, and including both the foster and birth families in the case planning process.

The purpose of this area is to promote stability in the out-of-home placement. Disruptions and moves represent added trauma. For temporary care, placement should be as least intrusive and disruptive as possible. Possible areas to measure include:

- Length of Stay (MAPS page 17, CCRS Detailed Demographics)
- Number of moves or re-placements for children in care (MAPS page 15, CCRS Detailed Demographics)
- Geographic proximity to birth family
- Shared placements with siblings (MAPS page 15)
- Level of care (MAPS page 18)
- Contact with birth family
- Foster parent contact with birth family

More qualitative measures that might be addressed through a review of cases or discussions with case workers, foster parents, birth families and others:

- Quality of the contact between foster and birth parent
- Quality of the involvement of foster and birth parents in the planning process
- Shared advocacy in schools involving foster and birth parents

Developmentally, foster care should be value-added. This means that personal and physical development are attended to. For children, many of the relevant measures are likely to come from school and health related areas:

- Health status and currency of medical examinations and immunizations
  - School attendance
  - Grade-level achievement

From a policy perspective, formal practice statements that support these goals are indicative of a district that has actively embraced these ideals. Among the statements that would indicate adherence:

- A clear statement of expectation around the foster parents' role in birth family preservation
- Agency practice that includes shared training of foster parents and workers
For children who cannot return home, the system should be able to move children expeditiously through to a permanent home. Measures include:

- Proportion of foster parents who adopt (MAPS page 25 and AMS)
- Timeliness of adoption milestones (MAPS page 24, 25, and 26 and AMS)
- Measures of pre- and post-finalization disruptions

For all families, birth or adoptive, continued support from the agency is often central to continued stability. Measures might include:

- Use of preventive services as after care
- Active referral to community-based services
- Use of post-finalization services
Goal #3 VICTIMS OF FAMILY VIOLENCE, BOTH CHILD AND ADULT, WILL BE AFFORDED SAFETY AND SUPPORT NECESSARY TO ACHIEVE SELF-SUFFICIENCY (ADULT), AND/OR TO ENSURE THEIR CONTINUED GROWTH AND DEVELOPMENT (CHILD).

The concept of Family Preservation in New York State expands well beyond the prevention of foster care to ensuring that families are safe, nurturing environments for children and their caretakers. The prevention and intervention of family violence is a central component of New York State's approach to preserving and strengthening families. The victims of family violence are both children and adults. Thus in assessing a county's capacity to alleviate the crisis of family violence, it is essential to examine the services and supports for adult victims of domestic violence as well as the victims of child abuse and maltreatment.

Among the data that may be useful to a community in documenting the impact of family violence in its own neighborhoods and its capacity to respond are the following:

Adult Victims:

- What are the current utilization levels for residential and non-residential domestic violence programs? (Domestic Violence Monthly Data Reports)
- How many of those served by these programs have sought services more than one time because of repeated incidences of abuse?
- How many domestic violence victims that seek services are not served? What are the reasons? (Domestic Violence Monthly Data Reports)
- What are the arrest statistics for domestic violence perpetrators?
- What percentage of domestic violence victims ultimately seek public assistance to provide the financial stability to leave a domestic violence situation?

Child and Family Focus:

- What are the rates of indication for child abuse reports generated within your county? (MAPS page 2 and State Central register Summary Characteristics page 1)
- What percentage of cases are closed at indication with no service provision? (MAPS page 5)

The implementation of Risk Assessment provides counties with a more objective capacity to make determinations of immediate safety and continuing risk in cases of abuse and maltreatment. While there is no systematic collection of data on the findings of the application of the Risk Assessment framework to individual cases, an examination of the county's experience with Risk Assessment has the potential of providing important guidance to the planning process. The county is strongly encouraged to review a sample of cases for which the Risk Assessment Model has been employed, or to convene a discussion of workers employing the risk assessment framework to explore the following questions:
o What safety issues are you having difficulty addressing, thus necessitating an emergency removal?

o Are patterns emerging related to addressing safety issues that suggest insufficient resources or differential accessibility of necessary resources?

o The risk assessment framework contains 22 risk elements. Are there patterns emerging in the needs and services that the county requires in order to reduce the level of risk for families identified to the system?

A county seeking initial or continued enhanced reimbursement funding for post-determination child protective services MUST include the following issues into its needs assessment approach. NOTE: While the guidance for meeting the post-determination needs assessment requirements are included under only one goal statement, the county may reasonably and appropriately relate the findings to more than one of the goal statements. In such instances, the county is cautioned that it is essential to denote the connection of findings, outcomes and strategies across different goals to the post-determination requirements, thus eliminating any confusion about the county's eligibility for these enhanced funds.

In order to establish and maintain eligibility for post-determination child protective services funding, districts are required to establish specific criteria for conducting the assessment of services quality, availability, and accessibility for child protective and preventive clients. The selection of the criteria of need will be left to the discretion of the local district in consultation with the community child protective services assessment and planning committee to assure their applicability to a particular district's community. The services areas which must be assessed include:

1. assessment, diagnosis and treatment for alcoholism and substance abuse;

2. mental health assessment, diagnosis and treatment; and

3. protective services and preventive services for children, and public assistance and care.

The assessment must identify issues of availability and accessibility and include a discussion of the mechanism for interagency referrals. In addition, each district's committee must identify some measures of quality which will receive support across agency lines.
Goal #4 ADOLESCENTS IN FOSTER CARE AND PREGNANT AND PARENTING TEENS IN RECEIPT OF PUBLIC ASSISTANCE WILL DEVELOP THE SOCIAL, EDUCATIONAL, AND VOCATIONAL SKILLS NECESSARY FOR SELF-SUFFICIENCY. (Districts are encouraged to broaden this goal to encompass all pregnant and parenting teens, regardless of their association with public assistance.)

The maturation into self-sufficient adulthood is the culmination of developmental stages and skill acquisition across a number of key areas. Most often, youth are shepherded and nurtured through those stages in a permanent family and stable community environment. However when childhood or adolescence is disrupted by the need for a foster care placement, or the reality of an adolescent pregnancy, the need for the youth to accomplish these developmental stages does not diminish. Failure to develop the necessary skills and competencies puts these young adult at significant risk of extended public dependency, either through public assistance, homelessness, or incarceration.

A youth's foster care experience, regardless of goal, must facilitate their continued growth and attainment of the social, emotional, educational and vocational skills at a level appropriate to their age and development. Thus, for the child returning home or forming a new adoptive family, the time in care does not represent a lag in this development. For youth who will leave care to their own responsibility, the child welfare system must prepare a youth for a future independent of the public assistance system. For the teen parent in receipt of public assistance, the movement beyond public dependency must be realized through intensive efforts to accomplish these same developmental tasks that were interrupted by too early parenting.

As a county assesses its progress in meeting this outcome the following data may be helpful to frame some basic parameters.

- The number of adolescents in foster care (MAPS page 14 and CCRS Summary Characteristics page 3)
- Number of adolescents on trial discharge (CCRS Summary Characteristics page 3)
- Profile of the discharge arrangements for teens leaving care.
- Number of TASA-eligible youth
- Number of youth active on TASA caseloads
- The rate and number of adolescent pregnancies and births for females who have not reached their twenty first birthday. (Vital Statistics)

To actually assess the effectiveness of current efforts and to better target additional efforts, the county may want to construct some statistical and/or anecdotal information on the following:

- High school/ GED attendance and completion rates for Foster Care youth and TASA clients.
- Percentage of foster care youth continuing on to post-secondary education (college or vocational training).
- Likelihood of a former foster care youth subsequently receiving public assistance (immediately after discharge; two years after discharge)
- Earning capacity of former foster care youth and their success in maintaining employment.
- Stability of housing arrangements of former foster care youth.
- The length of stay on public assistance for TASA clients.
- Job-entry rates for TASA clients.
- Rate of repeat pregnancies and births among TASA clients.
ADULT SERVICES GOAL STATEMENTS

In determining its ability to achieve each of the adult services goal statements, each district must assess the status of its adult services delivery system, including the capabilities and responsiveness of other key services providers and other units within the local department of social services whose support and cooperation is essential for the effective delivery of services to impaired adults. A district's plan of action for achieving each of the adult services goal statements should specify the roles to be played by adult services staff, other providers and other local district units/offices in order to assure that the desired enhancement is accomplished. In assessing its ability to achieve one or more of the adult services goal statements, a district may determine that it already is operating at an optimal level with regard to a particular goal statement. In these situations, a district must provide a sufficient explanation supporting its contention and indicate the actions it will undertake to maintain its performance level. However, a district must develop outcomes which result in program enhancements for at least two of the adult services goal statements. If a district identifies a need for program enhancements with regard to more than two of the goal statements, but feels it cannot implement program enhancement outcomes for more than two goal statements in the first year of its plan, it may defer action on these areas to subsequent years of the planning cycle.

Presented below are the adult services goal statements and some general guidelines that districts should use in assessing their ability to achieve each of the adult services goal statements.
Goal #1 IMPAIRED ADULTS WHO ARE ABUSED, NEGLECTED OR EXPLOITED BY OTHERS, WILL BE IDENTIFIED, HAVE THEIR SITUATION THOROUGHLY INVESTIGATED, AND BE PROTECTED.

In assessing its ability to achieve this goal statement a district should:

- evaluate, in conjunction with the major referral sources in the community, the effectiveness of its public education and outreach initiatives in identifying impaired adults living in the community who are being abused, neglected and exploited by others; and

- evaluate the success of its investigative and intervention strategies in addressing the services needs of abuse victims and in preventing the reoccurrence of abuse, neglect and/or exploitation of impaired adults by others in the least restrictive manner possible.

- In evaluating the success of its investigation and intervention strategies, each district should assess the capabilities of its adult services staff, as well as the capabilities and responsiveness of other providers, including but not limited to the police, the office of the district attorney, the courts, medical and mental health professionals, the office for the aging and legal staff of the local department of social services.

Goal #2 IMPAIRED ADULTS WHO ARE AT RISK OF HARM; UNABLE TO MAKE DECISIONS ON THEIR OWN BEHALF; AND REFUSE NECESSARY SERVICES, WILL BE ASSESSED AND SERVED PURSUANT TO THE APPROPRIATE LEGAL INTERVENTION.

In assessing its ability to achieve this goal statement, local district staff should:

- evaluate its ability to identify impaired adults requiring legal intervention and its ability to appropriately utilize each of the legal interventions authorized by law;

This evaluation should assess the knowledge and capabilities of adult services staff, the capabilities and responsiveness of other providers, most notably medical and mental health professionals, the availability of legal support and the district's relationships with the courts.

- review their written procedures for serving involuntary Protective Services for Adults (PSA) clients to determine their continued applicability in view of the new guardianship process set forth in Article 81 of the Mental Hygiene Law.
Goal #3  THE MENTAL HEALTH, DEVELOPMENTAL, HEALTH AND SOCIAL SERVICES NEEDS OF IMPAIRED ADULTS WILL BE THOROUGHLY ASSESSED TO ASSURE THAT APPROPRIATE SERVICES PLANS ARE DEVELOPED.

In assessing its ability to achieve this goal statement, a district should:

- review the capabilities of its adult services intake and undercare staff, as well as the capabilities and responsiveness of other services providers, and other units with the local department of social services to effectively assess the needs of impaired adults and provide necessary services in the least restrictive manner possible;

- evaluate, along with major referral sources, its public education and outreach initiatives to assess their sufficiency to assure the identification of impaired adults who may be in need of services.

Goal #4  ADULTS WHO ARE UNABLE TO LIVE ON THEIR OWN WILL BE PLACED IN APPROPRIATE RESIDENTIAL CARE FACILITIES INCLUDING SMALL HOME-LIKE SETTINGS.

In assessing its ability to achieve this goal statement, a district should:

- evaluate the capacity of the adult services network to identify impaired adults in the community in need of residential care, to assure that their care needs are accurately assessed and appropriate placements are made, and to utilize small home like settings, such as Family Type Homes for Adults, to the fullest extent possible.

- In assessing this area, a district should evaluate the capabilities of its own staff, the capabilities and responsiveness of other agencies or units of the district which are involved in arranging for residential placements, and the adequacy of its Family Type Home for Adults program and community awareness about this placement option.