

New York State's
Child and Family Services Plan
FY 2010 - 2014
Annual Progress and Services Report
Submitted
June 2013

Application for Funding:

- **Stephanie Tubbs Jones Child Welfare Services (CWS)...
Title IV-B of the Social Security Act, Subpart 1**
- **Promoting Safe and Stable Families (PSSF)...
Title IV-B of the Social Security Act, Subpart 2**
- **Chafee Foster Care Independence (CFCIP) and Education and
Training Vouchers (ETV) Programs ...**

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**Vision:
Safety, Permanence, and Well-Being
For
New York's Children and Families**

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Mission Statement

The New York State (NYS) Office of Children and Family Services (OCFS) serves New York's public by promoting the safety, permanency and well-being of our children, families and communities. We will achieve results by setting and enforcing policies, building partnerships, and funding and providing quality services.

Agency Overview

OCFS serves as the Title IV-B Agency for NYS. OCFS is dedicated to improving the integration of services for New York's children, youth, families and vulnerable populations; to promoting their development; and to protecting them from violence, neglect, abuse and abandonment. The agency provides a system of family support, juvenile justice, child care and child welfare services that promote the safety and well-being of children and adults.

OCFS is responsible for programs and services involving foster care, adoption and adoption assistance, child protective services including operating the Statewide Central Register for Child Abuse and Maltreatment, preventive services for children and families, and protective programs for vulnerable adults. OCFS is also responsible for the functions performed by the State Commission for the Blind and Visually Handicapped and coordinates state government response to the needs of Native Americans on reservations and in communities.

OCFS provides oversight and monitoring of regulated child care (family day care, group family day care, school-age child care and day care centers outside of NYC), legally exempt child care, child care subsidies, child care resource and referrals, and the Advantage After-School Program, and also provides services and programs for infants, toddlers, preschoolers, and school-age children and their families.

OCFS is responsible for all elements of state operated juvenile justice programs, including administering and managing residential facilities, a day-placement center, and a reception center for male and female adolescents, adjudicated as juvenile delinquents and juvenile offenders by family and criminal courts.

OCFS operates 13 facilities, one reception center, one community residential home, and one day-placement center for youth placed in the custody of the OCFS Commissioner.

There are also 12 Community Multi-Services Offices (CMSO) and four satellite offices, statewide, that are responsible for the provision of services to the youth and his/her family from day one of OCFS placement. OCFS works closely with municipalities such as local social services districts and county youth bureaus so that adequate youth development services and programs are available at the local level.

The Executive Office of OCFS, encompassing the Office of the Commissioner, the Office of the Executive Deputy Commissioner, the NYC Executive Office, the Office of the Ombudsman, the Office of Equal Opportunity and Diversity Development, and Executive Services, provides overall leadership, management, coordination, and administration of agency operation and mission-driven priorities.

OCFS divides its responsibilities into two main areas: program and support. The program divisions/offices include: Division of Child Care Services (DCCS), Division of Child Welfare and Community Services (DCWCS), Division of Juvenile Justice and Opportunities for Youth (DJJOY), and the Commission for the Blind and Visually Handicapped (CBVH). The support divisions/offices include: Division of Administration (Admin), Division of Legal Affairs (Legal), Division of Information Technology (IT), Office of Communications (Communications), Office of Strategic Planning and Policy Development (SPPD), and the Office of Special Investigations (SI).

OCFS maintains regional offices in Buffalo, Rochester, Syracuse, Albany, Spring Valley, Long Island, and New York City to support agency programs and partnerships with stakeholders and providers.

Introduction

OCFS was established in 1998 to improve, strengthen and integrate services to the State's children, youth and other vulnerable populations. The creation of OCFS responded to a growing recognition of the complexity and interrelatedness of today's problems and solutions. All children, youth and adults require the support of their families and communities. Fundamental to securing the safety and well-being of all State residents is the ability to access supports, without regard for funding sources, service capacities, or having to reconcile differing approaches to services among providers.

In addition to directly providing services, OCFS funds and supervises local social services districts, youth bureaus, child care programs and community and voluntary agencies in directly providing or collaborating with other agencies to provide a wide range of developmental, preventive and remedial supports to New York State's citizens. To succeed, OCFS must focus on efficiently and effectively maintaining and strengthening the self-sufficiency of families.

Under the continued leadership of Governor Andrew M. Cuomo and Commissioner Gladys Carrión, OCFS invests in, develops, and monitors programs that promote the self-sufficiency of families and individuals. The Governor has championed an agenda that encourages cooperation and collaboration between state agencies in an effort to maximize the benefit of public funds allocated to multiple service delivery responsibilities. A main

focus of this plan will be to demonstrate how those collaborations work and, more importantly, how they benefit the children and families of NYS.

OCFS continues to specify and demand that outcomes be established and met for its substantial investment in the community. The ability to measure outcomes and define success continues to be a top priority for OCFS.

OCFS participates in many exciting initiatives that are detailed in this report. They reflect the efforts of countless committed professionals, families, volunteers and the communities in which they live and work. They reflect child care, youth development, juvenile justice, adult and child welfare and other services that are the responsibility of this agency. Most importantly, however, they reflect the diverse character and needs of the vulnerable populations found within the diverse regions of NYS.

OCFS serves to improve and integrate efforts to address the needs and build on the strengths of the State's children, youth and other vulnerable populations. OCFS responds to a growing recognition of the complexity and interrelatedness of today's problems and solutions. The ability to access supports without regard for funding sources, service capacities, or having to reconcile differing approaches to services among providers is fundamental to protecting the safety and well-being of all state residents.

The OCFS mission is to "serve New York's public by promoting the well-being, safety and permanency of our children, families and communities. We will achieve results by setting and enforcing policies, building partnerships, and funding and providing quality services." This mission statement guides OCFS' administration of public funds aimed at meeting its multiple service delivery responsibilities. OCFS is responsible for the administration and oversight of a continuum of human development, prevention, early intervention, protective, out-of-home placement and community re-integration services. State law establishes a number of mandates for OCFS, both direct responsibilities and those that the local social services districts must provide under the supervision of OCFS. Direct responsibilities include:

- Providing fiscal support, technical assistance and oversight to municipal youth bureaus for the planning, coordination and funding of youth development services for the under-21-year-old population;
- Receiving and tracking through the Statewide Central Register of Child Abuse and Maltreatment of suspected reports of child abuse and maltreatment;
- Providing fiscal support and oversight to the statewide juvenile detention system;
- Coordinating the provision of training and technical assistance to voluntary agency and local government agency staff;
- Operating and overseeing programs designed to foster independence of the blind and visually handicapped
- Licensing and supervising voluntary foster care agencies, domestic violence and child care providers;
- Operating the NYS Adoption Service including adoption subsidies, photo-listing, and administration of the Interstate Compact on the Placement of Children;

- Administering the federal Indian Child Welfare Act; and
- Providing for the care and treatment of youth placed by the courts in OCFS custody.

OCFS supervises local administration of child welfare and adult protective services by 57 counties, New York City and the St. Regis Mohawk Tribe. Services provided include child protective services, preventive services, foster care, adoption, protective services for adults, and child day care.

The following principles guide OCFS work:

SERVICES SHOULD BE DEVELOPMENTALLY APPROPRIATE. OCFS recognizes the importance of the stages of human development in guiding service delivery. The cognitive, emotional, physical and social skills of children, youth and adults are fundamental to their need for and ability to benefit from services. Recent studies in the separate fields of child development and youth development address the value of focusing on competencies rather than deficits. OCFS is committed to the use of strength-based approaches, with a focus on child and family strengths as opposed to problems or pathology. Building on individuals' strengths facilitates the efficacy of all services.

SERVICES SHOULD BE FAMILY-CENTERED AND FAMILY DRIVEN. Supporting families that foster the healthy development of their members requires serving the family as a whole, as well as individuals within the family. Research conducted on the development of children, from newborns through teens, emphasizes the crucial role of parents in the successful cognitive, emotional, physical and social development of their children. In fact, with the support of their communities, most families meet and exceed the expectations put on them. Strategies for family-centered services require family members, including youth, to participate actively with other stakeholders in identifying the design of community based family supports. OCFS is committed to the practice of planning for one child and family at a time, based on individual strengths and needs, not program categories.

SERVICES SHOULD BE COMMUNITY-BASED. Communities play a critical role in supporting the growth and development of their children and the self-sufficiency of their adults and families. The involvement of community-based organizations, schools, businesses, childcare providers, health care facilities, faith-based organizations, law enforcement and courts promotes culturally competent supports for children, youth, adults and their families in their neighborhoods. Development of comprehensive, collaborative, integrated, long-term community-based programs that address the full spectrum of child, youth, adult and family needs represent a wise investment of resources.

The diversity of New York State dictates that OCFS provides localities flexibility in tailoring programs to meet their unique circumstances. By supporting the provision of supports and services in family and community settings, OCFS supports the reduction of over-reliance on restrictive and expensive Out-of-home Placements and the reduction of

the disproportionate representation of families and children of color in the child welfare and juvenile justice systems.

SERVICES SHOULD BE LOCALLY RESPONSIVE. The development of effective services and supports for individuals and families requires family and community involvement in decisions about service priorities, strategies and program interventions. OCFS is committed to delivering services that are culturally competent, recognizing that a family's cultural background might affect the determination of appropriate services. OCFS is committed to providing care that is unconditional, embracing the idea that services are provided to all in need regardless of how, when, or where they come in to the system.

The OCFS regional infrastructure offers the capacity to assist localities in tailoring local service delivery systems to community needs. Integrated local planning by local departments of social services and youth bureaus, with the involvement of community stakeholders, including families, has helped promote local public and private human services partnerships. The joint identification of local needs based on common definitions support program planning and development that addresses needs in a manner compatible with existing community resources and interests. The resulting shared outcomes and principles hold promise for effective service delivery and positive outcomes.

SERVICES SHOULD BE EVIDENCE AND OUTCOME BASED. The human services field has increasingly emphasized the use of outcomes for measuring program success. The move to outcome-based practice has resulted in a new series of questions about which practices most effectively produce desired outcomes. Too long guided by intuition and anecdote, human service providers and administrators now look for reliable and valid evidence to inform their service investments. OCFS specifies and demands that outcomes be established and met for its substantial investment in the community. The ability to measure outcomes and define success continues to be a top priority for OCFS as it seeks to achieve its core goals.

Service Continuum

Commissioner Carrión has championed a role that challenges and encourages local providers to take the initiative by preventing, rather than reacting to, family upheavals by intervening early with activities designed to reduce the need for removal of a child, youth or adult from the household. OCFS' focus on prevention is why the Service Continuum has its broadest effects in services meant to support families and individuals in their communities. Indeed, even when such broad-based supports fail to prevent problems, early interventions should be available to individuals in the context of their families and families in the context of their communities.

OCFS provides funds and oversees a wide range of services. One way to understand the interrelation among the totality these services is on a continuum that distinguishes them by the point of service delivery. The chart below, "The Children and Families Service Continuum," delineates some of the key features and gives examples of these services.

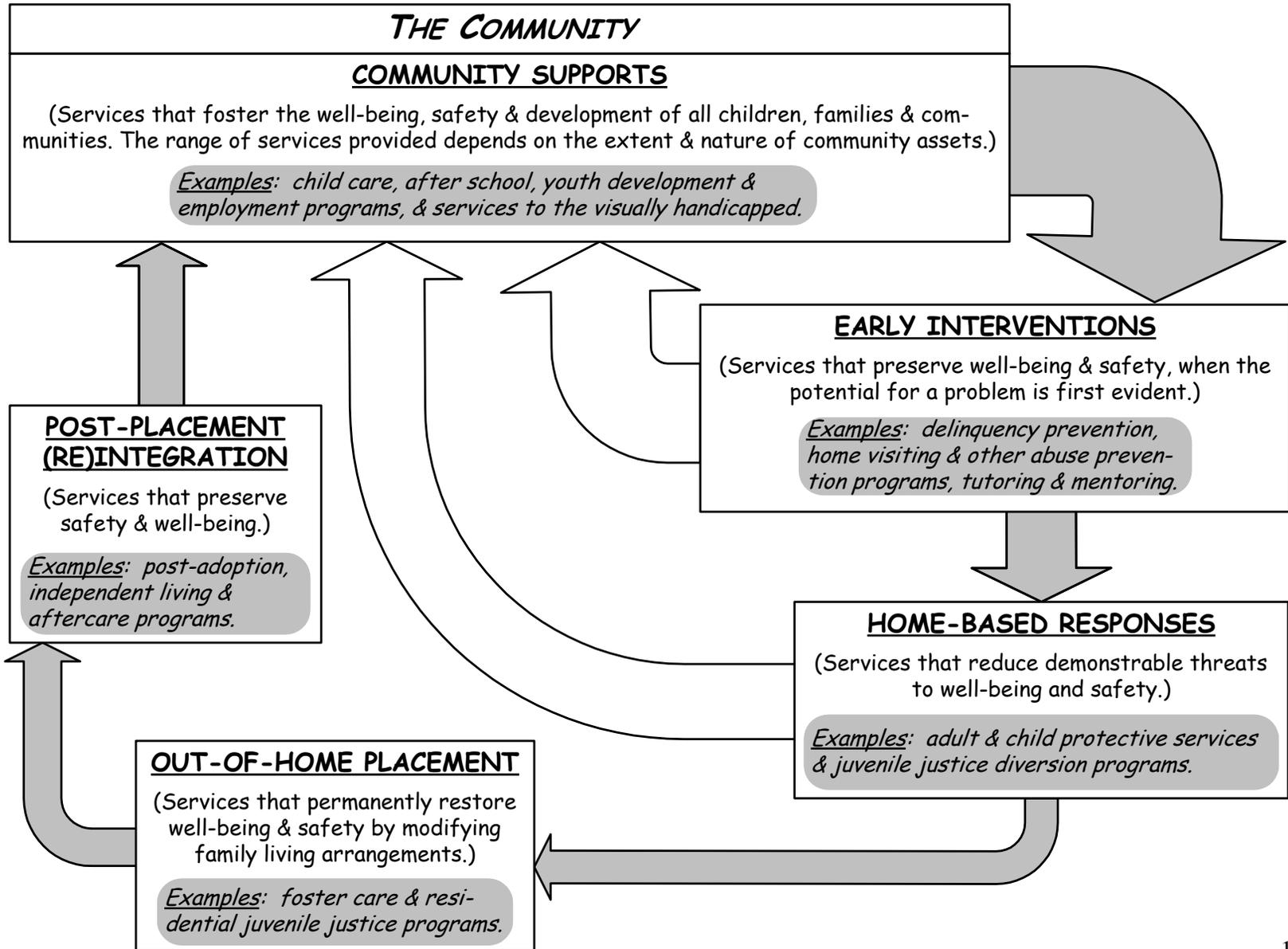
The ends of the continuum are connected, with the community as the beginning and end of service delivery, in recognition that the provision of effective services to children, youth, adults and families could not be separated from the community. Just as the success of efforts to prevent placement are dependent on the effectiveness of interventions offered prior to placement, successful return from out-of-home placement depends on the supports provided during and after families are reunified.

In the continuum diagram, arrow size indicates the relative number in a community moving between the five service categories. Arrow size progressively decreases for each movement away from Community Supports. This reflects the reality that almost all of a community's residents benefit from Community Supports, while increasingly smaller groups need the progressively more intensive services available through Early Interventions, and Home-based Responses. However, for a small minority, Out-of-home Placement may be the only available solution and almost all of this group will need some sort of Post-Placement Reintegration Service. It should be noted that the more effectively a community can resolve problems earlier in the continuum, the smaller the population that needs to advance to the next more intensive service.

Community Supports promote and sustain the well-being, safety and healthy development of all children, youth, adults and families. Community supports must be available to all community residents. However, the scope, type and nature of community supports vary widely among communities, reflecting the assets, strengths and needs of their residents. For example, communities with large proportions of preschool children should have more childcare programs than senior citizen communities that need other sorts of programs. For most community residents, these Community Supports meet their needs and obviate the need for more intensive services.

Invariably, community supports do not suffice for some community residents and more targeted and intense supports are required. For individuals and families at risk of such problems, OCFS supports Early Interventions. These programs aim at preserving the well-being and safety of community residents, when the potential for a problem first becomes evident. Typical of an early intervention, Healthy Families New York Home Visiting Program engages at-risk expectant or new parents in a program of home visits focused on improving parent child interactions, healthy child development and self-sufficiency, building on families' strengths. Similarly, successful education and support of the visually handicapped rely on early identification of visual impairments among individuals who lack sufficient supports to prepare them to achieve self-sufficiency.

The Children and Families Service Continuum



For a smaller proportion of a community's individuals and families, these early interventions are not enough. For them, OCFS supports and oversees the provision of a third category of services, Home-based Responses. These aim to reduce demonstrable threats to the well-being and safety of these individuals and families. Vulnerable adults, victims of domestic violence, and families working to keep their children safely at home are among those who benefit from home-based responses. Child welfare protective or preventive services signal the beginning of the permanency planning process, which emphasizes the right of children to be raised in safe and permanent homes, preferably with their birth families. Programs that divert youth, who have engaged in antisocial behaviors, from out-of-home placement by treating and supervising them in the community, represent another home-based response.

For an even smaller part of the population, whether because of abuse or neglect or for antisocial behavior and home-based responses are unable to preserve individual and/or community safety, OCFS funds, supervises and provides Out-of-home Placement services for such circumstances. Out-of-home Placement aims at developing a permanent outcome as expeditiously as possible. These outcomes include return home, living with a relative or other resource person, adoption and independent living.

Regardless of outcome, reestablishment of necessary community supports poses significant challenges. Furthermore, Community Supports alone often do not suffice to preserve safety and well-being or to maintain the permanency of the living arrangement. Thus, Post-placement Reintegration interventions such as aftercare, post adoption and independent living services are necessary to promote individual and community safety as well as permanency for those returning from out-of-home placements.

Some programs meet needs at multiple points along the continuum of services. Childcare, for example, may function as a Community Support to enable a caretaker to enter the workforce. It is equally well suited as an Early Intervention for children requiring special attention. As a Home-based Response, it can be a valuable adjunct to other efforts to reduce risk of abuse/neglect. In Out-of-home Placement or as a Post-placement Reintegration service childcare can help promote healthy development while in foster care or during the period of reintegration with family and community. Likewise, effective parenting programs may be a valuable component in all five service categories.

In preparation for this year's submission, as done in previous years, OCFS and the Administration for Children and Families (ACF) have conducted conference calls to share information related to New York State's Child and Families Services Plan (CFSP). These calls serve as both information sharing and plan guidance.

Identifying Populations at Greatest Risk

NYS utilizes performance and outcome measures to identify children and families at risk of entering the child welfare system. Child welfare data is made available to districts and agencies for their use in monitoring their own progress towards improving practice.

Additionally, case record reviews are performed that look at practice related to child protective, foster care, and adoption. Reports are shared with the districts highlighting strengths and areas needing improvement. Corrective action plans are sought as warranted.

Quality Assurance, Continuous Quality Improvement, and Program Support

OCFS continues to support the principles of good management and accountability in its own operations and for those it oversees. The approach must be coordinated to address the various funding mechanisms, partnerships and quality assurance activities in which OCFS is involved.

In NYS, OCFS has the authority to oversee child welfare services administered by the local departments of social services (LDSS) and the authorized voluntary agencies (VA) with whom local districts contract with. OCFS produces and disseminates various data to the LDSSs and VAs. This data is used to assess and measure their performance on key child welfare indicators and to set new targets. Districts are required to develop and submit county child welfare plans every five years, with an annual plan update each year. As part of their plan, child welfare programs are assessed, strategies for improvement identified and progress monitored.

New York's State-supervised, locally administered system requires quality assurance and continuous quality improvement efforts for the state, local government, and not-for-profit entities. OCFS's Office of Audit and Quality Control's (AQC) audit function plays a role at all levels. AQC maintains offices in Rensselaer, Manhattan and Buffalo.

In addition to conducting local district audits, AQC performs risk assessments, audits and fiscal reviews of contract agencies. Statutory and regulatory frameworks, coupled with specific contractual language, provide the standards against which performance of social services districts and contract agencies are measured. AQC also coordinates the review of the audited financial statements received from local districts and sub-recipient agencies that are required by the federal Office of Management and Budget, Circular A-133. Internal controls continue to support and improve the OCFS oversight of local districts and voluntary agency activities.

OCFS monitors local districts, as well as contracted private agencies that provide services to children and families, to verify that they are meeting performance targets. OCFS builds performance expectations into its' Request for Proposal (RFP) and award processes. On April 1, 2012, the Office of the State Comptroller (OSC) transitioned OCFS and other State agencies to the new Statewide Financial System (SFS). The implementation of SFS significantly affects how contract and payments are processed in the Contract Management System (CMS). CMS manages fiscal, monitoring and reporting requirements consistent with the State Comptroller and State Finance Law requirements. Local district performance is specifically monitored by DCWCS. Local districts report on performance via various plans including the district Child and Family Services Plan, and Annual Plan Updates.

AQC performs a variety of activities which contribute to the accomplishment of OCFS's safety, permanency and well-being goals. AQC conducts contract audits of entities involved in the provision of child welfare services throughout New York State. AQC also participates directly in annual Single State Audit activities which identify and help correct fiscal and programmatic findings of all local districts and not-for-profit agencies as needed.

In response to American Recovery & Reinvestment Act (ARRA) requirements, AQC continues to participate in the following activities that have been implemented: The OCFS Internal Control Officer works with offices/divisions within OCFS to verify that all ARRA activities are identified, applicable internal control functional descriptions are current, and the internal controls in place for the ARRA activities are tested as part of the Commissioner's annual internal control certification. In addition to the internal control process, AQC staff also participates in the required quarterly ARRA reporting certification function, in which ARRA reporting templates completed by agency preparers are reviewed for compliance with established reporting standards, discrepancies are resolved and agency review attestation is completed.

AQC continues to monitor the adoption subsidy program. OCFS signed agreements with the New York State Department of Health (DOH) and New York City Department of Health and Mental Hygiene in 2010 in an effort to begin periodic computer matches between the adoption subsidy population and statewide death records. Currently, OCFS and DOH have an agreement and are working on implementation. AQC has been involved in a joint effort with OCFS Information Technology (IT) and the NYC Administration for Children's Services (ACS) involving the implementation of electronic payments for NYC's Adoption Subsidy population. The effort has involved data matches needed for the identification of adoptive parent dates of birth which are to be used for the debit card personal identification number (PIN). AQC also developed a monthly NYC adoption subsidy population tracking report which is used by AQC for data analysis and by ACS for budget planning activities. The report uses monthly claiming data from the NYS Benefit Issuance and Control System (BICS) and tracks the number of children added and dropped each month and the average daily cost of care. AQC has modified the report to break the data down by claiming category.

AQC continues to provide ACS with data to assist ACS in making timely eligibility decisions on Title IV-E adoption assistance subsidy cases when children reach their 18th birthday. AQC provides ACS with weekly data files of Title IV-E children who will turn 18 years of age in the next month. Additionally, AQC reviews New York City's state and federal claims monthly which include adoption subsidy, foster care, child care and administrative costs.

In 2013, AQC started data analysis of BICS Composite data for all districts for all services pay types as well as non-services child care. Initial analysis of Adoption claims was performed to test whether districts were adhering to the \$2000 claiming limit for non-recurring adoption expenses. Eleven payments exceeding the \$2000 limit have been identified as well as a substantial number of non-care and custody payments which need

further examination. Additionally, a district specific trending report was produced for all non-New York City foster care claims from 2008 through the present. AQC expects to refine these reports to identify specific high risk population characteristics and perform the necessary follow-up activities.

A Child Care Subsidy Improper Authorization for Payment Review is conducted every three years in accordance with the requirements of the federal Improper Payments Information Act of 2002. This act mandates that federal agencies review programs and activities that may be susceptible to significant improper payments. Additionally, Title 45, Parts 98 and 99 of the Code of Federal Regulations, require states to measure, calculate and report improper payments, and identify strategies for reducing future improper payments. Based on these requirements, the Child Care Bureau of the Department of Health and Human Services' Administration for Children and Families (ACF) has directed all states to review their respective child care subsidy programs to measure improper authorizations for payment of child care subsidies. During 2011 and 2012, AQC conducted a review of 276 child care subsidy cases authorized during the period October 1, 2010 to September 30, 2011. AQC completed the review and submitted the report to the federal Department of Health and Human Services on June 29, 2012. AQC issued reports to all local districts (except for New York City) which had authorized cases included in the sample. These reports identify the findings related to each district's cases.

Quality Assurance and continuous quality improvement is also a priority for OCFS' Division of Child Welfare and Community Services (CWCS). The monitoring of social services district and contract agency compliance with program statutes, regulations and practice standards is a joint responsibility between home office in the Bureau of Program Monitoring and Performance Improvement (BMPI) and staff in the Regional Offices (RO) in the Office of Regional Operations and Practice Improvement (ROPI). As noted below, the Regional Offices and BMPI work together to plan and to conduct reviews of local child protective services programs, called On-going Monitoring and Assessments (OMAs), in upstate social services districts and in all five New York City boroughs and the New York City Office of Special Investigations (OSI). Onsite case reviews focus on an assessment of the required activities during the course of a child protective investigation, including the assessment of immediate danger, initial safety and safety at investigation conclusion, safety interventions, adequacy of the investigation, determination decision-making, service provision, legal intervention, child removal, case closing decision making, and risk of future abuse or maltreatment. District-specific reports are developed as a result of these reviews that identify strengths and areas of concern as well as required and recommended actions, if necessary. The local district then develops a corrective action plan that identifies the activities the local district will undertake to respond to the recommendations in the final report if corrective action is warranted.

Regional Offices have developed various individualized strategies to provide technical assistance to the local districts to facilitate program improvement. Technical assistance strategies include a "life of the case" review of specific cases to determine critical

decision making points from intake to case closure, focused refresher training for safety and risk assessment, facilitation of supervisory case reviews, management/organizational assessment, individualized casework review of challenging cases, checklist and other tool development to assist in managing caseloads, and review of regulations and laws as they relate to practice. Regional Offices will schedule follow-up activities as necessary and maintain regular contact with the local district supervisory and administrative staff to determine the level of program improvement. Additional case reviews may be conducted utilizing the OMA instrument to assess progress or less formalized mechanisms may be employed such as regularly scheduled on site meetings where identified program areas are discussed. The RO also utilizes data warehouse generated information on performance to help guide practice improvement discussions.

Since 2000, CWCS has been monitoring social services districts' adherence to statutory and regulatory requirements and practice standards in foster care and adoption. This Safety and Permanency Assessment (SPA) assesses social services district performance in key areas related to Title IV-E of the Social Security Act through a case review of a year of casework activity for each youth in the sample. Areas reviewed include safety and risk, service provision, casework contacts, visitation, service planning and service plan review, transition planning for adolescents, appropriateness and stability of placement and adoption and legal activity. The protocol for this review was significantly revised in 2006 to incorporate New York State law, Chapter 3 of the Laws of 2005, commonly referred to as the "Permanency Law", which increased the frequency of permanency hearings and required a detailed report of the status of every foster child's safety, permanency and well-being. Once the onsite case review is completed, a final SPA Report is then developed with findings that include strengths and areas of concern as well as required and recommended actions. The process of providing technical assistance to the local district is the same as outlined above for the OMA, although the scope of the program areas under consideration is broader.

The SPA case review was implemented in 2000 and all upstate Group 1 or Group 2 local districts have completed at least two SPAs and continue to be reviewed on a four year monitoring cycle. For 2010 and 2011, the SPA case review was replaced by a Children and Family Services Review (CFSR) baseline and a follow-up case review which comprises the use of a revised CFSR assessment tool that includes selected elements on the SPA instrument with additional focus on targeted areas of foster care and preventive services provision such as family engagement practices, transition planning for youth, and sibling placement and visitation. A total of 13 local social services districts, including the New York City social services district (comprising all five boroughs) participated in a review of 240 cases in 2010 and a follow-up to the baseline were conducted in each of the 13 districts during 2011. Those districts that had a SPA case review due in 2010 or 2011 that were not part of the 13 districts participating in the CFSR case review outlined above were permitted to utilize the CFSR baseline instrument in place of the SPA for the permanency review, and one district chose that option. Two other SPAs due in 2010 were completed in 2011. The four year SPA schedule cycle for 2012 included eight SPAs comprising a review of 170 foster care cases. For 2013, three SPAs are scheduled based on the established monitoring schedule.

OCFS child protective services reviews (OMAs) are based on a random sample pulled from all cases determined (indicated or unfounded) within the local social services district during the previous six months. Sample sizes are based on the local district Group size (1, 2, and 3) from the most current Monitoring and Analysis Profiles (MAPS) data. They include an examination of the investigation case record and ancillary documentation related to the investigation to ascertain whether children are protected and whether adequate case assessments and decision-making occur during child protective investigations. All upstate districts and each New York City borough have been reviewed through the OMA process and continue to be reviewed on a four year monitoring cycle. The Bureau of Monitoring and Performance Improvement works with the Regional Offices to maintain an annual monitoring plan for OMA reviews. In 2011, a total of 21 OMAs in upstate districts and three OMAs in the boroughs of the Bronx, Manhattan and Queens were completed, comprising a review of, in total, 532 CPS investigations. In 2012, an OMA was conducted in nine local districts and included a case review of 260 cases. For 2013, OMA's will be conducted in 17 local districts based on the established monitoring cycle.

New York City Regional Office (NYCRO) and Administration for Children's Services (ACS) Monitoring and Activities

Prevention, Program Assessment and Improvement 2012-2013 and Projections for 2013-2014

NYCRO's Prevention, Program Assessment and Improvement (PPAI) Unit continued to monitor the preventive services provided by the New York City Administration for Children's Services (ACS) through the contracted agency providers.

PPAI continuously obtains and reviews ACS' reports on individual agency provider performance and corrective action plans. PPAI collaborates with ACS' Agency Program Assistance (APA) and ACS' Division of Family Support Services (DFSS) Office of Technical Assistance (OPTA) on technical assistance and providing training resources to carry out corrective action plans. ACS utilizes three levels of program improvement status: enhanced monitoring, corrective action, and probationary corrective action, and NYCRO is informed when agencies are placed in any of the three statuses and provided the APA report on the agency.

Technical assistance to agencies was also provided by PPAI staff on program eligibility, best practice and the documentation process. For example, a program choice technical assistance session was provided to staff from two preventive providers based in the Bronx in January 2013. In addition, staff from OPTA attended the session to strengthen the program choice technical assistance that they present to preventive providers.

PPAI staff continues to participate in the bi-monthly meetings of ACS contracted preventive providers that maintain Family Treatment and Rehabilitation (FTR) programs. In addition, beginning May 2013, PPAI staff is attending the monthly meetings of

providers that convert their General Preventive and/or FTR programs to Evidence Based Model (EBM) or Evidence Informed or Promising Practice programs. These meetings are scheduled by EBM type. PPAI will continue to monitor these meetings through 2014.

For 2012 and 2013, a PPAI staff person continues to function as the NYCRO Family Assessment Response (FAR) Lead and has been providing support to NYC ACS' demonstration of FAR in four units of the Queens Borough Office. The demonstration began in January 2013 and eventually FAR will be rolled out Citywide. The Child Protective Unit at NYCRO is also collaborating in the FAR initiative with ACS. The NYCRO PPAI FAR Lead will continue to monitor, support and assist ACS through FAR technical assistance during the period of 2013 to 2014.

In 2012 to 2013, PPAI staff continued to participate as the NYCRO statewide lead in preparation for the Federal Department of Health and Human Services' (DHHS) Administration for Children and Families (ACF) Title IV-E Foster Care Eligibility Review. The Review took place in June 2012. New York State was found to be in substantial compliance for the sample of cases in the review period of October 2011 to March 2012. For 2013 to 2014, Permanency unit staff will function as Title IV-E NYCRO lead and co-lead; however, technical assistance and support will be provided by PPAI.

From 2013 to 2014, PPAI will continue to monitor the preventive provider agencies through site visits, targeted case record reviews, and technical assistance. PPAI will focus its monitoring of preventive services on areas that enhance ACS monitoring such as the issue of preventive services programmatic eligibility. This issue is related to the Federal Title IV-E eligibility concept of Candidacy. In New York State, Candidacy cases eligible for Title IV-E administrative costs are cases that are established to be eligible for mandated preventive services.

In addition, in 2013 to 2014, PPAI will monitor the preventive EBM programs to assess their alignment to NYS regulations and the NYS safety and risk assessment model. Preventive Providers are utilizing EBMs for the ACS Juvenile Justice Initiative and Family Assessment Program (Persons In Need of Supervision diversion program). As of June 2013, approximately 29 General Preventive and FTR programs also convert to EBMs.

Improved Outcomes for Children (IOC) and Child and Family Services Review 2012-2013 and Projections for 2013-2014

The Permanency unit, Prevention, Program Assessment and Improvement (PPAI) unit, and Child Protective Services unit, in collaboration with Home Office conducted the OCFS 2012 Improved Outcomes for Children (IOC) Review. The IOC review examines Preventive, Foster Care and Adoption Services and compliance with OCFS requirements relative to child and family safety/risk, permanency and well-being. The review assesses the delegation of the case management role to the voluntary agencies and practice standards in the field. The review samples consisted of fifty preventive and fifty foster

care/adoption cases. In 2012, foster care/adoption case sample was again selected from the CFSR sample universe. Both preventive and foster care/adoption review findings were presented to ACS. The 2013 IOC review is currently underway. This year the foster care adoption sample was randomly drawn from children in care on December 31, 2012, children in care from April 1, 2012 through October 30, 2012.

IOC is now accepted as standard business practice in New York City. The 2012 IOC plan was approved by OCFS and the Division of the Budget for a two year period. There have been significant changes in the Administration for Children's Services administration NYCRO is monitor the implementation of the ACS IOC initiative.

Child Protective Services and Institutional Abuse 2012-2013 and Projections for 2013-2014

The CPS unit is primarily engaged in guaranteeing ACS' compliance with Social Services Laws and state regulations, which impact the health and safety of abused and maltreated children in New York City. The CPS Unit attempts to achieve this mandate through the continued supervision, monitoring and the provision of technical assistance to the Administration for Children's Services (ACS), as they provide Child Protection Services in the five boroughs of New York City.

To fulfill the mandate of supervision, the CPS Unit conducts ongoing child protective case reviews through the CONNECTIONS system of record. Staff reviews cases daily. Staff is assigned on a weekly rotating basis to review all reports involving foster care homes and day care centers. During the period 2012–2013, the CPS Unit reviewed 2,313 reports of suspected child abuse and maltreatment in the daycare and foster care settings. The CPS monitors ACS' investigation of the reports. At intake, the NYCRO Permanency Unit is notified of the serious and more egregious reports received for any follow up deemed necessary.

Monitoring of ACS also took the form of collecting, collating, and analysing data trends. At specified times during the year and at the request of ACS, the data is shared and discussed with in Technical Assistance sessions. During the year 2012, the CPS Unit held/facilitated technical assistance sessions with the ACS Division of Child Protective Services in the Bronx, in Brooklyn and Manhattan regarding child protective policies, procedures and best practices to include case closure reasons, mandated reporters, guidelines on investigating fatality reporting, disseminating information to DCP/PPRS agencies; encouraging safe sleep, legislative changes and the subsequent requirements pursuant to these changes were discussed.

OCFS Evaluation and Research

The OCFS Bureau Research, Evaluation and Performance Analytics (BREPA) designs and conducts research studies in a wide range of program areas in order to: (1) evaluate the effectiveness of policies, programs, and practices in achieving desired goals; (2) assess whether a program is consistent with best practices in the field; (3) improve

understanding of the extent, nature, causes and effects of particular problems or issues; (4) measure the performance of OCFS in improving outcomes for children, youth, and families; and (5) develop and validate risk and needs assessments. The Bureau also approves outside research proposals involving children, youth, and families served by programs operated, regulated, or supervised by OCFS, and provides technical assistance on research methodology, sampling, performance measurement, and data collection and analysis to OCFS staff. Current research and evaluation in areas that support the goals and objectives articulated in this plan are presented within the goals sections.

Child and Family Services Review Program Improvement Plan (CFSR PIP)

OCFS received on November 8, 2012, from the Administration on Children, Youth and Families (ACYF) a letter indicating the successful completion of the Program Improvement Plan, noting OCFS had completed all required action steps and achieved all of its Program Improvement Plan goals.

Child and Family Services Plan - State

The Child and Family Services Plan FYs 2010–2014 was submitted in June 2009 and included the combined Final Report FYs 2005-2009. This year's Annual Progress and Services Report (APSR) is the fourth update to the 2010-2014 CFSP. In New York State, services are a state-supervised, locally administered service delivery system. Fifty-eight social services districts (including the five boroughs of New York City), the St. Regis Mohawk Tribe, and county youth bureaus offer and fund services at the community level. A framework of regulation, policy and procedures is established by OCFS and operationalized by the 58 social services districts and the St. Regis Mohawk Tribe (hereinafter included in the term social services district). While OCFS has responsibility for direct oversight of some services and program development, the daily responsibility to serve the majority of clients accessing the various services available within the social services environment rests with the social services districts. Approximately one-third of New York State's counties are considered rural. OCFS works with these districts to fund and provide services and programs to address the needs of these rural populations.

Planning in New York State continues to be a joint activity, with the focus of activity occurring in the social services districts and youth bureaus. OCFS' role is to provide guidance to assist social services district planning efforts, including youth bureau involvement, to reflect the goals and performance targets established. In partnership with those social services districts, New York State continues in the direction of achieving the various outcomes established within the CFSP. This partnership between the social services districts, youth bureaus, stakeholders, state agencies and OCFS is critical to the achievement of outcomes noted in the CFSP. Described initiatives in this document include those supported with federal Child Welfare Services funds (Title IV-B, subpart 1, the Stephanie Tubbs Jones Child Welfare Services Program); federal Child Abuse Prevention and Treatment funds (CAPTA); federal Title IV-E funds, including the application for and other information regarding the Chafee Foster Care Independent Program; Runaway Homeless Youth Act; Child Care Development Fund; and other state

and federal sources. Title IV-B, subpart 2 funds, Promoting Safe and Stable Families, for providing service delivery of family preservation, community-based family support, time-limited family reunification and adoption promotion and support, as well as planning and service coordination, were requested and received by New York State. Additionally, the state does support various programs with other federal and state funds that by definition fall under these categories. This Plan is further evidence that New York State will take every opportunity to explore whether the State is eligible to receive such funds.

The Child and Family Services Plan (CFSP) and subsequent Annual Progress and Services Reports (APSR) are made available to: social services districts; other state agencies involved in major joint projects with OCFS; and the Indian Tribes. OCFS will provide specific notification to related providers on the availability of the Report. In addition, the public will have access to these documents through local social service districts. Also, the Child and Family Services Plan is made available on the OCFS website here: <http://www.ocfs.state.ny.us/main/reports/default.asp>

OCFS Data Warehouse

The data warehouse initiative provides users, including local district, contract, regional, and State OCFS staff access to management reports and ad-hoc reporting on data in CONNECTIONS and legacy systems (child welfare-related data). Local districts and voluntary agencies are able to obtain summary reports at the worker, caseload, local district, regional, and state levels. The OCFS Data Warehouse provides a series of standard reports that can be produced on demand at different levels of aggregation and time-periods and tools by which local district and voluntary agency staff can produce ad-hoc reports on clients or caseloads. The end result is improved management and analytical reporting capabilities for the OCFS services system.

The OCFS Data Warehouse provides end-user access to users in a manner suitable for strategic analysis and decision support. Available pre-defined reporting areas include: CPS (Child Protective Services) Allegations, CPS Investigations, CCRS (Child Care Review Service), foster care cases and foster care homes, facilities' licensing and capacity, security, and CFSR PIP data. The OCFS Data Warehouse presents information needed by managers to monitor caseload trends and track compliance with State and Federal standards.

Because the Data Warehouse can replicate the Federal data profiles, it gives local districts the ability to view child level data for each submitted measure. The Data Warehouse is used as a data source in an increasing number of requests from districts, voluntary agencies, home office, the legislature, and general public.

Planned activities will focus on improving management reporting capabilities with CONNECTIONS. Additional users will be trained and brought into the Data Warehouse. Ongoing development efforts will continue to provide additional data tables, data marts,

cubes, and reports to support state and local usage of data, particularly in the areas of Family Case and Financial Management.

OCFS continues to focus its data warehousing efforts on growing the Data Warehouse to include data not only on child welfare related individuals and cases, but on other individuals and cases served by the agency (for example, adults receiving protective services, and juveniles receiving youth services); and on controlling the growth of the warehousing environment through strict and strategic data acquisition.

Title IV-E Plan

On March 8, 2012, OCFS submitted a new State required Title IV-E State Plan Amendment - Destitute Child - to ACF due to New York State's amending the Family Court Act, Social Services Law and a chapter of the Laws of 2011 that define and establish procedures for addressing Destitute Children. On September 18, 2012, ACF approved our Title IV-E State Plan Amendment – Destitute child. On August 13, 2012, OCFS re-submitted the Title IV-E State Plan Innovations Act Plan Amendment as required by P.L. 112-34, and as per ACYF-CB-PI-12-07, issued May 8, 2012. On November 8, 2012, ACF approved our Title IV-E State Plan Innovations Act Plan Amendment Re-Submission. On September 25, 2012, NYS submitted an application for a Title IV-E Waiver which is pending at this time.

Currently, New York State is planning to submit a revised Title IV-E State Plan in accordance with ACYF-CB-PI-13-05, issued April 17, 2013.

Child Welfare Laws, Policies, and Procedures

The OCFS website provides extensive information on pertinent statutes, regulations, policies and procedures.

New York State Chapter Laws of 2012:

The following Chapter Laws do not affect New York's eligibility for CAPTA. They are included for informational purposes:

Chapter Laws of 2012;

CHAPTER 3 of the Laws of 2012, signed 01/27/12, Amends §§249, 262, 1055, 1092, 1093, 1094 & 1095, adds §1096, Family Court Act; amends §12, Chapter 605 of; amends §3, Chapter 607 of 2011; amends §§371, 384-b, 398 & 398-e, repealed §398 sub 6 P(i), Social Service Law. Relates to procedures for destitute children; relates to kinship guardian assistance payments; clarifies that the court may appoint an attorney for the child in article 10-B proceedings; provides a new definition of "destitute child" to include a child who is in a state of want or suffering, does not fit with the definition of an abused or neglected child under FCA article 10 and is without any parent or caretaker available to sufficiently care for such child due to certain conditions.

CHAPTER 41 of the Laws of 2012, signed 05/31/12, Amends §95, Social Services Law. Establishes the Supplemental Nutrition Assistance Program (SNAP).

CHAPTER 459 of the Laws of 2012, signed 10/03/12, Amends §459-b, Social Service Law. Requires limit to maximum length of stay at residential program for victims of domestic violence.

CHAPTER 501 of the Laws of 2012, signed 12/17/12, Repeals Article 45, §13.34 sub 2, §16.13 sub (b), amends Mental Hygiene Law, generally; amends §1.20, Criminal Procedure Law; amends §§401 & 401-a, Correction Law; amends §2994-m, Public Health Law; amends §677, County Law; repealed §412-a, §422 sub 4 P(A) sub P (r), subs 10 & 11, §§424-c & 424-d, amends Social Services Law, generally; amends Education Law, generally; amends §1229-d, Vehicle & Traffic Law; amends §845-b, adds Article 20 §§550 - 562, Executive Law; amends §§240.50, 130.05, 260.25, adds §260.24, Penal Law; amends §§1-4, Chapter 606 of 2011; repealed Chapter 6 of 2012. Enacts the "protection of people with special needs act"; enacts various provisions for the protection of persons in state operated and licensed facilities from abuse, neglect and mistreatment; establishes the justice center for the protection of people with special needs.

OCFS Policy and Procedure:

12-OCFS-ADM-08, Destitute Child Placement Procedures and Guidelines, September 19, 2012. The purpose of this Administrative Directive (ADM) is to advise local departments of social services (LDSS) and voluntary authorized agencies of the provisions of Chapters 605 and 607 of the Laws of 2011, and Chapter 3 of the Laws of 2012. These Chapter laws enacted a new Article 10-C of the Family Court Act (FCA) and amended Social Services Law (SSL) in relation to the definition and procedures for destitute children. These laws became effective on September 18, 2012, the date on which New York State received approval from the U.S. Department of Health and Human Services of an amendment to the federal IV-E state plan reflecting the changes enacted by these laws.

12-OCFS-ADM-07, Required Annual Credit Checks for Foster Children, 16 Years of Age and Older, issued August 9, 2012. The purpose of this Administrative Directive (ADM) is to advise local departments of social services (LDSS) and voluntary authorized agencies of an important new provision of federal law, added by the Child and Family Services Improvement and Innovation Act (P.L.112-34) pertaining to foster youth identity theft, which went into effect on October 1, 2011.

12-OCFS-LCM-03, Kinship Guardianship Assistance Program Payments – Excludable Income for Child Care Subsidy Program Eligibility, issued March 2, 2012. The purpose of this Local Commissioners Memorandum (LCM) is to establish a formal policy regarding the calculation of countable income for families in receipt of Kinship Guardianship assistance Program (KinGAP) payments and to notify social services districts of this policy.

Caseworker Visits

In Federal Fiscal Year (FFY) 2012, OCFS continued its year-over-year improvement in contacting Foster Children. OCFS achieved a FFY 2012 Contact percentage of 94.6 Percent. This surpassed 90 Percent Foster Children Contact mandate established by the Administration for Children and Families (ACF).

In FFY 2012, the primary metric used to measure Foster Children Contacts is changing from 'Contact %' to 'In Care Contact %'. OCFS has always done well with the 'In Care Contact %' metric; OCFS tracked this metric for FFY 2011 and achieved an 'In Care Contact %' = 95.1 Percent. Interim data for FFY 2012 (October 2011 - March 2012) Foster Children contacts showed an 'In Care Contact %' = 93.6 Percent. For FFY 2012-2014, the ACF mandate for Foster Children contacts, remains at 90 Percent.

Target percentages:	10/1/08	15%,	reported actual	21.3%
	10/1/09	45%,	reported actual	47.3%
	10/1/10	75%,	reported actual	67.5%
	10/1/11	90%,	reported actual	81.5%
	10/1/12	90%,	reported actual	94.6%

Beginning in FFY 2015, the mandate increases to 95 Percent and work is underway to reach this target. Bureau of Research, Evaluation and Performance Analytics (BREPA) staff conducted analysis on casework contact files to identify locations and/or characteristics of children short of casework contact target of 95 Percent. Results from these analyses will be utilized by OCFS Child Welfare and Community Services (CWCS) to increase casework contacts.

OCFS implemented a Foster Children data mart and created production reports that provide Foster Children Contact summary and detail information. These reports measure monthly performance and access has been expanded to social services district and voluntary agency staff. This data mart is updated weekly; these timely updates enable districts, voluntary agencies, and OCFS staff to monitor progress and to take action to improve child contacts.

OCFS is working toward increasing the Child Care Review System (CCRS) and CONNECTIONS Foster Children data available in Foster Children Contact reports. Data relating to Case Manager and Case Planner, including associated organizational codes (i.e., site-unit), will enable agencies to monitor and improve accountability by work units.

The New York City Regional Office has five contractors and an administrator to work with agencies that provide child and family services to New York City (in New York City most services for foster children are subcontracted to voluntary agencies). These contractors have worked collaboratively with voluntary agencies resulting in measurable improvements to agency foster children contacts.

In Albany, one contractor works with the Data Warehouse Information Technology team and BREPA to develop requirements, perform data analysis, testing, and provide assistance to OCFS, district, and voluntary agency staff.

OCFS continues to send a quarterly Foster Children Contact letter to districts and voluntary agencies. The letter is accompanied by summary reports of Foster Children Contact metrics for districts and voluntary agencies. The reports cover the following timeframes: October-December, October-March, October-June, and October-September. This communication reinforces the importance of foster children casework contacts.

Monthly workgroups are held to discuss performance and strategies for improving casework contacts. Workgroups are comprised of staff from Legal, Budget, Child Welfare and Community Services, Strategic Planning and Policy Development, Information Technology, and Division of Juvenile Justice and Opportunities for Youth.

Child and Family Services Plans - Counties

As previously indicated, all counties in the state are required to submit a single county plan from LDSS and county Youth Bureaus. Counties were required to submit a new multi-year plan in the fall of 2011, effective January 1, 2012. Counties are required to submit Annual Plan Updates through 2016.

Accomplishments for 2012-2013:

- OCFS has taken the feedback collected from the local districts and regional offices on last year's planning cycle and is working to streamline the counties submission and reporting requirements.
- New York State Division of Probation and Community Alternatives (DPCA) continue to jointly review and approve the PINS Diversion Component of the plan. The review and approval process was completed by way of a phone conference between OCFS staff and DPCA staff allowing for shared dialogue, coordinated review/approval of plans, and direct support to districts.
- OCFS utilized an on-line Annual Plan Update (APU) submission process for this past APU cycle, as counties submitted their updates electronically via the intranet.

Plans for 2013-2014:

- OCFS will continue to involve local districts and regional offices in child and family services planning.
- OCFS will continue to explore utilizing this Web-based application that serves both the state and county level agency service systems.
- OCFS will continue to seek ways to streamline child and family services planning reporting.

Consultation, Collaboration, and Service Integration

The creation of OCFS was accompanied by a statutorily created Children and Family Services Advisory Board comprised of 24 members. The Board's purpose is to help OCFS construct a better system of services for New York's children, families and individuals. The Governor appoints twelve members and the State Senate and Assembly appoint six each. Its duties broadly include consideration of matters relating to the improvement of children and family services, review of proposed rules and regulations of the OCFS prior to their adoption, advocacy for OCFS programs, and liaison with local stakeholders.

OCFS routinely involves a wide range of agency staff in all discussions involving aspects of the delivery of services to children, youth and families. Typically staff representing policy, legal, program operations, fiscal, and training participate, as appropriate and by expertise, give input on issues encompassing the entire range of child welfare services, i.e. child protective services, foster care, adoption, preventive services, independent living, juvenile justice, and any of the Social Services Block Grant (SSBG or Title XX) services.

In addition to the broader avenues of input noted below, social services districts and voluntary authorized agencies interact with OCFS regional offices routinely for technical assistance, feedback on problem areas, and suggestions for improvement. Regional offices share those concerns/suggestions with OCFS home office on an ongoing basis. Monthly meetings provide a vehicle for advising and discussing with OCFS home office field concerns and for comparing various regional issues to determine how broad the issue may be or whether geographic location or county population is a factor.

In a similar manner, the OCFS Native American Services (NAS) unit actively interacts with the Tribes to offer general forums for discussions of issues, as well as to address specific child/family circumstances and consult with the Tribal communities. Monthly meetings with Tribal representatives provide the opportunity for ongoing dialogue. As with regional office staff, the NAS unit provides feedback to OCFS home office. In addition, regional office staff and county welfare attorneys are involved and provide another conduit for feedback. The NAS unit is very active in supporting and sharing feedback from the Tribes and for facilitating meetings for direct feedback to home office.

OCFS is also committed to hearing the voice of youth impacted by service systems. To that end, OCFS has supported the development and growth of Youth in Progress (YIP), a statewide foster care youth leadership advisory board. This group of young people, accompanied by adult mentors, has provided ongoing input related to a wide range of topics that impact their experience in foster care and beyond.

OCFS seeks the input of its partners in the social services districts, youth bureaus and voluntary authorized agencies using a variety of methods. Communication occurs through state level associations - the New York Public Welfare Association (NYPWA), the Council of Family and Child Caring Agencies (COFCCA), the Empire State Coalition of Youth and Family Services (Empire State Coalition), the New York State Juvenile Police Officers Association (NYSJPOA), Foster and Adoptive Parent organizations and

the Association of New York State Youth Bureaus (NYSAYB). OCFS staff participates in association meetings and conferences, and frequently communicate with individual members of sub-groups as needed and appropriate.

Coordination and Service Integration Efforts

OCFS staff is involved in several collaborative efforts related to a wide range of child, youth, and family services. OCFS is committed to working cooperatively with state agencies, community providers and advocacy groups to forge partnerships to develop and implement effective strategies to address issues that affect New Yorkers. These joint efforts may be formal interagency task forces and/or workgroups, efforts required by statute or regulation, or informal responses to an identified problem. All of these efforts have positive effects beyond the stated issues in forming working relationships and mutual understanding of approaches to populations and problems and have the continuing effect of improving communication and problem-solving ability, thereby promoting improved service delivery.

In addition to these activities, the collaborative efforts noted below and on the following pages describe several coordination and service integration efforts that provide excellent opportunities for consultation, discussion, and input from various agencies and constituencies regarding a wide array of services to children, youth and families. The various groups, depending upon their charge, are comprised of representatives from State and local, public, and private entities.

Cross Systems Collaborations

OCFS Commissioner Carrión stated in her article in the August 2007 OCFS newsletter titled, "Strengthening Partnerships," that "...we have been diligently working to create partnerships with advocacy groups, community programs, and our sister state agencies working together to find common ground with our stakeholders and the community...the needs of our children and families call for a broader approach that includes the intervention of other state agencies."

Collaborative Accomplishments 2012-2013:

Since December 2007, a meeting of state agency commissioners serving children is held to discuss the need for cross system collaborations for children with service needs that involve more than one service delivery system. Commissioners from the following agencies attended: OCFS, the Office of Mental Health (OMH), the Office for Persons With Developmental Disabilities (OPWDD), the Office of Alcohol and Substance Abuse Services (OASAS), the Department of Health (DOH), the Division of Probation and Correctional Alternatives (DPCA), the State Education Department (SED), and the Commission on Quality of Care and Advocacy for Persons with Disabilities (CQCAPD). The Commissioners meet quarterly to continue the discussion and to develop and implement joint solutions to improve the lives of children, youth, and families.

Examples of collaborations with sister state agencies and/or local districts include:

The NYS DOH and OCFS have continued to work collaboratively to improve the collection and analysis of information available on child deaths. OCFS looks to broaden its perspective on child deaths from a view through the child welfare lens to a wide angle view that embraces a more community based and public health perspective. The purpose is to break new ground in addressing system issues to inform practice across disciplines to prevent child deaths.

A primary objective to the achievement of this goal is to create a more collaborative partnership with DOH to expand and improve child fatality reviews and prevention efforts at the local and state levels.

The guiding principles for partnership include the following:

- Child fatality review requires multidisciplinary participation;
- Comprehensive review of all child deaths will identify those that are preventable;
- Information about preventable deaths will help communities identify risk factors; and
- This information will lead to actions to prevent child deaths, illness and injury.

The partnership with the DOH provides the core strength for increased strategic action and the basis for a broader multi-disciplinary child fatality review. OCFS continues to work with DOH and its sub-grantee, SUNY Stony Brook to develop and provide technical assistance, resource information, consultation and community prevention initiatives to local Child Fatality Review Teams (CFRTs) funded by OCFS. This collaborative process, begun in 2011, is expected to continue throughout 2013 with specific targets, such as:

- Training to improve the quality of the multi-disciplinary fatality review data inputted into the national child fatality database;
- Merge key DOH and OCFS fatality data to better understand trends and identify contributing factors;
- Engage in public and professional education efforts to promote safe child practices (such as safe sleep);
- Continue to encourage broad based data input in to the national child fatality database;
- OCFS has re-issued a request for proposals to continue and/or start up new Child Fatality Review Teams throughout NYS. The start-up date for the new awards will begin August 1, 2013.

Commissioners from OTDA and OCFS have established operational work teams to address serious issues related to child care and child support, child-only Temporary Assistance for Needy Families (TANF) caseloads, limited English proficiency services, adult protective services, and fatherhood initiatives.

OCFS/DJJOY has partnerships with many non-profit agencies to deliver services to court placed youth while they are in residential care and upon their return to their home communities. These Evidence-Based Community Initiatives and Youth Development programs include Children's Village for the provision of Multi-Systemic Therapy (MST); and Family Integrated Transitions (FIT) for New York City and Long Island youth; Vera Institute for Adolescent Portable Therapy (APT) for New York City youth and Cayuga Centers Functional Family Therapy (FFT) for Monroe County youth. We also contract with the Children's Aid Society for their Lasting Investment in Neighborhood Connections or LINC program, a youth-development program for New York City youth. The Youth Advocacy Program (YAP) provides intensive service delivery for youth and families in Seneca, Wayne, St. Lawrence, Tompkins, Dutchess, Orange, Sullivan, Rockland and Westchester counties in Upstate NY.

OCFS, OTDA, and DCJS continue to collaborate in meeting provisions of the federal Trafficking Victims Protection Act (TVPA) which was enacted in 2000, and has been reauthorized multiple times since then. This was the first federal law to promote a three pronged approach to human trafficking: prevention, protection, and prosecution. On November 1, 2007, the New York State Anti-Trafficking Statute took effect and established human trafficking as a state crime and established a process to “confirm” victims of human trafficking under the state law, as a means of providing assistance to confirmed victims, including those who would not be otherwise eligible for assistance due to their immigration status. Confirmed victims, if otherwise eligible, are eligible for benefits and services in accordance with their citizenship or immigration status. Referrals for confirmation of status as a victim are sent by law enforcement to the Office of Temporary and Disability Assistance (OTDA) and the Division of Criminal Justice Services (DCJS) to make a joint decision on the confirmation to send the referral for Federal certification (through the TVPA) as a victim, if appropriate. When minor victims are referred for confirmation, LDSSs are notified and have certain requirements to assess the minor victim’s need for placement/shelter, medical needs, mental health needs, substance abuse treatment, immigration relief, etc. OCFS is also notified of minor victims and provides assistance to LDSSs if needed.

Since the implementation of the 2007 trafficking law, OCFS has provided training and presentations in conjunction with OTDA to various audiences. OCFS is also a member of the State Interagency Human Trafficking Taskforce that was established by the Anti-Trafficking Law.

In 2008, the state legislature passed the Safe Harbor for Exploited Children Act, which serves to remove sexually exploited youth from the jurisdiction of the criminal or juvenile justice systems to the family courts where these children and their families can receive support and services from the child welfare system. Additionally, local departments of social services were required to provide crisis intervention services and community based programming for sexually exploited youth.

Accomplishments 2012-2013

In April 2012, OCFS, in conjunction with OTDA and My Sister's Place Domestic Violence Program, delivered a presentation at the Prevent Child Abuse Conference. The presentation included basic information on human trafficking, as well as specific information on the intersection of human trafficking with domestic violence and child welfare.

In October 2012, OCFS, in conjunction with OTDA and CAPTAIN RHY Program for Youth, delivered a presentation at the Youth Bureau Conference. The presentation provided basic information on human trafficking, as well as the role of RHY programs and child advocacy centers (CACs) with child trafficking victims.

In SFY 2012-2013, the State allocated \$1.5 million to OCFS for services or treatment of sexually exploited youth. OCFS contracted with the International Organization for Adolescents (IOFA) to assist in the implementation of the Safe Harbor Act with this funding. OCFS has selected a pilot group of five LDSSs, including the counties of Erie, Onondaga, Monroe, Westchester, and the New York City boroughs of the Bronx, Brooklyn, Manhattan, Queens, and Staten Island for this project. Based on previous experience implementing the Illinois Safe Children Act, IOFA will replicate the core activities and tasks that were successfully implemented in Illinois through its framework: "Child Right: Building Child Welfare Response to Child Trafficking". Activities across the five target areas will include:

- five two day trainings for LDSS/ACS staff and core agencies in each target district/borough;
- five one day trainings for external stakeholder agencies involved in the effort in each target district/borough;
- ongoing technical assistance from IOFA as victims are identified; and
- the development of an operational blueprint for statewide response to child trafficking victims.

OCFS has designed a human trafficking webpage on the OCFS site with plans to expand it as we complete our work on the Safe Harbor Project. See here: <http://www.ocfs.state.ny.us/main/humantraffic/>

Plans 2013-2014

OCFS has recently reached out to the New York State Thruway Authority to request they post awareness information including the National Human Trafficking Hotline number at the Thruway rest stops.

OCFS recently attended the upcoming Train-the-Trainer GOER Human Trafficking training for state staff that was provided to all state agencies. OCFS is currently in the processes of developing a training plan for appropriate OCFS staff to receive this training.

OCFS is in the process of working on a best practices policy that will be completed based on our work on the Safe Harbor project and will include our blueprint for statewide prevention, identification, and treatment of child trafficking victims.

OCFS is currently working on a human trafficking information pamphlet geared towards youth that will be promoted through our Youth In Progress (YIP) program for current and former youth in foster care.

Close to Home Initiative

The State Fiscal Year 2012-13 enacted budget included authorization for a sweeping reform on the juvenile placement system for youth from New York City. Called the *Close to Home Initiative*, this reform will allow New York City to gradually assume custody of youth sent first to non-secure and then to limited secure facilities as a result of delinquency. OCFS will continue to operate secure facilities for all youth statewide. This significant reform will fundamentally restructure the delivery of residential rehabilitative services for New York City justice - involved youth, providing an opportunity for the implementation of evidence informed models of care that address the risks and needs of young people in the context of their families and their communities. [See Goal 2 for a more extensive overview]

OASAS is working in collaboration with OCFS to align the delivery of drug and alcohol services for OCFS' juvenile justice facilities and aftercare services, as well as for local districts that need access to drug and alcohol treatment services to support family functioning, such as a co-location project described elsewhere in the plan.

OCFS, along with OPWDD and OMH are working jointly to reduce the use of physical restraints in child care settings, as well as to improve service delivery to cross-systems children who need support from multiple systems.

OCFS has been working collaboratively with SED to develop bed capacity within New York State to prevent placement of children with high service needs in out-of-state residential facilities and when appropriate, return children currently in out-of-state residential programs to services that are delivered close to home within New York State.

For the past few years, OCFS has worked closely with the New York State Office for the Prevention of Domestic Violence (OPDV) in several areas, particularly in the area of training. OPDV delivers the required two-day training on domestic violence to every CPS caseworker in New York State outside of New York City, which does the training itself.

OCFS, OMH, OPWDD, and DOH continue to work to provide comprehensive services to children with cross-systems needs.

Bridges to Health Home and Community Based Medicaid Services Waivers (B2H)

OCFS, with support from DOH, continued to implement the B2H Medicaid Waiver Program for Children with Serious Emotional Disturbance (B2H SED), Bridges to Health for Children with Developmental Disabilities (B2H DD) and Bridges to Health for Children with Medical Fragility (B2H MedF) Waivers across New York State. B2H is the first program in the nation to use Home and Community Based Medicaid Waivers to exclusively serve children in the child welfare system along with their caregiver network and does so within the federal principles of freedom of choice, strength based approach, person-centered and family focused service planning and delivery.

B2H services are provided for children in foster care and other community based settings whose diagnosed conditions are sufficiently severe to warrant placement in a medical institution were it not for the supports provided by the B2H Medicaid Waiver Program. B2H services are not provided by the foster care system and are not supported through state or federal funding available for foster care services, but are instead additive to services provided to children in the foster care system.

B2H services are intended to serve persons under the age of 21 in a community-based setting and within their support network, as children in foster care have many people involved in their lives- including birth families, foster and adoptive families, caregivers, local districts, providers, clinicians, courts, and advocates. Available B2H services are as follows: Health Care Integration; Planned Respite; Skill Building; Day Habilitation; Family/Caregiver Supports and Services; Prevocational Services; Intensive In-Home Supports; Supported Employment; Special Needs Community Advocacy and Support; Immediate Crisis Response Services; Crisis Avoidance, Management and Training; Adaptive and Assistive Equipment; Crisis Respite; and Accessibility Modifications. Service needs are determined pursuant to an enrolled child's Individual Health Plan. (See Goal 2 for more on B2H)

NYS Teaming Model

OCFS began to pilot the Teaming Model in early 2007 in an effort to provide more supports to the child welfare workforce, to counter the forces that contribute to caseworker turnover such as worker stress and isolation, and to support quality decision-making. OCFS and its training partner, the Center for Development of Human Services (CDHS), continue to adapt its Teaming Model Initiative from the casework model developed by the Massachusetts Department of Social Services. Teaming transforms child welfare work from one of individualized casework practice to that of a shared workload and decision making practice.

Accomplishments 2012 – 2013:

OCFS currently supports 27 teams in 12 counties and is expanding this initiative into 2013 by adding additional teams. Each team is invited to attend the Annual Teaming Symposium and is provided ongoing technical support by our CDHS partners in the form of onsite consultation, team building and coaching activities and guidance through the various phases of team development. Two DVDs produced by OCFS in 2011 were disseminated in 2012 to LDSS and OCFS Regional Office staff. The first DVD entitled

New York State's Child Welfare Teaming introduces viewers to our Teaming trainers/coaches from the Center for Development of Human Services and to child welfare staff from teaming units. It provides an overview of the Teaming development process as well as key concepts and activities associated with successful teams. The second DVD outlines the personal experience of a LDSS team and associated service providers (foster parent, law guardian and county administrative staff) as they work together on challenging cases with successful outcomes.

Plans for 2013 – 2014:

Pending the availability of fiscal resources, we plan to continue to support existing teams and offer additional counties the opportunity to apply.

Office of Court Administration (OCA)

Permanent Judicial Commission on Justice for Children (Commission): The Commission is chaired by Chief Judge Jonathan Lippman. In addition to OCFS Commissioner Carrión, other members include judges, lawyers, advocates, physicians, legislators, and state and local officials.

The NYS Child Welfare Court Improvement Project (CIP) began in 1994 and was administered by the Permanent Commission on Justice for Children until 2006. At that time, the increased focus on court operational issues prompted the transition of the administration of the project to the Office of Court Administration's Division of Court Operations. OCFS and OCA have built a strong partnership to support effective collaboration between the family courts and the social services districts with the highest foster care populations in the State. The Statewide Court Collaboration team made up of stakeholders from across the State, designs and oversees the implementation of court collaboration initiatives on the State, regional and local levels. This includes sponsoring regular local and regional multi-disciplinary training events and supporting the development of enhanced family court and child welfare practices. The project also provides a process by which data maintained by both local social services districts and courts can be shared to evaluate the impact of innovations that promote improved outcomes for children.

As indicated in our CFSR work and to support our overall CFSP, OCFS has continued to work with the Office of Court Administration on local agency and court collaboration initiatives that are aimed at improving safety, permanency and well-being of children and families who are involved with Family Court. A total of 21 collaborations are currently receiving support, training and technical assistance from both OCFS and OCA. Court Data packets were shared with the 21 Family Courts in 2011 and court data collection is ongoing.

Also under our agency/court improvement agenda is collaboration with the NYS Office of Alcohol and Substance Abuse Services. Two local districts are piloting a protocol to be used with families in the intersection of the family court, child welfare and alcohol and

other drug (AOD) treatment systems with the goal of increasing completion of AOD treatment and reducing children's time to permanency.

The Seneca Nation Peacemaker Courts Collaboration began in 2005 and includes judges and court personnel from the 8th Judicial District, the Seneca Nation of Indians and the Peacemaker Court judges. This collaboration provides a forum to discuss practices and procedures and provides a welcome point of contact for issues including the implementation of the Indian Child Welfare Act (ICWA), and the development of a tribal Court Appointed Special Advocates (CASA) program. In July 2012, OCFS participated in a court collaboration meeting held at the Seneca Nation Peacemakers Courts. Also, both the Seneca Nation of Indians and OCFS took part in the Federal-State-Tribal Courts Forum meetings held October 4, 2012 and May 2, 2013.

The Child Protective Services (CPS)/Domestic Violence (DV) Collaboration Projects began in 1997. The projects outstation a DV advocate from a local non-for-profit DV agency in the local CPS office to participate in joint home visits, joint safety planning and interventions, consultation, case conferencing, cross-training and protocol, and team development. OCFS currently supports 11 CPS/DV projects in five regions: one in the Rochester region, two in the Albany region, three in the Syracuse region, four in the Spring Valley region, and one in the Buffalo region. (More information related to this project is noted in Goal 3)

In-Depth Technical Assistance (IDTA): In 2006, NYS was awarded an In-Depth Technical Assistance (IDTA) opportunity from the National Center on Substance Abuse and Child Welfare (NCSACW) following a joint application by OCFS, OASAS and OCA. The purpose of this work is to enhance collaboration to improve outcomes for families with substance abuse issues involved in the family court and child welfare system. The collaboration is called the New York State Partnership for the Family Recovery. *Gearing up to Improve Outcomes for Families NYS Collaborative Practice Guide for Managers and Supervisors in Child Welfare, Chemical Dependency Services and Court Systems* was publicized in 2009. This document provides a framework and guidance for districts to increase local collaboration between systems, and the development and identification of cross-systems training opportunities to increase the understanding by workers in each of the systems of each other's work. The Partnership also issued four separate desk guides designed for child welfare workers, substance abuse service providers, judges and judicial officers, and Family Court practitioners. Late in 2010 the Partnership began working directly with Oneida and Dutchess counties. These counties received training and began to build local cross-system collaborations to improve outcomes for families affected by substance use disorder. At the end of 2012 the National Center on Substance Abuse and Child Welfare (NCSACW) determined that they were no longer able to provide technical assistance to NYS in this endeavour. The IDTA team is in the process of making recommendations for the future of the work. Meanwhile, the practice guide and desk guides will continue to be available to all counties.

Racial Equity and Cultural Competence Initiative: In 2007, OCFS implemented the Disproportionate Minority Representation (DMR) Initiative, renamed the Racial Equity and Cultural Competence (RECC) Initiative in 2009. The RECC Initiative was developed to examine the issue of overrepresentation of Black and Latino children and their families in the state's child welfare and juvenile justice systems. In addition, this initiative is examining the under representation of the same populations in necessary services that can prevent out-of-home placements in other systems (i.e. child care, adult services, services to the blind and visually handicapped). Each OCFS division has staff represented on this committee. OCFS is engaging our local partners in this effort.

In 2009, OCFS Commissioner Carrión sent a memo to the commissioners of the local departments of social services inviting them to collaborate with OCFS to safely reduce the high numbers of our out-of-home placements by reducing and eliminating racial disparities for Black and Hispanic/Latino youth. Six counties initially responded with one additional county joining the initiative in the fall of 2010, so that in 2010 – 2011, there were seven counties working with OCFS and Casey Family Programs to reduce and eliminate racial and ethnic disparities. They received a small planning grant to develop plans and budgets and to pay for technical assistance and training. In 2012, five additional counties joined the statewide RECC initiative, bringing the total to 12 counties currently engaged in the work.

Accomplishments for 2012 -2013:

OCFS' Strategic Planning and Policy Development (SPPD) Special Projects staff began to work with staff from DCWCS on a project to determine if there is any impact on RECC outcomes as a result of families that are involved on the Family Assessment Response (FAR) program. We are working with consultants from the Butler Institute (formerly with the American Humane Society) to do case reviews and interviews with families as well as to convene meetings between the providers from the counties to engage in a dialogue about the RECC /FAR work.

National expert Khatib Waheed began to work in earnest in New York State in Monroe County, and developed plans to work in Genesee. SPPD began a dialogue with him about working with OCFS executive and regional office staff to begin to develop the agency's capacity to provide leadership related to the work throughout OCFS and to provide technical support and assistance to the counties through the regional offices.

Casey Family Programs (CFP) sponsored a statewide planning meeting for the RECC counties and regional office staff.

CFP sponsored a two day planning session for three counties that are working with children and families using the Family Assessment Response and that are involved in the OCFS' RECC program.

OCFS provided coaching and technical assistance to the staff of the Bronx Family Court under the leadership of Judge Gail Roberts.

SPPD Special Project staff developed and presented documents for consideration by DCWCS on promising approaches and strategies for addressing RECC at the regional level.

SPPD Special Projects staff continued to work with Khatib Waheed and CFP leadership Dr. Ralph Bayard and Howard Knoll. CFP sponsored an initial Learning Exchange with Mr. Waheed which was well received and the agency immediately began to develop plans to have Mr. Waheed back for a second Learning Exchange session in early 2013.

Mr. Waheed presented the second Learning Exchange on Race Equity with the OCFS Executive Staff and convened an initial session with the OCFS Regional Office staff from the Division of Child Welfare and Community Services and staff from the Division of Juvenile Justice and Opportunities for Youth.

Schenectady County formally joined the RECC initiative and after meeting with county leadership, Columbia County was invited to join. This brings the total number of counties involved in the OCFS RECC program to 12.

SPPD Special Projects staff presented at the NYC Family Court Seminar for Referees and Court Attorneys RECC conference and at the Rockland County senior staff meeting and CFSR public hearing. The Rockland County DSS presented the RECC work as the foundation for the CFSR public hearing, which is the first time that this has occurred in NY State.

SPPD Special Project staff convened three meetings of the OCFS Race Equity and Cultural Competence Work Group during the period and welcomed new members to the group.

Plans for 2013-2014:

- OCFS executive leadership will continue to pursue training and consultation through Learning Exchanges on Race Equity with national experts.
- OCFS regional offices staff will be engaged in the learning exchanges and will be trained to include the race equity lens in their work with the RECC counties.
- OCFS will develop a process to include the race equity training as part of the ongoing training efforts for staff through the bureau of training and the SPPD Special Projects.
- OCFS will bring in one more county to work on the RECC program with the 12 that are currently engaged in the work.
- OCFS will work with Casey Family Programs to consider the development of a RECC advisory committee comprised of three to four counties that are working on RECC and implementing the FAR program.

- OCFS will consider the value of pursuing the Texas RECC Model, which was supported by the state legislature and included funds for regional RECC staff to support the work in over one dozen jurisdictions throughout Texas.
- OCFS will continue to support the work of the Courts Catalyzing Change as it relates to RECC in the Bronx and Westchester counties.

Fatherhood Initiatives

OCFS and OTDA continued to collaborate and meet regularly to encourage and support the development of responsible fatherhood initiatives. Both changes within OTDA and subsequent State fiscal circumstances affected planning that was developed through 2011. This update highlights the current status New York's fatherhood initiatives.

Accomplishments 2012-2013:

- The OCFS Division of Juvenile Justice and Opportunities for Youth (DJJOY) continued to implement and develop its fatherhood initiative. The group of young fathers at Brookwood Secure Center met consistently throughout 2012 and 2013. OCFS' MacCormick program continues to be a model for the other DJJOY facilities. Highland Residential Center started their fathers group in late 2010 and continues to engage in efforts serve a small group of young fathers.
- OCFS, OTDA and other stakeholders are entering into the eighth year of the "Dads Take Your Child to School" initiative. OTDA and OCFS continued to expand the program, which is now active in throughout the state. Over 3500 Dads participated in more than 200 schools and child care centers across the state.
- As a system of service delivery, Healthy Families NY (HFNY) has focused on fathers' involvement in the program. OCFS employs specialized staff that focuses on fathers, the services that they need, and how to help them become more involved in their children's lives. OCFS research has shown thus far that those families that have active father involvement are involved in the HFNY program longer, and have more home visits. OCFS is also beginning to look at breastfeeding duration for those mothers who have a supportive father figure active in the lives of the mother and child. HFNY held a successful fatherhood information summit in October 2012. Support workers from around the state came to discuss engagement strategies, success stories, and heard from three fathers that are engaged in the program and the effects of the program on their involvement with their children. The program has bi-monthly conference calls for staff working on this initiative to discuss an array of topics of interest for those in the field. Topics may include curricula used, activities to enhance the program, and helpful resources for fathers.

Plans for 2013-2014:

- Convene meetings with fatherhood work group (as necessary) to review and consider various activities and projects.

- Continue to support the development and expansion of OCFS DJJOY fatherhood program.
- Encourage development of fatherhood programs in specific voluntary agencies within DCWCS.
- Convene periodic meetings between DJJOY and DCWCS/HFNY fatherhood coordinators.
- Promote the use of responsible fatherhood programs as a way to address disproportionate minority representation efforts within the RECC program counties.

Advantage After School Program

New York State created the Advantage After School Program (AASP) in 2000, to provide quality youth development opportunities to school-age children and youth for the hours directly after school. These programs are supported by school, community, public and private partnerships. AASP offers a broad range of educational, recreational and culturally diverse, age appropriate activities that integrate what happens in the school day. Youth and family involvement in program planning and implementation is a key component. Programs may also extend hours into the evening hours, particularly when serving older adolescents. AASPs are a true representation of community partnering for kids and their families.

The Advantage After School Programs are designed around four program outcomes, three performance targets, and established Program Standards of Excellence. The Advantage After School Program Outcomes are:

- To improve the social, emotional, academic and vocational competencies of school-age children;
- To prevent and reduce the incidence of out-of-wedlock adolescent pregnancies;
- To reduce other negative behaviors such as violence and crime; tobacco, alcohol and substance abuse; disengagement from school; school suspension; and truancy and health-compromising behaviors; and
- To provide parents with a safe after school environment for their children.

Advantage After School Programs have three performance target areas that relate to the achievement of these four program outcomes. The three performance target areas for all programs are:

- Child Performance – a measurement of how children that regularly attend the after school program will enhance their academic achievement
- Youth Involvement/Attendance - a measurement of program quality as demonstrated by the consistency of attendance by the children enrolled in the after school program.
- Parental/Guardian Involvement – a measurement of program quality as demonstrated by parent satisfaction and participation

Accomplishments for 2012-2013:

A Request for Proposals (RFP) was released in June 2012 which resulted in 45 new contracts being awarded a total of \$6.8 million. In addition there are 77 contracts that have been renewed as part of the \$17,755,000 appropriated for the Advantage After School Program SFY 2012-13.

The Advantage After School Program partnered with the New York State Association of Youth Bureaus on October 24-25, 2012, for the 42nd Annual Youth Development Training Conference - Embracing Youth Development: Making a *Difference* for a Better Tomorrow, offering a diverse range of workshop presentations at the event held at the Holiday Inn on Wolf Road in Albany, NY. There were 35 workshops offered with almost all of the workshops eligible for School Age Child Care (SACC) training credits.

In February 2013, the New York State Afterschool Network (NYSAN) did Quality Self-Assessment webinar training for Executive Directors, Program Coordinators and all program staff of the Advantage After School Program for our new contractors.

Beginning in the 2010-11 program years, OCFS began using the NYSAN Quality Self-Assessment (QSA) Tool with Advantage After School Program (AASP) grantees. This webinar is for AASP grantees to learn more about using the NYSAN Program QSA Tool for continuous program improvement.

Program Service Descriptions According to Goals

GOAL #1

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

Primary Strategy: 1. Infuse and implement family-centered principles into casework practice that promotes family engagement across all stages of the child welfare delivery system.

National research, as well as New York State stakeholders, lead us to the conclusion that when a family is actively engaged in developing a plan to improve their family functioning, they are more likely to commit to the goals and the personal work required to achieve those goals. From the initial contacts and through-out the life of the case, family engagement is at the core of helping a family address their children's need for safety, permanency and well-being.

Goal: Increase the engagement of families in the assessments of needs and strengths, case planning and positive outcomes.

Action Steps and Benchmarks:

1. Obtain commitment from the 13 counties with the highest foster care population to adopt and implement a Family Engagement initiative.

Benchmarks 1.1(a) Letter sent to counties identifying Family Engagement as NYS key practice and to have each district adopt it as a key strategy in their PIP (submitted in a logic model format)

1.1(b) Develop and distribute CFSR data relative to safety, permanency and well-being. Districts are required to complete a local self-assessment based on data and local stakeholder input that identifies any need for improvement in family engagement

1.1(c) Provide T/A to districts related to the understanding and use of CFSR data

1.1(d) Development and distribution of four sample family engagement logic model templates that assist districts in identify their needs and connect them to the strategy that best facilitates practice change

1.1(e) Provide T/A to districts related to the understanding and use of logic models. The needs in the area of family engagement differ by districts, therefore regional and home office support will be tailored to assist each district in selecting those strategies based on their identified needs.

1.2 OCFS will provide or coordinate training and technical assistance to the 13 counties in implementing family engagement strategies Benchmarks 1.2(a) Review local district PIPs to identify the training and technical assistance to be responsive to the strengths, needs, and strategies in implementing Family Engagement

1.2(b) Develop and distribute electronic versions of Family Engagement Toolkits to districts and agencies

1.2(c) Family Engagement Specialists will provide training and coaching as needed

1.2(d) CPS staff in the counties participating in FAR initiative will receive training in culturally competent family engagement from AHA

1.3 Expansion of Family Assessment Response (FAR has been implemented in six counties, four of which are part of the 13 counties.)

1.3(a) FAR will be expanded to eight additional counties in Round 2. One of which is part of the 13 counties.

1.3(b) Applications for round 2 received and approval letters provided back to the counties

1.3(c) Planning calls held with round 2 counties

1.3(d) district specific training provided by AHA

1.3(e) FAR symposium held to afford knowledge exchanged between round 1 and 2 counties who are implementing

1.3(f) FAR evaluation completed

1.4 Monitor LDSS's progress in implementation of family engagement strategies

1.4(a) Develop and distribute quarterly reporting forms for districts to indicate the action steps they took during the quarter with respect to their Family Engagement activities.

1.4(b) Review, analyze and provide feedback to each of the districts on their quarterly reporting forms

1.4(c) Develop and administer online surveys of front line staff and supervisors to determine changes in knowledge, attitudes, skills and motivation around Family Engagement.

1.4(d) Complete analysis of data and write report

Primary Strategy: 5. Redesign of the Statewide Information System

The Statewide Assessment noted concerns regarding the accuracy and currency of information relevant to a child's goals due to challenges surrounding the timeliness of data entry into New York's statewide information system (CONNECTIONS). OCFS has proposed several ways to promote more timely data entry of permanency planning information in CONNECTIONS that will increase the accuracy of the information available to caseworkers.

Goal: NYS' Statewide Information System will be user-friendly and provide timely and accurate child welfare data.

Action Steps and Benchmarks:

5.1 Procurement and distribution of approximately 1,510 laptops to enable Foster Care workers to access CONNECTIONS to record casework contacts in a timely manner

5.2 Development and deployment of Share point technology that affords caseworkers and supervisors access to critical workload and performance measures.

5.2(a) Provide LDSS and VA users with training on Share Point technology.

5.3 Deployment of a new dot.net style of architecture that will allow caseworkers to easily navigate in and out of their workload, organize critical tasks, and maximize use of pre-fill options which will assist in the improving timeliness and accuracy of data

5.3(a) Provide LDSS and VA users with training on new transformation technology.

5.4 Develop and implement an enhanced dynamic Permanency Hearing Report

5.4 (a) Provide training to LDSS and VA users on the new Permanency Hearing Report

Primary Strategy: 7. Enhance training of voluntary agency staff participating in the Improved Outcomes for Children as initiated by the Administration for Children's Services.

OCFS will review and provide guidance related to the training and technical assistance offered by the Administration for Children's Services (ACS) to voluntary agency staff, who through the Improved Outcomes for Children initiative will be responsible for the case planning and management of child welfare cases (preventive and foster care).

ACS's training and technical assistance will focus on Family Team Conferencing facilitation training. Refresher days will also be included.

Goal: Training will be provided to voluntary agency staff participating in ACS' Improve Outcomes for Children initiative.

Action Steps and Benchmarks:

7.1 Review and Monitor ACS' training to IOC agencies on Family Team Conference facilitation skills.

ASSESSMENT OF NEED AND CURRENT STATUS

Between 1998 and 2005 admissions to foster care declined steadily. This trend changed in 2006, when there was a 26.7 Percent increase in admissions. In 2007, admissions were down 4.1 Percent from the previous year. In 2008 admissions went up slightly 1.1 Percent. For 2009 admissions declined 5.1 Percent. For 2010 the admissions declined 3.1 Percent from 2009. In 2011 admissions declined 16.6 Percent from 2010. In 2012 admissions declined 5.7 Percent from 2011. The number of care days in foster care in 2012 also declined 4.8 Percent compared to 2011.

An analysis of foster care admission in 2012 data reveals that the two age cohorts most highly represented are children under the age of two and children age 14 -17. This reflects the same age cohorts as 2011: Children under the age of two (22.4 Percent) and children age 14-17 (30.8 Percent). The percentage for admissions is as follows: for the age group of 2-5 years is (18.2 Percent), 6-9 years is (13.6 Percent), 10-13 years is (14.3 Percent), and 18 years and over is (0.8 Percent). The older age group is most likely to come into care after contact with the juvenile justice system.

The percentage of foster care readmissions as a function of all admissions remained stable. In the year 2006, readmissions were 11.8 Percent of admissions. Since that year, the percentage has fluctuated. For years 2007, 2008, 2009, 2010 readmissions were 11.9 Percent and 14.0 Percent, 13.3 Percent, and 10.6 Percent respectively. In 2011, the percentage of readmissions rose to 14.4 Percent. For 2012, the percentage of readmissions was 14.0 Percent reflecting a slight decrease from 2011.

PERFORMANCE TARGETS

Lack of Recurrence of Child Abuse and Maltreatment (CAM)

A state meets the national standard for this indicator if, of all children who were victims of substantiated or indicated child abuse and/or neglect in the first six months of the reporting period, 93.9 Percent or more children had no additional substantiated or indicated report within six months.

NEW YORK STATE PERFORMANCE:	2005	87.3%
	2006	86.3%
	2007	87.7%
	2008	87.9%
	2009	87.8%
	2010	87.7%
	2011	87.8%
	2012	87.6%

Data Source: OCFS DATA WAREHOUSE

STATE AND LOCAL ACTIVITIES

Prevention Services Program

The OCFS TANF Prevention Program was created in response to the community needs throughout the State for resources to support community-based efforts that implement a wide range of primary and secondary prevention and permanency planning services.

A total of 48 preventive and post adoption services programs statewide are supported by approximately \$14 million from the SFY 2011-2012. Programs started in May 2012 and most will end in June 2013. An additional \$610,000 in SFY 2012-13 provided a modest increase in funding to all 48 programs.

TANF Prevention funds are to support programs to prevent child abuse and maltreatment, and to keep children and youth out of foster care and other out-of-home placements, or enable them to be reunited earlier. Post adoption funds support programs designed to:

- Stabilize adoption placements
- Prevent dissolutions or disruptions, and
- Provide assistance to families so that children may be cared for in their homes or homes of relatives

Data indicators used for selection of grantees included high rates for poverty, disproportionate minority representation (RECC), children indicated in child protective cases, first time placements, and exits to adoption within two years. Current programs serve families with one or more risk factors such as substance abuse and mental health, incarceration, domestic violence, single or teen parent, and low education. Programs work with families who are at risk of entering the child welfare system as well as families already involved in the child welfare system. Families must meet TANF income eligibility guidelines (income below 200 Percent poverty level).

Selected community-based prevention programs deliver a wide range of services and program types including Comprehensive Intensive Prevention programs, Early Primary Prevention programs, Supervised Visitation programs for families experiencing domestic

violence, Post Adoption programs, and Regional Post Adoption, and Permanency Centers.

Accomplishments 2012 – 2013:

A standardized data system was piloted with the TANF prevention programs to improve accountability, and demographic data on adults and children being served. Performance measures were standardized in the contracts and will be tracked through the web-based data system in the future.

Plans for 2013-2014:

The State budget for 2013-2014 appropriated \$610,000 in federal TANF funding for the support and development of prevention and post adoption services. Given the limited resources, priorities under this initiative are to be determined. A final report compiling lessons learned and outcome data will be prepared in late 2013 upon completion of the current programs.

Healthy Families New York (HFNY)

Based on the national Healthy Families America (HFA) model, Healthy Families New York (HFNY) is a community-based prevention program that seeks to improve the health and well-being of children at risk for abuse and neglect through the provision of intensive home visitation services. HFNY offers systematic assessment of pregnant women and new parents for risks that may lead to child abuse and poor health/ development outcomes. Specially trained paraprofessionals, who typically share the same language and cultural background as participating families, deliver home visitation services to families identified as being at high risk until the child reaches five or is enrolled in Head Start or kindergarten.

Home visitors provide families with support, education, and linkages to community services aimed at addressing the following goals: 1) to promote positive parenting skills and parent-child interaction; 2) to prevent child abuse and neglect; 3) to ensure optimal prenatal care and child health and development; and 4) to increase parents' self-sufficiency. Home visits are scheduled biweekly during pregnancy and weekly during the first six months or so of the child's life. As families progress through the service levels based on their needs, the frequency of home visits declines, from biweekly, to monthly, and then quarterly.

HFNY is administered by OCFS in partnership with Prevent Child Abuse New York (PCANY) and the Center for Human Services Research (CHSR) at SUNY Albany. The initiative is modeled after Healthy Families America (HFA), the most widely disseminated home visitation program in the nation. New York is one of a handful of states to have earned a HFA multi-site certification in a very rigorous credentialing process.

All of the programs are located in high need areas. Between April 1, 2012 and March 31, 2013, there were 3,454 families assessed, 2,473 fathers have been involved in program services, and 5,808 families received 79,053 home visits. Since the HFNY program began in 1995, 30,979 families have been served and 976,539 home visits have been provided.

Accomplishments 2012-2013:

The State Budget for 2012-2013 included \$23.2 million. Accomplishments include continuation and exploration of additional funding streams for the HFNY Program. The programs will continue to add families as they serve their current caseload.

Our program engaged the NYS Office for the Prevention of Domestic Violence (OPDV) in training for our HFNY staff. OPDV developed both a training curriculum and a train the trainer curriculum for our program staff. Approximately 50 Percent of our front line staff received direct training from OPDV. The remainder of the staff and new staff are trained by those HFNY staff trained in the curricula so that they can deliver the training on site and as needed. Currently we are beginning work with OPDV on computer based training that will afford all staff access to safety planning training with families when domestic violence is present.

As a general body of knowledge it is known that fathers play an important role in their children's healthy development. Fathers have an effect on children's cognitive development, school readiness, emotional well-being, and social development. As a system of service delivery, HFNY has focused on fathers' involvement in the program. We employ specialized staff that focuses on fathers, the services that they need, and how to help them become more involved in their children's lives. Our research has shown thus far that those families that have active father involvement are involved in the HFNY program longer, and have more home visits. OCFS is also beginning to look at breastfeeding duration for those mothers who have a supportive father figure active in the lives of the mother and child. HFNY held a successful fatherhood information summit in October 2012. Support workers from around the state came to discuss engagement strategies, success stories, and heard from three fathers that are engaged in the program and the effects of the program on their involvement with their children.

OCFS staff provides onsite and regional technical assistance and monitoring to the sites. During 2012-2013, monitoring visits were conducted to 22 programs and 23 quality assurance visits took place. OCFS staff focused their visits on the management of the program, community relationships, and ability of sites to meet HFA standards for providing quality home visits. OCFS staff reviews all of the sites' policy manuals and practices to determine if policies and practices are in compliance with New York State and HFA standards.

Over the past year, the Schuyler Center for Advocacy and Analysis has continued to bring together a group of OCFS, State Health Department (DOH), and local county health departments and provider agencies to work towards developing a coordinated

system of home visiting. It supports the idea that all new families in NYS should receive assistance from a system of support and services that promotes optimal health, mental health, family functioning and self-sufficiency. Work has focused on coordination of existing services and exploration of increased funding to expand services including HFNY funding, Medicaid funding, TANF Block grant and COPS funding.

OCFS continues to work collaboratively with DOH to coordinate and expand home visiting services and assist localities to develop coordinated systems of care using the State's Maternal, Infant and Early Childhood Home Visiting Program formula based grant (Miechv) through provisions in the health care freeform legislation, the Patient Protection and Affordable Care Act (H.R. 3590; Sec. 2951). During the past year OCFS has been working with our HFNY programs in the Bronx (3) and in Erie County (1) to expand services to additional targeted areas. Expansion of these home visiting sites will provide us the opportunity to serve an additional 300 families in those counties. OCFS is currently working with DOH to expand home visiting in the state through a competitive Request for Applications. OCFS is reviewing 34 proposals and expect to fund one or two new or expansion programs which are slated to begin October 2013.

The HFNY evaluation points to many positive health outcomes for participants including reduction of the incidence of low birth weight and increase in access to health care for both the mothers and infants. OCFS staff continues to inform local social services districts about the benefits of home visiting and available funding options by meeting with counties directly and by holding workshops where these policymaker's are present.

OCFS has been contacted by the New York State Developmental Disability Planning Council (DDPC) and a proposal has been issued for a demonstration project for HFNY's programs to work with parents who have developmental disabilities to assist them in improving their parenting skills. Two HFNY programs are directly contracting with DDPC, and one program is working collaboratively with another agency who works exclusively with developmentally delayed clients. We are looking forward to hearing from these programs about best practices and curricula used when working with developmentally delayed parents.

HFNY has to look at its effectiveness in promoting children's academic adjustment and success. Our researchers have looked at data collected at baseline, birth, and at one, two, three and seven years post-birth. Based on our preliminary information it appears that children who had a higher percentage of levels where they received at least 75 Percent of their expected visits were more likely to be in the group of children who excelled academically and were less likely to be in the group of children doing poorly academically. We will continue to look closely at this information to assist us when making policy and procedural decisions.

Plans for 2013-2014:

HFNY administrative staff continues working with our Miechv recipients on expansion of home visiting programs. OCFS has been working with individual programs refining

the specific Needs Assessments for their target areas. OCFS finalized required benchmarks and reporting requirements for the funding agency, and developed tools and training for staff at the expanded sites for their additional responsibilities. Sites began enrolling families this year.

As a result of our Randomized Controlled Trial, HFNY has been shown to have significant positive effects on birth outcomes, and more specifically low birth weight. By enrolling families as early as their first trimester the program can assist families in improving birth outcomes for their child. In addition, families who are enrolled prenatally tend to stay in the program longer and have stronger outcomes overall. Five sites participated in the initial phase of the pilot and yielded good results. The information learned assisted in refining forms and development of a tool kit to assist the system in enrolling families early in their pregnancy. An additional five sites were selected to begin working on a target of enrolling families earlier in their pregnancy. As a way of measuring our success on changing our practice, we revisited our original five sites to see if earlier enrollment was sustained a year later. It has been sustained and as a result of our change in practice the whole multi-site system has made improvements in the number of pre-natal enrollments.

HFNY's Management Information System underwent a change from the current system to a web based system in January 2013. In preparation for this, OCFS has been reviewing all of the forms completed by program staff and the information collected in order to make the new system as useful as possible. The new system incorporates the new federal guidelines and outcome information, improve data collection and measure outcomes better.

HFNY's state system began the Healthy Families America accreditation process in March 2012, and is currently in its last phases. The Central Administration completed a self-assessment and has been reviewed and received passing scores on all aspects of service delivery. During the summer and early fall ten sites were chosen for review. Five sites did not have to respond at all with regards to their service delivery, with two having all the elements in adherence, while three had minor revisions, and two sites had a more detailed response. We anticipate that the system will receive its credential by the end of 2013. This will be the third time that the system has participated in this process.

Evaluation of HFNY:

To assess the impacts of HFNY on parenting, child health and development, and parental life course development, in 2000, OCFS' Bureau of Research Evaluation and Performance Analytics in collaboration with the Center for Human Services Research at the University at Albany initiated an evaluation of HFNY utilizing a randomized controlled trial in three counties with established home visitation programs (Erie, Rensselaer, and Ulster). The randomized trial includes 1,173 women who met the eligibility criteria for HFNY and were randomly assigned to either an intervention group (n=579) that was offered HFNY services or a control group (n=594) that was given information and referrals to other appropriate services. Mothers were interviewed in their

homes at intake into the study and again at the time of the child's birth, and first, second, and third birthdays. The Year three follow-up also included videotaped observations of a subsample of 522 mothers interacting with their three-year-old children during a series of structured situations that imposed varying demands on mother and child. To minimize the potential for biased measurement, interviewers were independent of the HFNY program and were kept blind to the participant's group assignment. The rate of retention in the study was high, with 91 Percent of the study participants who were interviewed at baseline re-interviewed at Year one and 85 Percent re-interviewed at Year two. In addition, data on reports of child abuse and maltreatment involving families participating in the study were collected through a review of Child Protective Services (CPS) records.

In the fall of 2006, OCFS was awarded grants totaling more than \$1.2 million from the National Institute of Justice (NIJ) and the Doris Duke Charitable Foundation to extend the HFNY randomized trial from three years to seven years in order to test the program's long-term effectiveness in preventing child abuse and neglect. Mothers in both the intervention and control groups were reinterviewed at the time of the target child's seventh birthday, and for the first time, the target children were interviewed. In addition, videotaped observations of parent-child interactions were performed for a subset of the study's families. Data collection for the Year seven follow-up study was completed in April 2009. Interviews were conducted with 942 mothers (81 Percent) and 800 children, and 419 videotapes were completed. Final reports on the results of the Year seven follow-up were submitted to NIJ and Doris Duke in 2011.

In March 2010, the Pew Center on the States awarded OCFS \$112,000 to expand the scope of its RCT to further evaluate the effectiveness of home visiting services. Funds from Pew supported the collection and analysis of first grade school records of children participating in the RCT. The data were used to address several gaps in the home visiting knowledge base: (1) What effect does home visiting have on children's academic outcomes immediately following the transition to school?; (2) What are the conditions under which home visiting is particularly effective?; and (3) What is the relationship between service duration, intensity and content, and children's academic adjustment? The Bureau of Research Evaluation and Performance Analytics submitted a final report to Pew in 2012.

Key Evaluation Findings

The following results have been abstracted from peer-reviewed articles appearing in the *American Journal of Preventive Medicine* and *Child Abuse and Neglect*, OCFS working papers, and reports to project funders.

Prevention of Child Abuse and Neglect

- The program produced a reduction in the rate of confirmed reports for two subgroups within the sample: mothers who were already involved in a substantiated Child Protective Services (CPS) report prior to random assignment (the Recurrence Reduction Opportunity, or RRO, subgroup) and first-time mothers under age 19 who were offered HFNY early in pregnancy (the High Prevention Opportunity, or HPO, subgroup).

- RRO Subgroup: Compared to their counterparts in the control group, HFNY mothers in the RRO subgroup had markedly lower rates of involvement—from random assignment to Age five—in confirmed CPS reports for any type of abuse or neglect (41.5 Percent vs. 60.4 Percent); in confirmed reports involving physical abuse (3.3 Percent vs. 13.4 Percent); and in preventive, protective, and placement services (38.0 Percent vs. 60.0 Percent).
- HPO Subgroup: Program impacts on confirmed CPS reports began to emerge for the HPO subgroup around Age five, or at time of entry into school. From Age five to seven, the target children of HFNY mothers in the HPO subgroup were less likely to be named as confirmed victims in CPS reports than were their counterparts in the control group (9.9 Percent versus 19.3 Percent).
- Whole Sample: Maternal and child reports of physical aggression were considerably lower for the HFNY group than for the control group at Ages one, two, and seven, revealing a sustained pattern of effects over the first seven years of life.
 - At Ages one, two, and seven, HFNY mothers reported committing 75 Percent-88 Percent fewer acts of serious physical abuse (e.g. hitting child with fist, slapping on face, kicking) than mothers in the control group.
 - At Age one, HFNY mothers reported engaging in fewer incidents of minor physical aggression than mothers in the control group.
 - When the target children were interviewed at Age seven, those in the HFNY group were less likely to report that their mothers engaged in minor physical aggression against them than were the children in the control group (75.7 Percent versus 81.6 Percent).
 - At Age seven, target children who received HFNY were 25 Percent less likely than target children in the control group to report that their mothers left them alone when they were not sure they would return.
- HPO Subgroup: HFNY was particularly effective in reducing the use of aggressive and harsh parenting practices among mothers in the HPO subgroup, with the effects enduring from early childhood to school age.
 - Compared to their counterparts in the control group, HFNY mothers in the HPO subgroup were substantially less likely to report engaging in minor physical aggression (51 Percent vs. 70 Percent) and harsh parenting (41 Percent vs. 62 Percent) at Age two.
 - Effects of a similar magnitude emerged at Age three, with HFNY mothers displaying lower rates of harsh parenting behaviors while interacting with their children during structured tasks.
 - At Age seven, HFNY mothers were less likely to report using psychological aggression and minor physical aggression with their children than were control mothers in the HPO subgroup.

Positive Parenting Practices

- Whole Sample: HFNY promoted the use of positive parenting skills that support and encourage children's cognitive and social development across developmental stages.
 - At Age two, mothers assigned to the HFNY group were more likely to endorse appropriate limit setting strategies than those in the control group.
 - At Age three, mothers assigned to the HFNY group were more likely than those in the control group to be observed using parenting strategies that stimulated the child's cognitive skills and were sensitive to the child's needs and affective cues.
 - At Age seven, HFNY mothers were more likely than control mothers to use non-violent discipline strategies, and also used these strategies more often.

Improved Birth Outcomes

- Mothers who enrolled in HFNY before their 31st week of pregnancy were only about half as likely as control group mothers to deliver low birth weight babies (5.1 Percent vs. 9.8 Percent).
 - The rate of LBW for mothers receiving HFNY met the goal of 5 Percent set by the U.S. Department of Health and Human Services in its Healthy Families 2010 initiative.
 - HFNY was particularly effective in reducing LBW among black and Hispanic mothers—groups that persistently experience high levels of poor birth outcomes. For example, black mothers who were assigned to home visiting group were 70 percent less likely than black mothers in the control group to deliver LBW babies.
 - HFNY offers opportunities for substantial Medicaid savings through large-scale reductions in LBW. In 2007, Medicaid rates covered the delivery of 107,418 babies, including 9,800 LBW deliveries at a cost of \$241,429,372. If these pregnant women had initiated services with HFNY prior to the 31st week of pregnancy, it is estimated that the program would have averted an additional 4,300 LBW deliveries and saved Medicaid \$96.8 million.

Children's Educational and Cognitive Outcomes

- Whole Sample: The results of the study demonstrate that HFNY promotes children's success in school.
 - Children in the HFNY group were more likely to participate in a gifted program and less likely to receive special education services and to self-report skipping school than were children in the control group.
 - Children whose mothers were offered HFNY were half as likely to repeat first grade as children in the control group (3.5 Percent vs. 7.1 Percent).

- HFNY children were more likely than children in the control group to score above grade level in first grade on three behaviors that promote learning: working or playing cooperatively with others, following directions or classroom rules, and completing home or class work on time (13.2 Percent vs. 7.7 Percent).
- HPO Subgroup: As compared to their control group counterparts, HFNY children in the HPO subgroup were less likely to score below average on a standardized vocabulary assessment and to repeat a grade, and more likely to participate in a gifted program.

Long-Term Monetized Benefits and Costs of HFNY

The cost to deliver the HFNY program varied across participants, but was approximately \$4000 per family. Other costs to government were calculated by summing expenses associated with public assistance and food stamp payments, Medicaid births, CPS investigations, preventive services and foster care placements, and then subtracting income tax revenues. Potential savings were estimated by comparing other government costs across the HFNY and control groups.

- RRO Subgroup: For the RRO Subgroup, HFNY generated savings in other government costs of \$12,395 by the target child's seventh birthday. As a result, HFNY returned \$3.16 for every dollar invested in RRO families.
- Whole Sample and HPO Subgroup: Although the savings in other government costs did not outweigh the cost of delivering HFNY for the whole sample and the HPO subgroup, the investment in HFNY produced non-monetized benefits in terms of:
 - Decreased physical abuse and aggression as reported by mothers and children
 - Reductions in confirmed reports from age five to seven for children in HPO subgroup
 - More nurturing, responsive, and positive parenting
 - Decreased reliance on special education
 - Increased participation in gifted programs
 - Lower rate of skipping school
 - Lower rate of retention in first grade
 - Better performance on behaviors that promote learning
 - Reductions in repeating a grade and improvements in vocabulary assessments (HPO Subgroup)

Based on the evaluation's rigorous random assignment design and program's significant and positive effects on a range of outcomes, HFNY was designated as a "proven program" by RAND's Promising Practice network and an effective program by both Child Trends and the Office of Juvenile Justice and Delinquency Prevention. These findings also played a substantial role in the designation of Healthy Families America

home visiting programs like HFNY, as meeting the federal DHHS criteria for an evidence-based early childhood home visiting service delivery model.

Family Assessment Response (FAR)

In 2007, the New York State Legislature enacted Chapter 452 of the Laws of 2007, which temporarily authorized the establishment of differential response (DR) programs in local departments of social services (LDSS) outside of New York City in order to provide a more flexible and effective response to families reported to the Statewide Central Register of Child Abuse and Maltreatment (SCR). OCFS developed strong partnerships with local districts, the American Humane Association (AHA), the Schuyler Center for Analysis and Advocacy, and the Casey Family Foundations to support New York's model development and implementation. After changes in their corporate mission, American Humane Association (AHA) withdrew as OCFS' provider of FAR implementation support. Fortunately, Butler Institute for Families at the University of Denver has joined the existing partnership and incorporated the former AHA FAR implementation support personnel into its operations, with no interruption of service to FAR county or state implementation efforts.

The Family Assessment Response (FAR) program grew from six counties who pioneered FAR in 2008 to include eight Round two counties, and five Round three counties, four Round four counties, four Round five counties between September 2009 and December 2012. Since January of 2013, three new districts have implemented FAR and with other districts continuing to apply to OCFS for permission and support to implement and expand FAR. Since the inception of FAR, four counties have withdrawn from this voluntary program, primarily due to district-specific issues not related to FAR practice; one of them is currently planning to reapply.

The law required that OCFS conduct an evaluation of the DR initiative and submit to the Governor and the Legislature a final report presenting findings and recommendations. This report, with evaluation data, was submitted in January 2011 with an update published in May 2013.

Subsequent to the receipt of the final report, the legislature unanimously passed Chapter 45 of the Laws of 2011, permanently authorizing OCFS to provide FAR as an alternative child protective response to allegations of maltreatment. NYC is no longer excluded and implemented FAR in Queens Zone B in January 2013. FAR regulations drafted with the input of participating FAR counties, will be distributed for public comment in 2013. Currently, 25 social services districts provide FAR. Since the beginning of FAR implementation in 2008, over 32,300 CPS familial reports have been assigned to FAR for their child protective response.

Plans for 2013-2014:

With support from Casey Family Programs and consultants from the Butler Institute, continue to explore the relationship between FAR and RECC in select counties implementing both programs.

Family Unification Program Demonstration (Department of Housing and Urban Development)

The Family Unification Program (FUP) is a federal initiative under the federal Department of Housing and Urban Development (HUD) which provides limited Section 8 assisted housing to families whose children are at risk of foster care placement or whose return to the family is delayed primarily due to a lack of adequate housing. Families must be certified as eligible for the service through the public child welfare agency, which in New York is the local department of social services. Eligibility in New York State parallels eligibility for mandated preventive services. HUD program rules require that the program include both public housing authority and public child welfare agency participation for locating, identifying and assisting eligible families. In New York State this involves the New York State Division of Housing and Community Renewal (DHCR) and its Section 8 Local Administrators and OCFS and its social services districts.

Accomplishments in 2012-2013:

OCFS continues to concentrate upon improving the usage rate of existing FUP vouchers. As a result of the ongoing collaboration between OCFS and DHCR, the usage rate of available vouchers remains very high. The effort to involve additional districts as FUP participation continues, as does ongoing technical assistance to participating entities.

Plans for 2013-2014:

OCFS will consider new funding opportunities as they become available, and will continue to work in coordination with DHCR. Currently monitoring and awaiting future Notice of Funding Announcements (NOFAs).

Training Provided 2012-2013

OCFS continued the process of restructuring its training system for child welfare. OCFS has worked with social services districts and its university-training partners to implement a system of training that supports the development of outcome-focused practice skills. OCFS updated its foundation level outcome based training program in 2011 and the companion program for experienced staff in 2012. OCFS also integrated the principles of partnership and solution focused practice, foundational to its differential response program (Family Assessment Response/FAR). The overall training system includes greater emphasis on interviewing children; solution focused trauma sensitive care, as well as expanded web-based training and reliance on the supervisor to support transfer of learning.

The Child Welfare/Child Protective Services Caseworker Common Core is the foundation component for line staff. Based on input from OCFS's Advisory Group, the Common Core program was redesigned in 2009-2010 and was fully implemented in 2011. The Supervisory Core was implemented in 1999, and was revised in 2007. Additional revisions will be made based on OCFS' work with the Northeast and Caribbean Implementation Center on a three year grant to design a system of sustainable supports for child welfare supervisors. The Child Protective Services Response Specialty component was implemented in 2001 and was redesigned in 2010. The Adolescent Services Resource Network, designed to prepare youth for self-sufficiency, has been available since 2000. The Adoption Specialty "Achieving Permanency through Surrender and Termination of Parental Rights" was piloted in 2005 and 2006 and implemented in 2007. During 2009, OCFS worked with the National Resource Center for Child Welfare Adoption (NRCCWA) to adapt the Adoption Competency Curriculum for use in New York State. The NRCCWA conducted a series of train the trainer programs across the state to prepare voluntary agency trainers to deliver the program to their organizations. The rollout of the Family Preservation/Reunification Specialty training began in 2005. These trainings are designed to provide non-CPS child welfare caseworkers with the knowledge and skill to achieve expected outcomes. The Core Essential Skills for Experienced Caseworkers Specialty, developed specifically for experienced caseworkers, was fully implemented in 2002 in all regions of the state. This eight-day program is designed to build practice skills in more experienced staff, and mirrors the Common Core training. Redesign of the program began in 2012 and will be completed in 2013.

The Outcome Based Training (OBT) System includes an on-the-job training component. This on-the-job component facilitates the transfer of learning from the classroom to the workplace and contributes to building a mutual commitment to clear, focused practice between supervisors and caseworkers. The OBT system builds a set of professional casework skills, assessment, planning, intervention skills and decision-making skills that will allow caseworkers and supervisors to address competently the unique needs of each family. OCFS believes that this combination of casework skills, applied in a context of a shared framework of practice among social services districts and voluntary agencies, will make a significant contribution toward the achievement of OCFS's goals and the federal outcomes.

The child welfare training program continues in transition as OCFS refines its training to align with national best practice standards and evolving child welfare policy. OCFS has and is continuously exploring ways to expand the use of web-based and distance learning technologies to enhance accessibility to child welfare staff.

Training Provided in Federal Fiscal Year 2012-2013

- **Child Welfare Casework Documentation Training**

This training program prepares caseworkers to effectively document on-going case activities, decisions and milestones with families and children in a manner consistent with the practice framework, policy, and procedures of NYS. The program provides a structure for the management of the case through assessment, service planning, implementation, evaluation, and documentation. The two components of this project focus on Progress Notes and Family Assessment and Service Planning (FASP), the primary tools used to document assessment, family strengths and needs, and decision making as well as interactions with the family, collaterals, the court, and service providers. A thirteen-module FASP Reference Manual will be completed in early 2013.

1,744 trainees
174 training days

- **Working with Alcohol and Substance Affected Families**

This training program builds the knowledge and skills necessary to identify, assess, and plan with families affected by alcohol and substance abuse. Local district and voluntary agency child welfare caseworkers and supervisors develop competencies in recognizing the natural resilience of families, in utilizing strengths to motivate and facilitate change, and in supporting families throughout a member's treatment and recovery.

1,800 trainees
95 offerings
85 training days

- **Sexual Abuse Dynamics and Intervention Training**

This statewide training is provided for caseworkers in all child welfare services program areas on the dynamics of sexual abuse as well as the treatment modalities currently utilized to protect and support victims and to treat and support the family. The program builds the knowledge base that caseworkers need to identify the presence of intra-familial sexual abuse, to make accurate and effective safety assessments, interventions, risk assessments and service plans to keep children safe and reduce the risk of future harm. This course is provided to a combined audience of Child Protective and other Child Welfare caseworkers.

384 trainees
16 offerings
48 training days

- **Training for Experienced CPS Caseworkers**

This is advanced level training for child protective service caseworkers who have completed basic training. These trainings enable experienced caseworkers to strategically apply the skills they acquired in foundation training in a variety of critical areas of practice. The courses include: Advanced Medical and Legal Issues, Forensic Interviewing Best Practices, CPS In-Service training programs that are district specific training. All experienced caseworkers, including CPS staff, are also able to participate in the soon to be piloted course Advanced Child Welfare Interviewing. For those acting in a

CPS On-Call capacity, an online iLinc class is offered.

1923 trainees
61 offerings
1 teleconference
108 training days

- **Child Welfare/Child Protective Services Common Core for New Caseworkers**

The current program is required for all new CPS caseworkers and strongly recommended for all new caseworkers. The objective of the training is to equip new workers with the knowledge, attitudes, and skills to practice effectively. The training provides caseworkers with opportunities to practice using a set of skills that research and best practice standards have shown positively impact the achievement of child safety, permanency, and child and family well-being outcomes. Sixteen days of classroom training are provided for practice on assessment, safety, risk, abuse and maltreatment, interviewing children, professional casework relationships, decision making, case management, and legal skills. There is one day of integrated CONNECTIONS Systems training, for a total of 17 classroom days. The program also includes synchronous and asynchronous web-based training and on-the-job training to impart knowledge on policies, procedures, and casework practices that will prepare trainees for the skills based classroom portion of the training.

In 2012-2013, the CW/CPS Common Core for New Caseworkers training curriculum was revised to incorporate the basic principles and practices of Family Assessment Response so that the caseworkers, whether they are assigned to FAR or an investigative unit, will have a skill set that supports effective practice with families reported to the State Central Register.

334 trainees
15 offerings
240 total training days

- **Child Protective Services Response Training**

This course completes the mandated core training for child protective staff. The course builds on a set of interpersonal engagement, assessment, and decision making skills and values learned in the Common Core and apply them to the CPS role and responsibilities in the context of the CPS Response. This course focuses on the principles and techniques of investigations, relationships with other investigative bodies, legal issues in child protection, interviewing children, and methods of remediation, diagnosis, treatment, and prevention.

214 trainees
9 offerings
63 training days

- **Supervisory Core**

Supervisory Core is composed of two components: Module I Foundations, a five-day course for all supervisors that focuses on leadership, supervisory effectiveness behaviors, and generic supervision; and Module II A, the Child Protective Services Specialty, a six-day course for CPS supervisors, is under revision to become a four-day delivery, focusing on supervising the child protective response.

Module I

75 trainees
4 offerings
20 training days

Module II A

38 trainees
2 offerings
8 training days

- **Family Assessment Response Training and Coaching**

In response to 2007 legislation enabling NYS to pilot an alternative response to CPS investigations, OCFS began working with six local districts to develop and implement alternate response, known as Family Assessment Response (FAR). Throughout the three year period authorized by that legislation, additional counties implemented FAR and many expanded their FAR program. The evaluation and report to the legislature and the Governor recommended making FAR a permanent Child Protective service. Legislation making it permanent was signed into law in June 2011. OCFS has begun to build NYS capacity to train Family Assessment Response by training university partners and local district staff in FAR. Training and technical assistance is provided to district administrators, managers, supervisors, and caseworkers so that pilot staff has the knowledge and skills necessary to implement an alternative protective response.

Training and Coaching:
1,037 trainees
53 training days

- **Foster/Adoptive Parent Training**

Foster/Adoptive Parent Training consists of an integrated, comprehensive series of training courses that will be available to foster and adoptive parents from pre-placement of a child to their permanency goal. This program consists of several foster/adoptive parent leader certification preparation components, including: Group Preparation and Selection II/Model Approaches to Partnerships in Parenting (GPSII/MAPP), Caring for Our Own, Shared Parenting, and Deciding Together. These training programs prepare local district and voluntary agency staff and foster/adoptive parents to lead training groups in their areas on the topics above. A description of components follows:

- GPSII/MAPP: A 30-hour preparation and selection program delivered over a period of ten weeks by districts and voluntary agencies to prospective foster and

- adoptive parents to assess, develop, and strengthen the attitudes, skills, and knowledge needed by parents intending to foster or adopt children.
- Caring For Our Own: A preparation program specifically for relative caregivers given over a period of nine weeks.
 - Shared Parenting: An eight-week program focusing on relationship building between foster parents and birth parents for best outcome of children in care.
 - Mini-MAPP: Provides an overview of the basic concepts in the GPSII/MAPP training program to child welfare staff and foster and adoptive care staff within the agencies.
 - Deciding Together: Seven consultations are provided in this model to individual families to prepare them to foster or adopt.
 - COMPASS, the in-service (post-certification) portion of this training program, includes first-year basic and advanced courses for subsequent years in such topics as Loss and Separation, Preparing Children for Adoption, Managing Difficult Behaviors, Sexual Abuse, Child Development and Discipline among others. There is also a leader certification component to this training similar to the preparation trainings listed above.
 - Special Topics and use of the iLinc electronic training platform are other trainings available to foster/adoptive parents, local district staff, and voluntary agency staff statewide.

5,023 trainees
536 training days

- **Therapeutic Foster Boarding Home Training (TFBH)**

TFBH provides training and technical assistance in a set of core problem-solving and intervention skills for foster parents, agency workers, and trainers in therapeutic foster boarding home programs.

523 trainees
90 training days

- **Core Essential Skills for Experienced Caseworkers**

This training program is designed for staff having one or more years of direct child welfare experience who did not attend the Common Core Training. The program provides experienced staff with a framework for their practice that defines workers as agents of change who use a professional casework relationship to engage families in the assessment, service planning, and change process to achieve child welfare goals of safety, permanency, and well-being. This 8-day program builds skills consistent with those presented in the Common Core training. This program includes an optional one day 'engagement' skills clinic for supervisors.

157 trainees
9 offerings
72 training days

- **Special Topics Days** (formerly Training Support)

Special Topics Days are delivered in groups or on a one-on-one basis. Supervisors and caseworkers receive assistance to plan, implement and make operational the Outcome Based Training system in their local districts. This includes pre, mid and post core conferences with caseworkers, supervisors and staff development coordinators to assess training skills learned in the classroom and on-the-job training components and to develop a plan to meet ongoing training needs. Special Topics Days can also include training of trainer activities and providing training and follow-up training to large local districts that provide their own Core training.

24 days of training assistance
1,002 pre, mid and post core conferences

- **Safety and Risk Assessment Refresher Training – New York City**

This program builds the proficiency and capacity of ACS and voluntary agency staff in NYC to conduct accurate safety and risk assessments. The program also includes a Leadership and Development component for NYC Agency for Children Services managers and supervisors to continue the learning process with their staff after formal training (transfer of learning and sustainability). The program supports NYC's Improved Outcomes for Children for preventive and foster care agencies. Courses include: Safety and Risk Assessment Refresher Training, Safety and Risk Assessment Coaching, Supervising Safety and Risk – Critical Thinking, and Leadership Development to Support Safety and Risk Assessment Practice.

855 trainees
118 offerings

- **Family Preservation/Reunification**

This is an eight-day specialty course for Preventive, Foster Care and Adoption staff. It can follow the CWS/CPS Common Core and is presented in two modules. This program builds upon the generic caseworker skills and abilities developed by trainees during their participation in the Common Core training. It focuses on the strategic use of professional casework, assessment, and service planning skills to work with families to promote children's safety and to achieve rapid permanency. Module I is designed for Preventive, Adoption, and Foster Care caseworkers, and is a prerequisite for Module II. Module II is designed for Adoption and Foster Care caseworkers.

Module I
23 trainees
2 offerings
10 training days

Module II
11 trainees
1 offering

3 training days

- **Adoption Specialty Training**

This training currently consists of one course, “Achieving Permanency through Surrender and Termination of Parental Rights.” The six-day program provides participants with the basic knowledge and skills to assess the effectiveness of diligent efforts; determine the appropriateness of setting a goal of adoption; prepare children for adoption; use the legal process to free children for adoption and to comply with Title IV-E and State statutes. This training also includes training delivered by an attorney on diligent efforts, how to obtain a TPR and how to take a voluntary surrender. Portions of the program may be delivered through LearnLinc or comparable technology.

Achieving Permanency through Surrender and Termination of Parental Rights

47 trainees

3 offerings

18 training days

- **Family Engagement Specialty Training** (formerly Training and Consultation to Support Local District/Voluntary Agency Implementation of Family Meetings and Family Engagement Strategies)

The focus of this program is on training and consultation for the individual, unit and organization. The program highlights practices that promote and sustain family engagement. The program includes delivery of a set of toolkits designed to promote locating and engaging fathers, coached family visits and family meetings to promote safety, permanency, and well-being. Technical assistance is provided, along with district/agency specific training.

1,532 trainees

- **Directors of Services Leadership Training Forum**

OCFS introduced the Directors of Services Leadership Training Forum in 2006. This is an annual two-day event (delivered in half day/full day/half day format) intended to provide local district Directors of Services with the knowledge and skills necessary to apply generic and program-specific management principles and skills to the changing landscape of Child Welfare (Child Protective Services, Preventive Services, Foster Care, and Adoption Services). (This accomplishment also applies to Goal 2.)

59 trainees

1 offering

2 training days

- **Child Welfare Eligibility Training**

The purpose of this project is to provide social services districts with training so that staff

will have the knowledge and skill needed to accurately, effectively, and efficiently determine eligibility for federal funding of child welfare and Medicaid programs. Topics include the history and rationale of federal funding streams, how to define and understand the distinct use of each category of eligibility, the use of the Welfare Management System (WMS) and how to identify and access the resources available to help accomplish these objectives.

432 trainees
45 offerings

- **Videoconference Training for OCFS Bureau of Special Hearings Staff**

This project provides specialized training in a variety of topics for Bureau of Special Hearings staff to respond to the challenges made to the decisions of LDSS and State officials.

41 trainees
1 two-day offering

Training Planned For Federal Fiscal Year 2013-2014

Nearly all of the training programs provided in 2012-2013, as described in Goal 1 of the APSR, will be offered again in the coming year, subject to the availability of funds.

- **Child Welfare/Child Protective Services Common Core for New Caseworkers**

Child Welfare/Child Protective Services Common Core provides outcome based training for all new child welfare services and child protective services caseworkers. It focuses on building skills that are most likely to lead to positive outcomes for clients and the achievement of program objectives. The training uses a variety of methodologies, including self-instructional materials, to impart knowledge on policies, procedures and practice concepts. The program was redesigned in 2009-2010 and was fully implemented in 2011. In the new program, sixteen days of classroom training focus on the abilities required to conduct safety, risk, abuse/maltreatment and family strengths and needs assessments, the professional casework relationship, decision-making and case management skills. The program includes a module on child interviewing, solution focused trauma sensitive practice, and an enhanced on-the-job training component that is conducted by social services districts and authorized voluntary agencies to reinforce and integrate the knowledge and skills portions of the training with the realities of the job. The Common Core training also includes a supervisors' guide to the Common Core and OJT, and synchronous and asynchronous on-line web-based components. CONNECTIONS and legal training are integrated into the program.

An additional feature of the core training is an enhanced trainee evaluation process. OCFS developed a feedback loop between Core trainers and trainees' supervisors to

provide a developmental feedback on the trainees' participation in and progress through Core. A midpoint and final conference will be conducted. A written assessment tool was developed to continue to provide valuable feedback to trainees and their supervisors on trainees' progress and developmental needs.

440 trainees
20 offerings
320 training days

- **Supervisory Core**

Supervisory Core provides skill based training for new and existing child welfare and child protective services supervisors. The Supervisory Core has two components: Module I Foundations, a five-day course for all supervisors (preceded by two LearnLinc sessions); and Module II A, the Child Protective Services Specialty, a four-day course for CPS supervisors. (Module IIA is being modified and piloted in 2013.) These courses focus on building skills in leadership and the supervision of CWS/CPS casework practice. Training is also be provided to supervisors and program managers statewide on their role in developing and assessing new staff through the on-the-job training component of the new caseworker and supervisor core program.

Module I, Foundations

80 trainees
4 offerings
20 training days

Module II A, CPS Specialty

54 trainees
3 offerings
12 training days

- **Special Topics Days**

Special Topics days will be delivered to groups or on a one-on-one basis and will supplement training on the Common Core, Supervisory Core, Core Essential Skills, Family Preservation/Reunification, and Achieving Permanency through Surrender and Termination of Parental Rights. Supervisors and caseworkers will receive training support to maintain the Outcome Based Training system in their local districts. This includes pre, mid, and post-core conferences with supervisors and caseworkers to assess training skills learned in the classroom and on-the-job training components, and to develop a plan for ongoing training needs. Special topics days may also include training of trainer activities and providing training and follow-up training to large local districts that provide their own Core training.

35 days of training support

1,804 pre, mid, and post-core conferences

- **Child Welfare Casework Documentation Training**

This training program prepares caseworkers to effectively document on-going case activities, decisions and milestones with families and children in a manner consistent with the practice framework, policy, and procedures of NYS. The program provides a structure for the management of the case through assessment, service planning, implementation, evaluation, and documentation. One component of this project focuses on Progress Notes and Family Assessment and Service Planning (FASP) where caseworkers document casework practice. A thirteen-module FASP Reference Manual will be completed in early 2013.

2,075 trainees
265 training days

- **Family Preservation /Reunification**

This program provides specialized training for Foster Care, Adoption, and Preventive Workers. The training will build upon the generic caseworker skills and abilities developed by trainees during their participation in the CWS/CPS Common Core training. As a result of the Specialty training, Foster Care, Adoption, and Preventive Workers will acquire the competencies, knowledge and skills specific to their program areas. The content includes training on supporting families to make change, addressing the issues that led to placement or the risk of foster care and achieving permanency within Title IV-E timeframes. There are two components to this training: Module I is for Foster Care, Adoption, and Preventive Services caseworkers, and is five days in length. Module II is for Foster Care and Adoption caseworkers, and is three days in length. The program will be redesigned in 2013-2014.

Module I

72 trainees
4 offerings
20 training days

Module II

60 trainees
4 offerings
12 training days

- **Adoption Specialty Training**

This training currently consists of one course, “Achieving Permanency through Surrender and Termination of Parental Rights.” The six-day program provides participants with the basic knowledge and skills to assess the effectiveness of diligent efforts; determine the appropriateness of setting a goal of adoption; prepare children for adoption; use the

legal process to free children for adoption and to comply with Title IV-E and State statutes. This training will also include training delivered by an attorney on diligent efforts, how to obtain a TPR and how to take a voluntary surrender. Portions of the program may be delivered through Learn Linc or comparable technology.

Achieving Permanency through Surrender and Termination of Parental Rights

90 trainees
5 offerings
30 training days

- **Child Protective Services Response Training**

This course completes the mandated core training for child protective staff by building upon a set of interpersonal engagement, assessment, and decision making skills and values learned in the Common Core and applying them to the CPS role and responsibilities in the context of the CPS Response. This course focuses on the principles and techniques of investigations, relationships with other investigative bodies, legal issues in child protection, and methods of remediation, diagnosis, treatment, and prevention.

In 2011-2012, the Child Protective Services Response training curriculum was revised to incorporate the basic principles and practices of Family Assessment Response so that the caseworkers, whether they are assigned to FAR or an investigative units will have a skill set that supports effective practice with families reported to the State Central Register.

330 trainees
15 offerings
105 training days

- **Training for Experienced Child Welfare and CPS Caseworkers**

A variety of advanced level training programs are offered to child welfare and CPS caseworkers who have completed basic training. These training programs enable experienced caseworkers to strategically apply the skills they acquired in foundation training in a variety of critical areas of practice. The programs include: Advanced Medical and Legal Issues, Forensic Interviewing Best Practices, district specific and regional training, and a new training program, Advanced Child Welfare Interviewing that is in development. For those acting in a CPS On-Call capacity, an online iLinc class is offered.

1,780 trainees
66 offerings
1 teleconference
109 training days

- **Sexual Abuse Dynamics and Intervention Training**

Statewide training provided to child welfare staff on the dynamics of sexual abuse as well as on the treatment modalities currently utilized to protect and support victims, and to treat and support the family. This course will be provided to a combined audience of Child Protective and other Child Welfare caseworkers.

400 trainees
16 offerings
48 training days

- **Working with Alcohol and Substance Affected Families**

This training program builds the knowledge and skills necessary to identify, assess, and plan with families affected by alcohol and substance abuse. Local district and voluntary agency child welfare caseworkers and supervisors develop competencies in recognizing the natural resilience of families, in utilizing strengths to motivate and facilitate change, and in supporting families throughout a member's treatment and recovery.

1,800 trainees
95 offerings
85 training days

- **Foster/Adoptive Parent Training**

This program consists of several foster/adoptive parent leader certification preparation components, including Group Preparation and Selection II/Model Approaches to Partnerships in Parenting (GPSII/MAPP), Caring for Our Own, Shared Parenting, and Deciding Together. These training programs prepare local district and voluntary agency staff and foster/adoptive parents to lead training groups in their areas on the topics above. A description of components follows:

- GPSII/MAPP: A 30-hour preparation and selection program delivered over a period of ten weeks by districts and agencies to prospective foster and adoptive parents to assess, develop, and strengthen the attitudes, skills, and knowledge needed by parents intending to foster or adopt children.
- Caring For Our Own: A preparation program specifically for relative caregivers given over a period of nine weeks.
- Shared Parenting: An eight-week program focusing on relationship building between foster parents and birth parents for best outcome of children in care.
- Mini-MAPP: Provides an overview of the basic concepts in the GPSII/MAPP training program to child welfare staff and foster and adoptive care staff within the agencies.
- Deciding Together: Seven consultations are provided in this model to individual families to prepare them to foster or adopt.
- COMPASS, the in-service (post-certification) portion of this training program, includes first-year basic and advanced courses for subsequent years in such topics as Loss and Separation, Preparing Children for Adoption, Managing Difficult Behaviors, Sexual Abuse, Child Development and Discipline among others.

- There is also a leader certification component to this training similar to the preparation trainings listed above.
- Special Topics and use of the iLinc electronic training platform are other trainings available to foster/adoptive parents, local district staff, and voluntary agency staff statewide.

7,310 trainees
514 training days

- **Therapeutic Foster Boarding Home Training (TFBH)**

TFBH provides training and technical assistance in a set of core problem-solving and intervention skills for foster parents, agency workers, and trainers in therapeutic foster boarding home programs.

650 trainees
100 training days

- **Core Essential Skills for Experienced Caseworkers**

This program provides training for experienced Child Welfare and Child Protective Services caseworkers. Like the Common Core for New Caseworkers training program, this training focuses on building skills most likely to result in positive outcomes for clients and the achievement of child welfare outcomes, including an emphasis on the impact of trauma, basic child welfare legal practice, and interviewing children. The program also has pre and mid core web-based training components that include child development and trauma. It is an eight day classroom training. The program also includes up to 15 one-day “Engagement for Supervisors” Skills Clinics.

246 trainees
15 offerings
120 training days

- **Safety and Risk Refresher Training – Upstate**

The purpose of this two-day training program is to review knowledge based information on safety and risk and to build or enhance the ability of casework staff to assess safety and risk.

The program reviews the safety and risk definitions, the process and protocol used to assess safety and risk, including the safety factors and risk elements, safety criteria, safety decisions, and safety plans. The program also reviews the risk elements, expanded risk elements, the risk assessment profile, risk ratings and the decision to open a case for services. The program includes skill development through case examples and case simulations.

120 trainees
6 offerings
12 training days

- **Family Engagement Specialty Training**

The focus of this program is on training and consultation for the individual, unit and organization. The program highlights practices that promote and sustain family engagement. The program centers on the delivery of a set of toolkits designed to promote locating and engaging fathers, using coached family visits and family meetings to promote engagement and advance safety, permanency, and well-being. Technical assistance is also provided.

1,500 trainees

- **Directors of Services Leadership Training Forum**

This component is a two-day event (delivered in half day/full day/half day format) intended to provide local district Directors of Services with the knowledge and skills necessary to apply generic and program-specific management principles and skills to Child Welfare (Child Protective Services, Preventive Services, Foster Care and Adoption Services). (This component also applies to Goal 2.)

Possible topics may include, but not be limited to, measuring outcomes; how to assess the NYS Improving Child Welfare Outcomes initiative; use of service plan reviews; visitation; coaching; strengths-based child-centered, family-focused practice; how the case management model supports good practice; the Data Warehouse.

75 trainees
1 offering
2 training days

- **Training and Technical Assistance for Child Welfare Teams**

OCFS supports a model of service delivery by casework teams, with 26 teams in 12 local districts. The project is designed to support local districts to provide effective and efficient protective, preventive or foster care services by assigning casework teams instead of individuals. Training and technical assistance include team building, the process of group supervision and case conference facilitation, family engagement skills, and other strategies as identified by the individual participating districts. At least one new district will be added in 2012 -2013 along with team expansion in districts already having one team or more.

- **Family Assessment Response Training**

In response to 2007 legislation enabling NYS to pilot an alternative response to CPS investigations, OCFS began working with six local districts to develop and implement alternate response, known as Family Assessment Response (FAR). Throughout the three year period authorized by that legislation, additional counties implemented FAR and many expanded their FAR program. The evaluation and report to the legislature and the Governor recommended making FAR a permanent Child Protective service. Legislation

making it permanent was signed into law in June 2011. During the 2013-2014 contract year, another three counties and approximately four expansion units within current FAR counties will begin the implementation process. Coaching will continue to be provided to all FAR counties to increase their level of skill in delivering FAR. OCFS will continue to build NYS capacity to train Family Assessment Response by training university partners and select local district staff in FAR.

Training and Coaching:

1,124 trainees

76 days

Symposium:

100 trainees

2 days

- **Child Welfare Eligibility Training**

The purpose of this project is to provide social services districts with the knowledge and skill needed to accurately, effectively, and efficiently determine eligibility for federal funding of child welfare and Medicaid programs. Topics include the history and rationale of federal funding streams, how to define and understand the distinct use of each category of funding eligibility: Title IV-E; TANF-EAF; Title XX below 200 Percent, Kinship/Guardianship Assistance (KinGap), Non-Reimbursable Payments; and Candidacy in Foster Care. Trainees learn how to determine and document each category of eligibility, the use of the Welfare Management System (WMS) and to identify and access the resources available to support their ability to accurately determine and document eligibility.

450 trainees

45 offerings

- **Videoconference Training for OCFS Bureau of Special Hearings Staff**

This project provides specialized training in a variety of topics for Bureau of Special Hearings staff to respond to the challenges made to the decisions of LDSS and State officials.

41 trainees

1 two-day offering

- **Child Welfare Core Training for Voluntary Agencies**

The Voluntary Agency Core curriculum is designed for caseworkers and supervisors who work in NYC voluntary agencies. The program provides caseworkers, child care workers, administrators, and other agency staff with the skills and knowledge they need to maintain safe and stable placements, to assess safety and risk, and to promote

permanency and well-being. The program provides an overview of the child welfare system in NYC as well as the policy and regulatory framework that guides practice in NYS. The program consists of two components: a 12 day core curriculum and special topics component.

925 total trainees (400 for Core; 525 for Supplemental topics)
 5 offerings of Core
 35 supplemental offerings

Program Support

OCFS Bureau of Training, Child Welfare and Community Services and CWCS Regional Offices maintain ongoing contact with local districts and contract agencies through a variety of venues, including monthly meetings with directors of services, and quarterly meetings with the statewide Staff Developers Advisory Committee, CPS, Preventive, and Foster Care Supervisors, and contract agency training directors. Through these contacts and those of training contractors who work directly with the SDCs, OCFS is able to keep abreast of emerging training needs.

Technical Assistance Requests

OCFS has a program liaison who works directly with the CB Regional Office to secure supports identified through training needs assessment. In previous years, OCFS has worked with a number of National Resource Centers (NRC) (Child Protective, Organizational Improvement, Permanency and Family Connections, Youth Development, Adoption, Recruitment and Retention of Foster and Adoptive Parents). In 2012, OCFS is receiving extensive support from the NRC for Child Protective Services (CPS). To date, the NRC for CPS consulted with OCFS to develop guidelines for working with families affected by domestic violence, and guidelines to safely engage families affected by domestic violence in family meetings, coached family visits, and engaging absent fathers. As well, the NRC for CPS is consulting with OCFS to revise the mandated domestic violence training for CPS staff. The revised program will provide guidance on the “how to” of CPS investigations and assessments with families affected by domestic violence.

GOAL #2

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

Primary Strategy: 2. Continue collaboration with the Office of Court Administration to enhance court practice and share data.

OCFS and the Office of Court Administration (OCA) are committed to improving permanency outcomes for children in New York State. OCFS and the OCA Child Welfare Court Improvement Project (CWCIP) will work together to build effective collaboration between the Family Court and the social services districts with the highest foster care populations in the State. OCFS will support the development of enhanced court practices in the Family Courts and provide a process by which certain data maintained by both local departments of social services and Family Courts can be shared to evaluate the impact of innovations to promote improved outcomes for children.

Goal: Improve timeliness of adoptions and permanency for children in out-of-home placements.

Action Steps and Benchmarks:

2.1 Enhance and or implement a court and local districts (LDSS) collaborative in each of the 12 counties, (one of the 13 already exists) aimed at improving the timeliness of adjudications and dispositions for both abuse and neglect and TPR petitions.

2.1(a) Form a statewide OCFS/OCA workgroup to oversee the enhancement and implementation of local court and LDSS collaborative.

2.1(b) Disseminate resource materials to local courts and districts that supports local collaborative.

2.1(c) Share and provide technical assistance to the 13 Family Courts, relative to the Child Welfare Court Improvement Project Data Measures.

2.1(d) Support statewide “kickoff” conference on court and LDSS collaboratives. Topics will include role of courts and districts in improving outcomes related to child permanency and well-being.

2.1(e) Provide technical assistance to each of the local court and LDSS collaborative.

2.1(f) Provide training to each of the local court and LDSS collaboratives on child welfare related topics.

2.2 Monitor the implementation of the Local court and LDSS collaborative.

2.2(a) Development and dissemination of local court and LDSS collaborative reporting template.

2.3. Pilot the integration the NYS Office of Alcohol and Substance Abuse Services and local treatment providers into the local court and LDSS collaboration process to support integrated planning in all cases involving the misuse of alcohol or other drugs.

2.3(a) Develop and pilot in three counties protocols for handling cases that intersect the family court, child welfare and substance abuse treatment systems.

Primary Strategy: 3. Expand trauma informed practice in congregate care

New York is committed to the continued expansion of trauma informed practice as a means to reduce and prevent abuse or maltreatment, as well as to reduce physical restraints in residential foster care settings.

Goal: Reduce the occurrence of abuse and maltreatment in foster care.

Action Steps and Benchmarks:

3.1 Six additional voluntary agencies will begin training on the Sanctuary Model in 2010. (Ten agencies have already completed training. Three have achieved certification in the model and the others are moving towards certification in the Sanctuary Model)

3.1(a) Agencies complete self-readiness assessments and forward to OCFS for review and selection.

3.1(b) Training provided by Andrus Sanctuary Leadership Development Institute to each of the agency's Leadership teams. The five day training was delivered in February of 2010.

3.1(c) TA provided by Andrus

3.1(d) Participation in consortium conference calls

3.2 Evaluation of the implementation and outcomes of the Sanctuary Model in the five (Parsons, Baker Victory Svs, House of Good Shepherd, Green Chimney, and Children's Home of Poughkeepsie) Cohort two agencies.

3.2(a) Data comparing the number of IAB reports and restraints will be tracked prior to the implementation of the Sanctuary Model and post implementation

Primary Strategy: 4. Improve Service Array.

Meeting the health needs of children in out-of-home care is critical to promoting their well-being and permanency. The B2H Medicaid Waiver Program is designed specifically for children in foster care with significant mental health needs, developmental disabilities or who are medically fragile. With approval from the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CCMS), B2H offers 14 uniquely designed services not otherwise available in the community to children with these complex medical conditions, and does so in the context of their often complicated family and caregiver network.

Goal: Children have access to an array of services.

Action Steps and Benchmarks:

4.1 Monitor B2H services across New York State.

4.1(a) Provide training to local departments of social services on the B2H eligibility criteria, the enrollment process and B2H services.

4.1(b) Provide training to qualified service providers.

4.2 Ongoing Support and Quality Assurance to Districts and HCIAs.

4. 2(a) Quarterly Forums conducted in 2012. Forums are held semi-annually with districts, HCIAs, and other stakeholders.

4. 2(b) Conduct annual Administrative Reviews of each HCIA to identify issues, share information and to resolve barriers.

4. 2(c) Quality review of cases to determine timeliness and appropriateness of services.

4.3 Evaluation of implementation and outcomes of B2H.

- 4.4 Participate in joint state initiatives, which include – Children’s Cabinet on Disconnected Youth; and the Commissioners’ Committee on Cross Systems - OMH Children’s Plan aimed at improving accessibility and availability of resources.

Primary Strategy: 6. Expand recruitment of foster and adoptive parents.

Foster and adoptive parents play a critical role in providing permanency and wellbeing for children entrusted to their care. Local districts and agencies should establish and maintain a pool of qualified, ethnically and racially diverse foster/adoptive parents. To assist local districts and agencies with the challenges of recruitment, OCFS has a training contract that provides foster/adoptive family recruitment and retention technical assistance, consultation, and materials development to local districts and agencies. This contract is designed to support the on-going recruitment and retention of ethnically, racially, and culturally competent foster and adoptive parents.

Goal: There will be sufficient numbers of foster and adoptive parents that can care for sibling groups, adolescents and that reflect the race and ethnicity of the children coming into care.

Action Steps and Benchmarks:

- 6.1 Work with training contractor to identify and share with districts the latest recruitment tools that address recruitment of foster and adoptive parents for sibling groups and adolescents, and that reflect the race and ethnicity of the children coming into care.
- 6.2 Review of data of the 13 districts determine difference in the race and ethnicity of foster/adoptive parents as compared to the children in care, siblings separated at placement and the number of youth not placed in foster boarding homes.
- 6.3 Training and support provided to home finders and recruiters as identified by the RO.
- 6.4 Recruitment Plans that are MEPA compliant of 13 districts will be reviewed for appropriateness.
- 6.5 Hold conference call with Local District and Voluntary agency Home Finders to determine areas of confusion or where clarification is needed related to regulations and practice of licensing foster boarding homes.
- 6.6 Updates and changes to Licensing of Foster Boarding Home handbook made, if needed.
- 6.7 Regional Training of Home Finders held to go over areas of confusion and to clarify misunderstandings; updated handbook shared.

ASSESSMENT OF NEED AND CURRENT STATUS

On December 31, 2012, there were 19,980 children in foster care in New York State. This was a 6.97 Percent decrease from the census of 21,473 children in foster care on December 31, 2011.

As of December 31, 2012, 82.0 Percent of children in care statewide were in foster family care, including approved relative foster homes. This number remained constant from 2011.

In 2012, the population of foster children in approved relatives' foster homes was 4,830. This reflects a downward trend from 2011 when there were 5,305 children in approved relative's homes.

In 2012, there were 9,193 children in care within New York State who were part of a sibling group, a decrease from 10,174 in 2011. Of these children 44.4 Percent (4,078) were separated from at least one other sibling in care. As of December 31, 2012, 19.2 Percent (3,851) of the children in care were in a placement outside of their county and 1.75 Percent (350) were in a placement outside of New York State. Of these, kinship placements accounted for 11.0 Percent of the out-of-county placements and 61.0 Percent of the out-of-state placements.

Of the children in care on December 31, 2012, 53.2 Percent had a Permanency Planning Goal return to parent or guardian.

There were 2,261 children discharged to adoption in calendar year 2012, a percentage decrease of 0.4 Percent from 2011 when 2,270 children were discharged to adoption.

Of all children in care on December 31, 2012, 28.1 Percent had a Permanency Planning Goal (PPG) of Adoption. This is a slight increase (1.0 Percent) from last year.

There were 5,499 children in care on December 31, 2012, with the goal of adoption.

Of adoptions finalized during 2012, 70.9 Percent of the children for whom ethnicity was known were minority children. This is a slight increase from 70.0 Percent in 2011.

Of children discharged to adoption in 2012, 98.7 Percent received a New York State adoption subsidy. This is a slight (.3 Percent) increase from 98.4 Percent in 2011.

Of all children with a goal of adoption on December 31, 2012, 45.3 Percent were not freed after 12 months of having the goal.

Of all freed children, 48.7 Percent were not placed within 12 months of being freed.

Of all placed children, 33.1 Percent had not had their adoptions finalized after one year.

For children under eight years of age, discharged to adoption in 2012, the length of time from the establishment of the goal of adoption to discharge, was less than two years for 46.1 Percent of the children, between two and three years for 22.6 Percent, and over three years for 31.2 Percent.

For children over the age of eight, the time between goal setting and discharge was less than two years for 32.8 Percent of the children, two to three years for 21.3 Percent and over three years for 45.9 Percent.

PERFORMANCE TARGETS

Permanency Outcome 1: Placement Stability	
National Standard	101.5
Performance as Measured in Final Report/Source Data Period	108.1
Performance as Measured in Baseline/Source Data Period	109.7

- New York State has achieved this outcome. New York State's target will be to maintain or better the national standard of 101.5.

STATE AND LOCAL ACTIVITIES

The diversity of the situations and needs that have brought children into care requires a system of care that is both intricate and flexible. New York State led the nation in reforming the foster care system of decades past into a community-linked resource driven by permanency planning for each child. However, while the goals set in the 1970's have not changed, the stresses placed on the system by increasingly troubled families and children has required even greater energy and innovation.

Kinship Care

A central strategy for maintaining family and community ties for children requiring out-of-home care due to a lack of safety in their own homes is to promote the use of relatives as placement resources. New York State statute requires that judges direct social services districts to consider the availability of relatives as a placement resource, either as a direct custodian or foster parents, prior to placing a child in need of care in foster care with a non-relative.

The federal Adoption and Safe Families Act (ASFA) that amended Title IV-E of the Social Security Act authorized the exemption of children placed in foster care with relatives from the requirement that there must be a petition to terminate their parents' parental rights if they have remained in care for fifteen of the most recent twenty-two months. This is a recognition that children placed with their relatives may be in circumstances where legally freeing them may not be in their best interests. New York

state regulations allow documenting that a child is in a kinship foster home as a justifiable reason for not filing a termination petition against the child's parents. However, case planners in New York are advised that a social services district is not precluded from filing a petition to terminate parental rights solely because the child is placed with a relative.

In kinship foster care situations where it is determined that children are unlikely to be returned home, exploration of the relative's willingness to adopt is generally the next best alternative. However, there are other times when a relative is not interested in adopting her/his kin where the child may remain with the relative in foster care for a more extended period. While social services districts have had increasing success in decreasing lengths of stay for these kinship foster children, their lengths of stay in foster care remain higher, on average, than that of other foster children. Children residing in kinship foster care are increased in real numbers, and as a percent of the total foster care population. As of March 31, 2013, more than 5,017 foster children are currently placed in foster care with a relative, which represents approximately 24.5 Percent of the total foster care population. Effective April 1, 2011, New York State enacted legislation providing for a kinship guardianship assistance program as an alternative for children where return to their birthparents, or adoption is not the appropriate plan (see below). However, under Article 6 of the Family Court Act, relative custody or guardianship remains an option (without subsidy).

Approved relative and certified foster homes are governed by the same standards, except that there is the authority to waive a non-safety standard for an approved relative home, while there is no comparable provision for certified homes. The regulations allow approving relative homes on an emergency basis. Thus, the maximum period of time when a home can be in this status is 90 days (although no Title IV-E funds are claimed during the "emergency" period until full approval). This regulatory provision allows for a single placement for a child when a relative is available at the time of an emergency child protective services removal, is able to provide safe care to the child, and can continue to provide care until the child can safely be returned home or another permanency outcome can be achieved. Additionally, the regulations permit more distant relatives, godparents or other persons with a positive pre-existing relationship with the family to be used as an emergency placement resource if such a home meets the regulatory requirements that exist for relatives (again, no Title IV-E is claimed until full certification is completed).

In 2006, the OCFS created the *New York State Kinship Caregiver Program* to assist persons caring for related children. A statewide network of supportive programs is used as an alternative to placing children in unfamiliar foster homes by promoting household stability and permanency through services for kinship caregivers and their kin.

Utilizing approximately \$800,000 in state, TANF, and Community Based Child Abuse Prevention (CBCAP) funds, the *New York State Kinship Caregiver Program* allows programs to deliver a wide range of services that address the multiple needs of caregivers and the children in their care including:

Financial Stability
Counseling

Home Visits
Legal Information

Support Groups

Respite
Housing

Parenting Skills
Case Management

Education Advocacy
Referrals

Eight community-based organizations deliver these services to caregivers in 11 counties. Families in “informal” kinship care as well as those that are in kinship foster care are eligible for services. It is estimated that over 8,000 families have been served since the program’s inception.

As of the submission of this report, \$789,750 state, TANF and federal NCCAN funds have been allocated to support eight kinship programs in FY December 1, 2012 – November 30, 2013. OCFS will ensure that the most families possible, in the highest need areas, will be served, with this funding.

Through a 2011 TANF Prevention/Post Adoption RFP, OCFS was able to fund ten additional programs who serve kinship families which began on May 1, 2012 and will end on October 31, 2013. Those programs serve hundreds of families in 13 upstate counties and all of NYC.

The New York State Kinship Navigator Program is among the kinship-related programs funded through OCFS. Developed jointly by OCFS and lead agency Rochester Catholic Family Center, the program is designed to creatively assist kinship caregivers and the children in their care in all counties in gaining access to information and community support services. Any caregiver residing in any part of the State is able to utilize a toll-free phone line or website to identify kinship care related services in their home locale. In addition, kinship specialists are available to assess caregiver needs and develop a plan of action. In 2012, the *NYS Kinship Navigator Program* had over 55,000 visits to their web site along with 2592 caregivers and professionals on their phone line where more detailed kinship services were provided. Dozens of legal fact sheets are available on the website to assist families and professionals advocating for the rights and services for their families. Over 2000 children reside in the homes of the caregivers who accessed the phone line.

Training and technical assistance was provided by OCFS to promote quality programs. Each of the eight Kinship Programs received a site visit in 2012, where OCFS staff interviewed staff and participants and reviewed records.

OCFS continues to partner with the NYS Office for the Aging. OCFS Executive staff met with advocates on several occasions in 2012. OCFS is a member of the NYS Kincare Coalition which is a collaboration of public and private stakeholders responding to the needs of kinship families in NYS.

Accomplishments 2012-2013:

Kinship Caregiver Program

Kinship Caregiver Programs instituted standardized core services for each program. These services include at least two home visits per family, support groups for adults and

children, and family bonding/strengthening activities. Having standardized performance targets and services allows us to better determine progress towards goals and measure outcomes. In 2012, Kinship Program staff began entering demographic information, along with the number of home visits completed and the number of adults and children served into a web based OCFS data system. This allows OCFS to measure who is being served, by combining the performance measures and demographic data OCFS is better able to determine the quality of the program services and if contractors are meeting contractual obligations. It also assists us in making decisions about modifying services and target areas to meet the needs of families.

Kinship Guardianship Assistance Program (KinGAP)

As a result of the Foster Connections to Success and Increasing Adoptions Act of 2008, the federal government established financial and medical support for Kinship Guardianship arrangements for Title IV-E eligible children. The program was implemented in New York State on April 1, 2011, as a result of Part F of Chapter 58 of the Laws of 2010 (Chapter 58) entitled “Kinship Guardianship Assistance Program” (see §§458-a--458-f of the SSL). The program provides financial assistance, and in most cases medical coverage, to related caregivers who assume legal guardianship of children formerly under their care as foster children. The New York State program is available to both Title IV-E and non-IV-E children who meet state eligibility requirements.

OCFS KinGAP Activities

In 2011, OCFS provided significant support to districts and agencies to assist them in implementing this program. In 2012, the second year of the KinGAP program, OCFS continued its efforts to support and promote the KinGAP program through the following activities:

- The first annual report to the Governor and Legislature on the KinGAP Program can be found at: <http://www.ocfs.state.ny.us/kinship/reports.asp>
- A special mailbox continues to receive questions regarding the Kinship Guardianship Assistance Program. Several social services districts and voluntary agencies have submitted questions over the past year, and most questions have progressed from basic to more case-specific as districts and agencies have worked on more KinGAP cases. The mailbox address is: KinGaphelp@dfa.state.ny.us
- In May 2012, OCFS issued the following versions of the Application for the Kinship Guardianship Assistance and Non-Recurring Guardianship Expenses Programs (KinGAP) (OCFS 4430):
 - New York City version- OCFS 4430NYC
 - Spanish version- OCFS 4430S
 - Spanish version of New York City Form- OCFS 4430NYC-S

- These versions of the KinGAP application can be found at:
http://ocfs.ny.gov/kinship/support_docs.asp
- A computer-based Kinship Guardianship Assistance Program (KinGAP) eligibility course continues to be delivered by the Center for Development of Human Services (CDHS) in conjunction with OCFS.
 - The link to the KinGAP eligibility course introduction is <http://www.bsc-cdhs.org/cwe/> (click on KinGAP on the left side).
 - The link to the KinGAP Eligibility Trainee Workbook is <http://www.bsc-cdhs.org/cwe/kingap/Kinship%20Guardianship%20Assistance%20Eligibility%20Trainee%20Guide.pdf>
- OCFS has completed an assessment of various child welfare curricula to determine where KinGAP information needed to be inserted into training materials. These updates to relevant curricula were completed on or before September 2012.
- In September 2012, OCFS conducted two sessions of a computer-based training geared towards B2H program staff entitled, *B2H Training: Adoption Subsidy and KinGAP*.
 - The goals of this training were to:
 - Increase general knowledge of the New York State Adoption Subsidy and KinGAP programs; and
 - Enhance B2H providers' ability to assist families and caseworkers in the application processes and provide continuing support.
- OCFS continues to add resources to the KinGAP webpage as they become available. In addition, a page was added to highlight KinGAP systems information.
- The webpage is at: http://www.ocfs.state.ny.us/kinship/background_and_process.asp
- In February 2012, OCFS worked with DOH resulting in a General Information System Release GIS# 12-002 provided Medicaid individual categorical codes available on WMS for IV-E and Non-IV-E KinGAP arrangements. The codes include those used for both in-state and out-of-state KinGAP arrangements.
 - A copy of this GIS can be found at:
<http://ocfs.ny.gov/kinship/resourcesMore.asp>
- GIS message that provides a code that went into effect in April 2012 that enables an LDSS/ACS to record approvals of a KinGAP application in CCRS:
http://ocfs.ny.gov/kinship/New%20CCRS%20Code_K210_Kinship%20Guardianship%20Application%20Approved.doc
- GIS message, issued in February 2012, which provides Medicaid individual categorical codes available on WMS for IV-E and Non-IV-E KinGAP

arrangements. The codes include those used for both in-state and out-of-state KinGAP arrangements:

<http://ocfs.ny.gov/kinship/New%20Medicaid%20Individual%20Categorical%20Codes%20for%20IV-E%20and%20Non%20IV-E%20KinGAP.doc>

- 12-OCFS-LCM-03 *Kinship Guardianship Assistance Program Payments - Excludable Income for Child Care Subsidy Program Eligibility* was issued in March 2012.
 - The purpose of the LCM is to establish a formal policy regarding the calculation of countable income for families in receipt of Kinship Guardianship Assistance Program (KinGAP) payments.
 - The LCM can be found on the KinGAP webpage at: http://www.ocfs.state.ny.us/kinship/support_docs.asp
- In November 2012, OCFS issued a Tip Sheet that presents the systems activities in CCRS, WMS, and CONNECTIONS that workers need to enter in a KinGAP case from the point of a KinGAP application being received to the discharge of the child and payment of the KinGAP assistance payment.
 - The KinGAP Systems Tip Sheet can be found at: <http://ocfs.ny.gov/kinship/KinGAP%20Systems%20Tip%20Sheetdocx.pdf>
- OCFS staff run KinGAP reports regularly to keep informed of the progress on KinGAP applications and completions.

Plans for 2013-2014:

Kinship Caregiver Program

The NYS Kinship Navigator, a statewide information and referral program, operated by the Catholic Family Center and administered by OCFS, has entered into agreements with Tioga, Broome, Orange, Ulster, and Dutchess Departments of Social Services to collaborate in a federal Children's Bureau demonstration project. The basic purpose of the project is to keep children with kinship caregivers and out of foster care. The project will demonstrate how the collaborative approach of county Child Welfare and Temporary Assistance for Needy Families program improves outcomes related to safety, permanency and well-being for the target population of children/youth and their kinship families. In addition to financial assistance and services provided by LDSS, families will be referred to the Kinship Navigator for intake and referred to a local OCFS funded program providing services to Kinship families. The project will be funded for three years and an evaluation is being conducted by SUNY Center for Human Services Research. OCFS will offer its full support to this demonstration project.

We will continue to help kinship families and Kinship programs make linkages to services and providers, by providing information and support to Local Districts and community based programs.

Kinship Guardianship Assistance Program (KinGAP) Plans

OCFS, through our Regional Offices, will continue to promote KinGAP programming with the local social services districts and voluntary agencies under their purview, encouraging the districts and agencies to explore their data, review certain caseload characteristics (i.e., incarcerated parents, disproportionate minority representation, appropriateness of permanency planning goals for foster care children, etc), and incorporate KinGAP in their permanency panels. A module for KinGAP in the OCFS case review instrument is under development.

OCFS will continue to deliver the computer-based Kinship Guardianship Assistance Program (KinGAP) eligibility course through a contract with the Center for Development of Human Services (CDHS).

OCFS will continue to run monthly reports of how many KinGAP applications were received, approved, denied and how many children have been discharged to KinGAP. As of February 2013, more than 100 children had been discharged to a KinGAP arrangement.

In October 2012, OCFS began working with our Information Technology staff to develop a web-based application that can be used to enter and transmit Kinship Guardianship Assistance applications, supporting documentation and agreements from direct worker to supervisory staff and administrative staff within an LDSS and/or between voluntary agencies and LDSS/ACS agencies.

Bridges to Health (B2H) Home and Community-Based Services Medicaid Waiver

The B2H Medicaid Waiver Program provides expanded and enhanced services to children in foster care settings whose diagnosed conditions are sufficiently severe to warrant placement in a Medical institution were it not for the supports provided by the B2H waiver. B2H serves three eligibility groups of children in foster care—children with serious emotional disturbance, children with development disabilities, and children who are medically fragile—so that cross-systems issues can be better integrated. The program also serves their families; including birth parents, foster parents, pre-adoptive parents, and siblings. Once children are enrolled in the program, they may be eligible for B2H services until they are 21 years old, even if they have been discharged from foster or other care.

Quality Management is an integral component for the successful implementation and overall impact of B2H. OCFS has implemented a multi-pronged approach of continuous quality management activities. The OCFS B2H Quality Management Strategy consists of the following: Team Meeting Reviews; Case Record Reviews; Annual Health Care

Integration Agency (HCIA) Administrative Reviews; Regional Forums; regular Conference Calls with providers; LDSS Meetings; Satisfaction Surveys of Caregivers; and Audit and Quality Control reviews.

Accomplishments 2012 – 2013

Effective January 1, 2011, CMS reauthorized the B2H for an additional five year period (2011 – 2015). Federal reauthorization allows OCFS and our partners at the LDSS and HCIAS to serve up to 3305 children in foster care and other community-based settings in least restrictive settings and avoid medical institutional placement. The B2H Program Manual and forms as well as training were revised to reflect federal reauthorization modifications.

OCFS continues to implement a multi-pronged approach to continuous quality management activities for the B2H Medicaid Waiver Program. The OCFS B2H Quality Management Strategy consists of the following: HCIA Annual Administrative Reviews; Regional Forums; LDSS Meetings; Satisfaction Surveys of Caregivers; and Audit and Quality Control reviews. Some of the major highlights of the B2H Quality Management accomplishments are detailed here:

- HCIA Annual Administrative Reviews: OCFS conducted 20 Annual Administrative Reviews in 2012 that consisted of the following activities: B2H policy and protocols review; interviews with key B2H staff; a review of B2H staff qualifications and training; a retrospective review of case records during this review period and a retrospective review of Team Meetings during this review period. The results of the reviews are provided to the HCIA; where necessary plans of corrective action are developed.
- OCFS conducted 12 Regional Forums throughout New York State in 2012 and an additional six forums in April 2013 with stakeholders to elicit feedback and identify challenges and issues that may have programmatic or policy implications for the B2H Medicaid Waiver Program. These discussions focused on the importance of developing enrollment and engagement strategies as early as possible, and identifying and utilizing communication opportunities as well as offering promising practices that have been noted thus far. The next series of Regional Forums is scheduled for October 2013.
- B2H service providers are required to conduct satisfaction surveys of caregivers. To avoid asking children and families to complete numerous surveys, reduce providers' responsibilities for the entire survey administration and reporting process, and collect consistent information from clients across the state regardless of which agencies provided the B2H services, OCFS created a single survey to address satisfaction with each waiver service, the complaint process, and effects of the services on child functioning. Caregivers may complete the survey on-line and are asked to report on changes in the child's functioning since enrolling in B2H, how the program has affected the caregiver, and whether the caregiver would recommend the program to other families with foster children with special needs. The survey first became available online in October 2009, and was implemented statewide in 2011. The caregivers who completed the 2,119 surveys

- have provided useful feedback about each waiver service, as well as reporting increasingly positive effects of B2H services on child and family functioning.
- B2H HCIA July 2012 Summit: The second statewide B2H Summit was held July 17-18 2012, with over 120 representatives from all 20 HCIA's throughout NYS in attendance. The HCIA Summit was facilitated by Bureau of Waiver Management (BWM) staff and HCIA representatives from the areas of B2H Administration, Health Care Integration, Waiver Service Provision and Quality Management. The summit focused on sharing of promising practices, development of solutions to challenges in the implementation of the B2H Waiver, and networking to share and promote collaboration and support. HCIA's staff presented and participated in a question and answer panel, with breakout sessions that included: Best Practices for Engagement in B2H; Supervision and Dealing with Emergencies; Budgeting and Billing; B2H Advocacy, Quality Management; CANS and Trauma; Stigma Associated with Crisis Services; Transition for Cross System Children and Engaging Adolescents. Feedback from the participant survey indicates that the summit was another huge success.
 - I-Linc Training Opportunity entitled *Adoption Subsidy and KinGap* was presented on September 20, 2012. This training via I-Linc allowed for personnel throughout the B2H community, including, HCIs and supervisors, WSPs and supervisors, Quality Management and B2H Administrators to increase their general knowledge of New York State Adoption Subsidy and the New York State Kinship Guardianship (KinGAP) and to enhance B2H providers' ability to assist families and caseworkers in the application processes and provide continuing support. Participation was extremely positive with nearly 150 staff linking in to the two sessions.
 - Evidence-Based Assessment Tools: In January of 2012, a new Child and Adolescent Needs and Strength (CANS) instrument was released entitled the CANS NY and represents a joint venture between the OCFS and the NYS Office of Mental Health. CANS-NY includes a wider range of domains to better identify and address the multi-system needs of children and will serve as a guide in service planning. Dr. John Lyons, author of the CANS instrument, presented a series of Basic CANS Trainings across New York State throughout December 2011 and provided additional trainings in 2012. In January 2013, OCFS launched the 35 minute on-line course "CANS NY for WSPs" as another means of facilitating full integration of assessments into practice. B2H Trainings to Promote Promising Practices: Throughout 2012, OCFS sponsored the following trainings:
 - Health Care Integration: 254
 - Waiver Service Providers: 3319
 - Services Planning: 264
 - On-Line Modules: 1270
 - Local Department of Social Services: 76
 - WSP Learning Collaborative: On January 10, 2013, over 80 individuals joined the a conference call, representing every region and represented HCIA's, External WSP Agencies, and OCFS Regional QMS to share their own promising practices

related to B2H documentation requirements and the use of CANS NY scores. Participants from across the state shared tools and resources and individual case strategies.

- **B2H Case Record Reviews:** During the 2012 calendar year, OCFS completed a review of 440 case records to comply with federal requirements. These reviews included in-depth discussions with the HCIA's regarding findings to enhance service impact and verification that remediation of missing or incomplete information is completed. To date, nearly all records have been reviewed and the BWM staff continues to follow-up on remediation. The case record results are entered into a database for tracking and trending purposes.

Plans for 2013 - 2014:

OCFS will continue to strengthen the following activities throughout 2013: OCFS Quality Management and Oversight including significant data collection and analysis to inform and improve performance, Training, and the Regional Forums. In addition, OCFS anticipates hosting the second annual B2H Summit. The B2H Summit will provide an opportunity to recognize the success of the B2H Waiver Program and work together to share effective practices and develop creative strategies. The agenda for the B2H Summit is expected to include: workshops and panels on promising practice models, and facilitated workgroups on collaborative strategies to address barriers to B2H Waiver provision and service provision.

B2H Evaluation

A recently started evaluation of the Bridges to Health (B2H) Medicaid Waiver Program will examine the outcomes of an entry cohort of children who enrolled in B2H between January and June 2011.

The goal of the evaluation is to measure the impact of the program on the following outcomes:

- (1) changes in child functioning as measured by the Child and Adolescent Needs and Strength (CANS) instrument completed at B2H initiation and again after one year;
- (2) changes in the hospitalization use as measured by the difference in hospitalization days in the one year prior to B2H compared to use during the first year of B2H participation, and later follow-up periods as available; and
- (3) changes in foster care placements: stability and level of care changes from enrollment through year of B2H participation.

BREPA has received data needed for the evaluation, including CANS and other program forms, from 20 B2H funded Health Care Integration Agencies (HCIA) serving the 880 children in the entry cohort/evaluation sample. Data entry was completed in March 2013 and data cleaning continues. Waiver service records for 2011 and 2012 have been received from the Health Department and matched to the entry cohort. After the program data files are finalized, foster care records from CCRS will be match to the file and hospitalization records for children will be requested of the New York State Health

Department. The data will be analyzed and summarized in a written report that is expected to be completed in late 2013.

Statewide Foster Care and Adoption Recruitment and Retention Activities

Throughout New York State, OCFS conducts and supports a variety of programs and initiatives to improve and expand the recruitment and retention of foster care and adoptive families. Much of this work is spearheaded by the six OCFS Regional Offices. Many of the most successful activities occur in most all of the Regions. A summary of these activities include:

Heart Gallery:

Heart Gallery is a traveling exhibit featuring portraits of foster children in need of adoption. Photographers donate their time and talent to create high quality portraits of children which are displayed in prominent venues to raise awareness about the hundreds of children available for adoption.

Permanency Panel Reviews:

These reviews target children that are in need of specific adoption recruitment efforts. Staff from local districts, courts, and voluntary agencies is often involved in these collaborative activities. Barriers facing these children are discussed and frequently individual adoption plans are developed for the child. This approach has resulted in permanency plans for many children.

Adoption Day, Week or Month Celebrations:

Celebrations associated with successful adoption activities occur throughout New York State. They provide an opportunity to highlight the collaborative work and supports needed to achieve adoption for children with special needs and generate positive publicity for ongoing adoption efforts. Adoption month was observed across the state with a calendar of events throughout November and into the first week of December. Spreading the word through social media was this year's national theme and the OCFS Public Information Office (PIO) was instrumental in getting the word out on the OCFS website, face book page and twitter. In New York City, the courts were able to complete Adoption Day events in spite of the disruption of services caused by Hurricane Sandy. In OCFS Home Office, the OCFS Heart Gallery was updated with new photos and narratives of Waiting Children and a new eye-catching banner now adorns the OCFS Bridge inviting staff to view all Waiting Children in The Adoption Album. PIO continues to use social media to raise awareness.

Adoption Exchanges:

Adoption Exchanges provide a networking opportunity for adoption staff to share with each other and to exchange information about waiting children with prospective adoptive families.

Training:

Training activities include specific topics such as the impacts of legislative and regulatory changes, targeted recruitment strategies, and techniques to utilize foster parents as recruiters. Additionally, training initiatives occur in each Region which addresses issues that are identified at the regional level.

Publicity:

In conjunction with various media many programs and initiatives have been developed to inform the public of the number of children in New York State awaiting adoption. Many local television stations produce weekly segments highlighting children who wish to be adopted. Feature articles or series are found in many newspapers which not only identify children awaiting adoption but provide viewers and readers with resources if they wish additional information.

OCFS has been working with the National Resource Center for the Recruitment and Retention of Foster and Adoptive Parents at AdoptUSKids to assist OCFS with providing technical assistance to districts and voluntary agencies on recruitment and retention of foster and adoptive parents. The Recruitment Specialists work directly with OCFS Regional Office staff in providing technical assistance to local districts and agencies on recruitment and retention. These efforts will also help address a New York State need to address recruitment and retention efforts as required by the CFSR.

As part of the New York State CFSR PIP, all local districts and authorized voluntary agencies having a purchase of services contract with a local district for the operation of an adoption or foster boarding home program, are required to update their Recruitment and Retention Plans focusing on compliance with the federal Multiethnic Placement Act of 1994 (MEPA). OCFS Regional Offices provide ongoing monitoring of the plans.

Other state effort examples by region include:

New York City Regional Office (NYCRO)

Permanency Unit 2012 – 2013 and Projections for 2013 - 2014:

Adoption Recruitment and Retention Activities 2012 - 2013

New York City Regional Office (NYCRO) Permanency Unit conducted the 2012 Adoption panels in conjunction with ACS, for children with a goal of adoption. Adoption filings were monitored and barriers to adoption were addressed on both the micro and macro levels. NYCRO, the Administration for Children's Services (ACS) and the voluntary agencies will continue this partnership in 2013 through a monthly review of cases of children with a goal of adoption at the agencies where agencies' administrators and managers are also in attendance. Agencies will be required to discuss data concerning adoption milestones and performance on ASFA adoption timeframes.

Kinship Subsidized Guardianship has been implemented by ACS. There continues to be some confusion about the eligibility requirements and NYCRO is assisting in providing technical assistance to the agencies.

The Permanency Unit Adoption Training Specialist continues to monitor and provide technical assistance to the NYC ACS Specialized and Direct Care units. Some youth will not be discharged to a resource due to their severe needs. The Adoption Training Specialist will continue to monitor recruitment efforts for this special needs population and provide technical assistance to address barriers to permanency.

Permanency Unit adoption staff reviewed program proposals submitted in response to OCFS' request for proposals (RFP) for the Public and Private Partnerships which supports projects serving at-risk children and/or youth to prevent involvement with the child welfare and/or juvenile justice systems and/or expedite their return home. Staff also reviewed program proposals submitted in response to OCFS' Trust Fund RFP to support evidence based and evidence informed programs for children and families.

The Adoption Legal Specialist participated in Subsidy Fair Hearings on requests for subsidy upgrades and related subsidy issues. The role of the Legal Specialist has been to defend and represent the NYS Adoption Service's case decisions and/or to provide application of subsidy regulations and statutes with regard to the case facts.

In 2012 Adoption staff and the Adoption Legal Specialist participated in bi-monthly meetings of the Family Court's Adoption/TPR Advisory Committee to collaboratively identify and strategize methods to address barriers that may exist in achieving timely, quality adoptions. Adoption staff participated in the Family Court's Data Metrics subcommittee which developed a logic model incorporating activities from the courts, OCFS, ACS, voluntary agencies, Attorneys for Parents and children to use existing data to identify the collective impact and strengthen continuous quality improvement efforts in the field of adoption.

Voluntary Agencies:

Permanency Unit staff conducted site visits to provider agencies and NYC Children's Services to provide oversight and monitor compliance with adoptions standards and regulations, as well as provide training and technical assistance.

The Permanency Unit Adoption Team presented on OCFS issues, regulations and initiatives at the bi-monthly New York City Adoption Exchange meetings attended by ACS provider agencies and the new ACS Director of Expedited Permanency Compliance and Adoption Services. The meetings provide an important opportunity for dissemination, discussion and clarification of local, statewide and federal information on adoption.

Training:

Permanency Unit Adoption Training Specialists are planning for the Adoption Competency Curriculum to be presented to the voluntary agencies. Meetings were held in March 2012 to develop three components: First Module - Federal Laws & Policies,

ASFA, How a Child becomes Freed for Adoption, Expediting Permanency, and Recruitment; Second Module - Family Assessment and Preparation: Home Study, and documents needed to evaluate families; and the Third Module - Decision Making and Placement Selection in Adoption.

Staff provided training on entry of adoption codes into CCRS to nine agencies and NYCRO staff to increase their knowledge of the important steps in achieving adoption finalization and their overall knowledge of the adoption process.

The Adoption Legal Specialist provided training on “Barriers to Adoption” for staff of ACS’ Family Court Legal Services in the Bronx, Queens and Manhattan. Staff commented that the training provided them with a better understanding of the adoption process enabling them to feel more empowered in conducting freed child permanency hearings. Additionally, the Legal Specialist provided training to 45 agency staff on the “Legal Process for Termination of Parental Rights” enabling them to have a better command of this critical process.

Ongoing discussion and consultation initiated by Adoption Staff informing NYSAS and Home Office Legal about issues raised by ACS concerning an OMH facility’s refusal to photo list freed foster children in their care.

Significant Initiatives:

The Permanency Unit Adoption Legal Specialist held several meeting with Mobilization for Youth on training pro bono attorneys to handle agency sponsored adoptions.

The Permanency Unit Adoption Legal Specialist has been attending the New York City Family Court Advisory Committee on TPR/Adoptions.

Adoption Team coordinated the quarterly Statewide Adoption Specialists’ meetings. The meetings afforded Adoption Specialists an opportunity and forum to identify issues and develop strategies to expedite adoptions statewide as well as regionally. The agendas for the meetings included concerns about the continuation of TANF funding for post adoption services, updates on the federal Parent for Every Child project, availability of data on children returning to care from adoption dissolutions, and supporting inter-jurisdictional placements to increase permanency possibilities for children around the state. Staff accompanied Home Office staff managing TANF post adoption grants to oversight meetings with TANF contract agencies.

Adoption team participated in the quarterly advisory meetings of the federal grant “A Parent for Every Child” awarded to the New York State Adoption Service. The project will evaluate the effectiveness of specialized recruitment efforts for older and special needs children placed in OMH, OPWDD and DJJOY facilities. The children selected for participation have been matched with children selected for a control group. Adoption staff completed the Parent for Every Child control group enrollment forms for children and the follow-up forms.

Adoption Team member participated in the Family Court Adoption/TPR Committee meeting and provided information on barriers to adoption finalizations concerning SCR Database Checks and fingerprint requirements.

Foster Care/Domestic Violence Activities for 2012-2013

Permanency unit staff has been involved in a number of program development initiatives. The licensing of several residential programs required the review of ACS' program requests and standards, the review of the proposals submitted by the agencies, site visits and the coordination of meetings with stakeholder to ensure compliance with program, and regulatory standards. Staff provided comments and recommendations to the agency and ACS.

Staff participated in the National Youth Transition Data (NYTD) workgroup. In response to federal mandates, to begin tracking youth transition data, a point person at the Administration for Children Services and other the contract agencies were identified in 2012. Early data revealed that NYC had 26 youth who are being tracked. Workgroup discussions centered on better methods to improve youth involvement and data results for 2013-2014. Permanency staff also provided technical assistance to the agencies on the new data elements added to CONNECTIONS to capture tribal membership affiliation and the provision of independent living skills. The unit's Business Analysts are conducted presentations to the agencies and at the Council on Families and Child Caring Agencies (COFCCA).

In 2012, Permanency staff responded the Close to Home initiative in the licensing of Non-secure Placement (NSP) facilities in NYC. Staff reviewed agency proposals, participated in bi-weekly telephone conferences with agencies, ACS and Home Office (HO), and provided technical assistance, and regulatory and policy clarifications, in order to successfully license 35 Non-Secure Programs in New York City. In addition, staff conducted bi-weekly visits to the Close to Home programs to monitor program implementation and made recommendations for improvements. Staff compiled site review instruments and developed summary reports of the results of those bi-weekly sites visit. Issues involving youth AWOL from the NSP as well as restraint of youth using the Safe Crisis Management model were addressed with the ACS.

Staff reviewed a number of significant draft ACS policies associated with the implementation of the Close to Home. The policies included: procedures for maintaining Contraband-free NSP programs, Conducting Criminal History Checks of prospective Employees, mixing populations, Facility operations, conditions and maintenance, Juvenile Justice Crossover Youth, Safe Intervention, Security, Personal Youth Search, and Facility Search.

Staff worked with ACS to address the relocation needs of displaced foster care and Non-Secure Placed (NSP) youth from an agency impacted by Super Storm Sandy. The agency was unable to return to the facility for several months following the storm. Staff worked closely with the agency, ACS, and Close to Home staff, to confirm the safety of the site before the youth returned to the facility.

In 2012, permanency staff worked with ACS, COFFCA representatives, and community providers to address the growing issue of commercially and Sexually Exploited Children (C-SEC) in NYC. Meetings and discussions resulted in a presentation by existing non-profit providers and Homeland Security who informed the group about their work with youth who were trafficked. COFFCA staff facilitated the forum. Participants updated the NYC resources of providers working with or collecting data concerning this issue. In 2013, ACS submitted a Safe Harbor plan, later approved by OCFS. ACS continues to participate in the Safe Harbor State initiative biweekly conference calls with statewide partners, and other Local Department of Social Services. ACS is working with some provider agencies to continue implementation of the Safe Harbor initiative. For 2013-2014, staff will continue working with ACS and agencies to support full implementation of the initiative.

Staff regularly participates in the Adolescent Services Resource Network (ASRN) and Youth In Progress (YIP) meetings. The unit hosted two foster care summer interns in 2012.

Local District/Voluntary Agencies:

Program Technical Assistance:

The Permanency Unit Foster Care/Domestic Violence team provides ongoing technical assistance to the voluntary and provider agencies on regulatory, policy, and program issues.

NYCRO Permanency Unit continues to work with PPAI, ROPA, and OCFS Bureau of Training (BOT) staff to advise ACS in their training curriculum to increase competency in Safety and Risk Assessment in Child Welfare. ACS James Satterwhite Academy is currently providing the Safety and Risk Assessment (SRA) training to all preventive and foster care agency staff in the five boroughs and NYCRO staff have been observing several of these trainings.

Permanency staff continues to work with the Citywide Oversight Committee (COC) to address cross systems issues affecting children and families. Committee representatives are from the Office of Mental Health, ACS, the Department of Education, voluntary agencies; Borough based Family Advocates, and Lawyers for Children. The committee responds to issues affecting children and families in the various systems of child welfare, education, and mental health. In 2012, staff supported family advocates and mental health representatives to develop a survey that examined the interactions of families with ACS and Family Court. OMH Family Advocates and JCCA staff presented survey results that explored whether families and children's concerns were properly included in the Court process and at FTC meetings. In an additional response to the findings, the COC is exploring the possibility of scheduling a fall forum to bring together ACS, family and parent advocates, OMH, legal and Family Court partners to provide further education about the issue. Permanency staff began participating in telephone conference call planning meetings for the forum.

In 2012, staff provided technical assistance to domestic violence agencies and ACS on the issues of childcare in shelter, residential bed space capacity, and use of bunk beds, sheltering domestic violence survivors and their pets in residential programs and meeting the needs of survivors who are disabled.

In 2013, the ACS Quarterly Domestic Violence Task Force meetings resumed. ACS provided information concerning preventive housing subsidy eligibility criteria for survivors as well as ACS child welfare and child protection responses to families who are in need of shelter.

Permanency/Domestic Violence Reviews:

The Foster Care/Domestic Violence Unit initiated 14 Domestic Violence Recertification reviews between January 2012 and April 30, 2013. Case records reviewed included some that also had ACS involvement. Identifying data concerning which child welfare cases also involve allegations of domestic violence continues to be challenging for ACS.

Permanency unit staff served as the NYCRO lead on the NYC Children and Family Services Plan for the 2012 five year plan and the 2013 Annual Plan Update (APU).

Foster Care/Domestic Violence Reviews:

The Foster Care/Domestic Violence Unit initiated six Voluntary Agency Reviews (VARs) and six Domestic Violence Recertification reviews.

Fatalities:

The unit completed six foster care fatality reports for 2013.

Bridges to Health (B2H):

The Bridges-to-Health Quality Management Specialists continue to monitor and provide technical assistance to the Health Care Integration Agencies (HCIA). Current activities include monitoring enrollments and discontinuance from the B2H Program, processing Serious Recordable Incidents, administering and completing a yearly Administrative Review for each HCIA and completing numerous case record reviews in order to provide feedback to the HCIAS and obtain information used in reporting outcomes on B2H indicators to the Centers of Medicare and Medicaid Services. Focusing on service provision is still a major undertaking in working with the HCIAS. Waiver Service Provider (WSP) recruitment, establishing a budget where B2H services can be adequately utilized by the families and services starting contemporaneously with enrollment in B2H

remain a focus of discussions. Moving forward in 2013-2014, work with the HCIAs will revolve around how the Child and Adolescent Needs and Strengths – New York Assessment can be used develop goals and measure outcomes, how Transitions Planning is written yearly within the child’s Individualized Health Plans and examining whether HCIAs are determining how and when children should leave the B2H Program as a successful “graduation”.

Complaints:

The Permanency unit continues to respond to complaints and inquiries to OCFS. In 2012 – 2013 the unit responded to 150 foster care/adoption complaints.

2013 – 2014 Projections:

Monitor the implementation of: the Post Adoption Service programs; Adolescents; KinGAP; the new program assessment protocol; and collaboration with the ACS Adoption Unit.

The Permanency Unit will continue monthly contacts with assigned ACS offices and quarterly monitoring visits to the voluntary agencies and visits to private, domestic/international adoption agencies.

The Permanency Unit will assess training and adoption regulatory compliance needs. Initiate needs based training and technical assistance to the field on adoption as needed. Introduce new and critical information to the field as needed.

The Permanency Unit will facilitate ongoing agency assessments, review ACS PAMS data and corrective actions, ACS Adoption Scorecard measures, Permanency unit agency reviews, AMS and Data Warehouse reports and NYCRO Adoption and Permanency Review data. Review and monitor the implementation of the MEPA compliant Comprehensive Recruitment Plan. Complete Adoption Programs Reviews for in-state and Article 13 incorporation requests within 90 days of assignment.

The Permanency Unit will participate in joint on-site Adoption/KinGap Panel Reviews at the agencies. OCFS will continue to meet with the foster care and adoption agencies to identify barriers to the permanency process. Incorporate the Adoption Album, OCFS Adoption Services Guide for Caseworkers, NYS adoption regulations and other pertinent materials into ongoing technical assistance and training.

OCFS has developed a new VAR program monitoring instrument with 14 separate program component modules. This will be implemented along with a new process for conducting the reviews that includes partnering with the agencies and Story Boarding (displayed thinking) the findings. The unit conducted two VAR partnering with the agency and Story Boarding the findings.

The Casework Contact Assurance team will be developing a process for monitoring casework contacts with Parents/Discharge Resources.

The Permanency Unit will respond to adoption and foster care requests for information and/or complaints by individuals, agencies, and community groups within seven working days and bring to resolution as soon as practicable.

Albany Regional Office (ARO)

Accomplishments for 2012-2013:

- Adoption Exchanges are held quarterly, ARO continues to provide technical assistance to LDSS/VA's as they plan recruitment and retention events in their county/agency.
- ARO staff held quarterly meetings with adoption supervisors to review and discuss policy, practice, and program and agency support needs.
- ARO continues to support the Capital District Foster Care and Adoption Consortium. Meetings are held monthly and it is an avenue to provide education to the consortium members and develop ideas for recruitment activities in the region.
- Permanency Panels were held throughout the region to review specific child needs in order to highlight opportunities as well as identify any barriers to securing permanency for children in foster care.
- Monitoring and oversight is conducted on all LDSS and VA's recruitment and retention plans through onsite visits, as well as discussion on implementation efforts and to create planned activities within each county.
- ARO staff has provided technical assistance to LDSS and VA's regarding OCFS data available.
- In 2012, there were 153 adoptions finalized. Over the course of the past five years there were 40 youth adopted who were in the Capital Region Heart Gallery.
- In 2012, the Heart Galley was hosted in different community venues all 365 days. ARO staff was on hand at all events to assist in providing information to the public regarding adoption. Additionally, ARO assisted in the development of smaller Heart Gallery exhibits to maximize exposure of waiting children.
- Fourth Annual Foster Care Awareness Walk was held in the capital region on May 22, 2013, to raise awareness of the thousands of children in foster care and the need for foster families.

Plans for 2013-2014:

The ARO Regional Office Recruitment and Retention tasks will concentrate on seeing that all agencies in the region continue to implement their plans and that the plans have long term sustainability toward improving Recruitment and Retention outcomes. ARO will continue to partner with these agencies in order to provide technical assistance as required.

Kinship Guardianship and the implementation efforts of local districts will be explored to determine utilization, impact and barriers to providing KinGAP. ARO staff will work to educate and promote in the region with respect to Kinship Guardianship.

Post Adoption Services Activities:

Parsons Child and Family Center continues to be the only resource to have a specific Post Adoption Resource Center (PARC) to provide post adoption services for families in Albany, Rensselaer, Saratoga, Schenectady, Warren and Washington counties who have adopted or are in the process of adopting. Families can access services such as respite and parent support groups, which includes peer groups and child care for families attending the support groups.

Buffalo Regional Office (BRO)

Accomplishments for 2012-2013:

- BRO is a member of the Coalition of Adoption and Foster Family Agencies (CAFFA). CAFFA is composed of agencies providing foster care and adoption services in Western New York and is organized to support and enhance the delivery of adoption services to children and families. CAFFA's mission is to collaboratively promote permanency through advocacy, education and support. As a member of CAFFA, BRO participated in a number of recruitment and retention activities throughout 2012.
- In August 2012, CAFFA sponsored the annual Family Fest to offer opportunities for approved adoptive families to meet and interact with children waiting for an adoptive placement. The Fest provides a safe environment for youth and adults to talk and mingle while engaging in fun activities.
- CAFFA's Sixth Annual Making Tracks for Families 5K and Fun Walk was held in November 4, 2012. The race is held in an historic cemetery Halloween weekend with a trick-or-treat theme for children and families. In 2012, over 200 people attended the race and after-party to raise money and awareness for foster care and adoption in Western New York.
- On June 2, 2013, CAFFA is sponsoring a Pride Festival at Canal Side in Buffalo, New York, and will host a table to recruit prospective adoptive and foster parents.

Plans for 2013-2014:

- On June 22, 2013, CAFFA is hosting a Foster Parent Appreciation event in recognition of Foster Care Month at the Buffalo Zoo. Each CAFFA member agency nominated a foster family to attend a breakfast awards ceremony. Numerous families will be recognized at this event. A foster/adoptive parent conference is also being held in late June and Foster/adoptive parents from Region 1 will earn four training hours by attending a variety of workshops.

- CAFFA will provide a Wendy's Link Library for foster and adoptive parents use at two locations in the Buffalo area. A Wendy's Link Library, named in honor of former adoption advocate Mary-Jane Link, will have internet access and countless resources for foster and adoptive parents and staff from member agencies of the CAFFA. This is a public private partnership with Wendy's Inc. and CAFFA. They will be located at the New Directions Office in Snyder, New York, and a second is planned housed at The Resource Center in Buffalo, New York.
- BRO and Erie County LDSS are currently making plans for holding their first coordinated Permanency Round Table to address recruitment and permanency issues for those freed children who present various challenges to adoption.

Rochester Regional Office (RRO)

Accomplishments for 2012-2013:

- Permanency panel reviews were conducted in the Rochester Region. The panel process reviewed a minimum of 15 children in foster care in each local district, with a focus on casework practice with emphasis on family engagement, noting strengths in the practice as well as barriers to permanency. Participants on the panels included representatives from OCFS regional office, the local DSS, and the voluntary agency, if applicable.
- OCFS piloted Permanency Roundtables in Chemung County for 12 children in foster care. The focus was to help Chemung county move towards permanency for children where there was not a clear vision of permanency in the near future. Participants included OCFSS regional representatives, local district staff and participants from the Casey Foundation who helped OCFS with learning the process.
- Rochester Region local social services districts sponsored a variety of events in conjunction with November as Adoption Month. Participants in the events included district staff, adoptive families, general public, potential adoption resources, adoption agency staff, and in several cases, staff representing Family Court and OCFS. Some of the events celebrating adoption included the following:
 - 1) All nine counties in the Rochester Region participated in recruitment activities during the month of November.
- The Adoption Resource Network Inc. (ARNI), part of Hillside Family of Agencies, as part of the Wendy's Wonderful Kid's recruitment project, sponsored several events relating to recruitment and retention of both foster and adoptive families.
- Hillside Children's Center, through the Post Adoption TANF programs continued to sponsor on-going support groups, respite, and counseling for adoptive parents. In addition to support, these groups provide an opportunity for education and skill building regarding topics such as parenting difficult children and dealing with emotional trauma.
- Children Awaiting Parents (CAP) was the lead agency in the Heart Gallery of Rochester and the Southern Tier. Collaboration and participation from the Rochester

Regional Office, LDSS and Voluntary Agencies in the region made the Gallery a success.

- The Rochester Region local district and voluntary agency home-finders met quarterly to refresh their certification training skills, learn new recruitment ideas, and learn of training opportunities to offer on-going support to foster and adoptive parents.
- The Rochester Regional Office provides support and technical assistance to local districts and voluntary agencies on recruitment and retention issues. One support is the program called Foster Parents as Recruiters, which offers small stipends to foster parents to help in the community recruitment of foster/adoptive parents.
- The Rochester Regional Office Adoption Specialist attends the quarterly Adoption Specialist meetings.

Plans for 2013-2014:

- The Rochester Regional Office will be exploring the possibility of doing Permanency Roundtables in two additional counties in 2013-2014 to work towards permanency for the children who remain in foster care.
- The Rochester Regional Office will work with the local Departments of Social Services and voluntary agencies that have foster care/adoption programs to develop a new three year recruitment and retention plan.
- The Rochester Regional Office will continue to participate in the Adoption Specialist meetings.
- Permanency Panels will be done in all counties where Permanency Roundtables are not being completed.

Spring Valley Regional Office (SVRO)

Accomplishments for 2012-2013:

- Continue focused effort on the Federal Mandate that requires that the “pool” of committed families recruited reflect the racial/ethnic backgrounds of the children in foster care in each county.
- SVRO continued to use the MEPA template with counties. This enabled them to realize what they didn’t know about their agencies and areas that need improvement. We will be requesting updates from the LDSS/agencies as to their recruitment/retention progress.
- The local districts and voluntary agencies with offices in Region V meet quarterly to exchange information on recruitment/retention ideas and strategies and to discuss child welfare practices that hinder or enhance efforts. At each meeting a representative from a public and a voluntary agency plan and co-lead the meeting. The meetings are well attended by all nine counties and the public and voluntaries learn from each other. CDHS will be conducting Caring for Our Own Training at each Local District for the staff, and the voluntaries in the counties will be invited to participate.

- Agencies in the Mid-Hudson area meet quarterly to discuss child welfare issues and to exchange information on waiting children and families to hopefully match waiting families with waiting children. The group usually invites a speaker to talk on a topic of interest. The agencies network between meetings to provide permanency for children.
- Representatives from Nassau and Suffolk County DSS; voluntary agencies, parent groups, private international/domestic adoption agencies and consultants from the Long Island area meet bi-monthly to discuss child welfare issues and plan recruitment strategies.
- Each year the districts participate in National Adoption Month in November which highlights the need for Adoptive Families. On National Adoption Day many adoptions are finalized in the Family Courts which is a big media and community event. The several counties hosted luncheons, dinners, and other events to honor adoptive and foster families. In addition, all of the counties held individual events and held give-a-ways to promote information on adoption and foster care.
- Rochester region completed 234 public adoptions in 2012, making the total number of publicly adopted children 2,899 since 2003.

Plans for 2013-2014:

- Rochester region has planned and scheduled its quarterly meetings for the Recruitment and Retention Workgroup for 2013.
- SVRO will continue to explore ways to improve, enhance, and acknowledge recruitment and retention activities.

Syracuse Regional Office (SRO)**Accomplishments for 2012-2013:**

- In 2012 the CNY Heart Gallery was on display at different venues throughout the 14 county region. The display includes portraits of NYS Waiting Children, along with brochures and information on foster care and adoption.
- Adoption case reviews/panels were conducted in Tompkins, Onondaga, Broome, Oneida, during the adoption panel reviews, for children without a resource, child specific recruitment for adoptive families is explored.
- A regional adoption exchange was held in May 2012. This provides an opportunity for exchanging information on specific children waiting for adoption and families looking to adopt.
- SRO delivered two sessions of a two-day regional training titled, “Assessing and Preparing Families for Adoption” to the Syracuse and Albany regions. Both voluntary and local district staff participated.
- SRO provided information on foster care and adoption at the Onondaga County Spanish Action League on August 18, 2012.

- SRO joined the grant manager in on-site program reviews at the Children's Home of Jefferson County, Hillside Children's Center, and Salvation Army. SRO provided technical assistance as identified in the development of their post adoption resource center. Additionally, SRO arranged for a panel of the post adoption services grantees to present information to adoption supervisors from the 14 county region.
- SRO attended a foster care and adoption fundraising event. Information on NYS's Waiting Children, and brochures on foster care and adoption were provided.
- SRO arranged for the Parent for Every Child Project (PFEC) to attend the regional adoption supervisor's meeting to share barriers and successes in recruiting and retaining adoptive families.
- In September 2012, SRO held the Annual Adoption Festival at Arise at the Farm. Three children were placed for adoption as a result of the festival.

Plans for 2013-2014

- In May, SRO provided adoption training for Homefinders from the 14 county region. The training involved discussion around MEPA, IEPA, assessing and preparing families for adoption, and the importance of post adoption services.
- The CNY Heart Gallery is scheduled in different venues in the 14 county region throughout 2013. SRO has begun work on the 2014 exhibit schedule.
- SRO has conducted adoption panels at Onondaga County. Jefferson County DSS adoption panel is scheduled for this June; Adoption panels are being planned for Broome and Oneida County Departments of Social Services.
- SRO will be providing two rounds of the two day training on "Assessing and Preparing Families for Adoption" for agencies in our region.
- SRO is in the process of scheduling the annual Adoption Festival for September.
- SRO will be working with the local departments and voluntary agencies to update their recruitment and retention plans by the end of the year.

[For tribal recruitment and retention efforts see Goal 5]

Adoption Opportunity Grant Award

In October 2008, the U.S. Department of Health and Human Services awarded OCFS a five-year Adoption Opportunities grant totaling 2.2 million dollars to support an initiative entitled "A Parent for Every Child (PFEC)" that is designed to promote the diligent recruitment of permanent families for freed older foster care youth with severe emotional, behavioral and developmental needs that require residential treatment in a New York State facility of the Office of Mental Health (OMH), the Office for People with Developmental Disabilities (OPWDD), the Division of Juvenile Justice and Opportunities for Youth (DJJOY/OCFS) or in a Residential Treatment Facility (RTF). The project will recruit a pool of families willing to adopt youth with special needs and will provide training to assist parents with special parenting requirements to meet the needs of these youth. Year one of the grant was a planning year, In Year two the first cohort of 80 youth

were randomly selected. Half of the sample (40) were assigned to the intervention group and the other half (40) were assigned to the control group. Youth in the intervention group were assigned a permanency specialist based on location of the facility in which he/she resides. Permanency Specialists received specialized training in Adoption Competency, Extreme Recruitment and Family Finding. Child specific recruitment activities began including case mining, face-to face contact, contact with viable resources and videos of the youth. A database was developed by the Project Evaluator to maintain information on case specific permanency efforts for youth in both the intervention and control group. A website, www.parentforeverychild.org was designed and provides PFEC program information, videos of youth in the intervention group and links to parent resources. Three regional cross-systems meetings were held by each partner agency to foster discussion and collaboration with cross system partners and stake holders in their region and a marketing campaign was begun. The project has now completed selection of all youth in the intervention group with the major activity focusing on child specific recruitment including using Family Finding and Family Search and Engagement strategies to identify family members or former foster parents who might be interested in providing permanency for children in care. Youth are offered the opportunity to have an Adoption Chronicle (video) filmed and posted on the PFEC website. This personalized video offers youth a chance to speak about themselves and their desire for permanency. These videos can be accessed at www.adoptionchronicles.org. Youth are also offered opportunities to be photographed for the Heart Gallery, Children Awaiting Parents or AdoptUSKids. The use of technology has increased this period with the use of SKYPE to connect one family with a youth located across the state and the use of Facebook to announce PFEC related events.

Parent support continues with the primary providers being PFEC staff. Staff who are associated with these cases have continued to work with families helping them access services and supports in their communities. In western and central New York a resource guide has been developed that identifies permanency supports in each county as well as provides information that would be helpful for service providers working with families to identify available resources prior to moving youth into placements. PFEC staff contacted Parent to Parent of New York State (P2P), a parent advocacy group for families with children who have developmental disabilities. PFEC outreach to this group will continue in an effort to develop a support group for families that offer permanency to youth with developmental disabilities as well as a place to recruit possible families for youth in need of permanency. The Permanency Specialists continued to concentrate their major efforts on child specific recruitment activities for the remaining youth that are active cases in the intervention group. The various recruitment strategies include, panel appearances, photo listings, Chronicles, Family Finding, Family Search and Engagement and adoption matching events. Also, there is individual work with the Permanency Specialists who explore relationships with former workers and other significant others interested in adoption.

Given the age of many of the youth, PFEC staff is very much concerned about youth aging out of foster care before efforts for permanency can come to fruition. Staff spends significant amounts of time visiting with youth assigned to the project and with their

residential and permanency workers. They attend treatment meetings and try to support youth in pushing for permanency solutions. The Specialists have been involved with facilitating visitation in family homes, community locations and even jails. Recruitment efforts are constant and when the team comes together, the sharing of information about children and families has resulted in more effective recruitment efforts. For example, one youth placed in central NY, found a family on Long Island, and a family in the Bronx was able to get support from YGB when they chose to adopt a youth from Buffalo. Another youth moved upstate from a placement in Westchester and was assigned a new Permanency Specialist who had a family in the area who previously would have been ruled out because of the distance but can now commit to this youth. The Specialists have a better understanding of the pitfalls in their work and are getting better at working through barriers, although there is still great frustration with systemic indifference to the plight of some of the youth.

Permanency Status for the Reporting Period:

Two adoptions were finalized. One youth from Allegany County was matched with a family from Utica NY through an Adoption Exchange held by OCFS in Syracuse, NY. The other youth was matched to family that adopted by Child and Family Services in Buffalo, NY prior to coming to PFEC.

Three Permanency Pacts were signed. One youth had his bio-family commit to permanency while he remains in the care of an adult Developmental Disabilities Services Office (DDSO). It includes visitation and emotional support. The second youth have a permanency pact completed with a potential adoptive resource that facilitated reunification with the youth's biological family. The final youth received a commitment from his family while he is still in residential care. He had been estranged from family for several years. His grandmother, three aunts and a cousin met with him and committed to visitation, emotional support, financial support and a possible discharge destination.

Two youth were placed with relative kin. One youth returned to his mother when he aged out of foster care. The other youth moved back with his bio family through the help of his pre-adoptive foster parent who still visits and signed a permanency pact to solidify the relationship.

One Intention to Adopt was filed during the reporting period. This youth personally identified his discharge resource. His college roommate was adopted and introduced him to his mother. A connection developed and he asked her if she would adopt him. The permanency specialist assigned to the case facilitated work towards this happening. The youth transferred from the college he attended to a community college in the Bronx and the intent to adopt has been signed. This youth is 20 years old.

Additionally, efforts to reunite *two* youth with their biological families continue. One family (mother, three brothers and the fiancé of one of the brothers) signed a permanency pact committing to visitation, phone contact, regular check-in, activities and providing clothing. The other youth is currently living with his bio-

family and continue to receive emotional support from his foster father, who has committed to signing a permanency pact.

Permanency Status of Intervention Group as of 9/29/12 (89 youth)

Adopted	7
Adoption Pending	4
Guardianship	1
Guardianship Pending	1
CC/PP/OCC	12
Closed	15 [aged out at 18yrs (14), aged out at 21yrs (1)]
Not enrolled	2 [agency refuses to allow PFEC contact]
Still receiving service	<u>47</u>
Total	89

Activities Planned for Next Reporting Period

Trauma Workshops/Training: In October 2012, all three partner agencies scheduled Trauma Informed Care Workshops in their region. These workshops are available to foster and adoptive parents, professionals and other interested persons who work with the PFEC target population or other foster care youth.

You Gotta Believe brought in author and trainer Jayne E. Schooler on October 22nd to present a full day's workshop entitled, "Becoming Trauma Competent, Healing and Adoptive Parents: Three Skills and Eight essential Tasks". This event will be at the Church of Village in Manhattan from 10-4.

Hillside Children Center will host three half day workshops delivered by Dr. Jody Todd Manly entitled, "The Effects of Trauma on the Development of Youth in the Child Welfare System". These workshops were held on October 1, 2 and 4, 2012 in Buffalo, Rochester and Syracuse, NY for professionals and foster and adoptive parents.

Parson's Child and Family Center will present six three-day workshops for fosters and adoptive parents and professionals using the curriculum "Caring for Children Who've Experienced Trauma". This curriculum was developed by the National Children's Trauma Stress Network. The training will be delivered in Albany, Columbia, Washington, Schenectady, and Ulster counties.

Evaluator Activities: Completion of the collection of data for the four cohorts of the Control Group; examination of all of the data and determination of the contents of the final evaluation report.

Advisory Board: A meeting of the PFEC Advisory Board took place on January 30, 2013.

Vignettes: a consultant has been hired to develop vignettes from multiple perspectives (youth, parents, staff, child welfare and other professionals) on the impact of the PFEC project in finding permanent families for the target population, cross system collaboration

and dissemination of information on the needs of the target population.

Recruitment: PFEC staff will continue to search for permanent resources for youth on their caseloads using strategies that include, panels, child specific recruitment, Chronicles and other photo listing options (AdoptUSkids, OCFS, Heart Gallery, etc.), information meetings, adoption exchanges and Family Finding (family search and engagement).

Cross System Collaboration: Cross system partnerships will continue to be a focus of the project trying to break down barriers that slow the permanency process. In particular, increasing the understanding of residential staff of the importance of permanency through attendance at permanency meetings, and offering training opportunities supported by Hillside, Parsons and You Gotta Believe.

Resource Parents Supports: Provide placement supports to families who commit to a youth by helping them find resources in their communities that will support placement/permanency including providing funding to assist with travel related expenses for visits between the youth and the families.

Court: Recently the court requested information on the project and what results have been achieved serving youth in OPWDD facilities. This information is being sorted from the database for a response to the court.

Sustainability Activities: A meeting was held October 30, 2012 with the Grantee Specialist from the Children's Bureau to discuss PFEC Sustainability Plan and Dissemination Planning Worksheet. PFEC will be working on implementation of the plan during the next reporting period.

Evaluation of Parent for Every Child Project:

BREPA developed an evaluation design for the project that calls for a randomized controlled trial to be conducted in each of the three project sites, and has contracted with the Chapin Hall Center for Children to assist in conducting the evaluation. Approximately 175 children who meet the eligibility criteria for the project will be randomly assigned to either an intervention group that will receive services under the initiative or to a control group that will receive services as usual. The randomized trial will address the question: "Do freed children with serious mental health, mental retardation, or criminal justice histories who receive the specialized permanency intervention program achieve permanency at higher rates and sooner than other children with the same characteristics who do not receive the specialized services?" The evaluation will also assess the relative effectiveness of the various program strategies; alone, in combination, and for various subgroups of the target population. Lessons learned from this project will be disseminated to other states so that agencies across the

country can benefit from the practices developed for waiting children within the mental health, developmental disability and juvenile justice systems of care.

Between fall of 2009 and fall of 2011, four cohorts of children who met the study criteria were identified, randomly selected and assigned to the intervention or control groups, and their eligibility confirmed or a replacement randomly selected, meeting our goal of enrolling 87 children in each study group. Collection of follow-up data on the study children continues and the final report will be completed at the end of 2013.

Post Adoption Services

The continued encouragement of timely adoptions of foster children has resulted in increased attention to the need for services following the adoption. Adoptive parents, service providers and advocates have underscored the importance of a broad range of services provided by specially trained professionals which recognize the unique needs of adoptive families. In addition, social service districts provide preventive services to those adoptive families experiencing turmoil that threatens to result in placement of their child (ren). Two factors curtailed expansive and effective provision of these post-adoptive services: (1) lack of service providers with expertise to serve adoptive families and (2) reliance on social services districts to routinely develop and deliver (either directly or through purchase) specialized services.

Refinement of our understanding of the unmet service needs of adoptive families is important to OCFS and social service districts for developing programs to deliver services. The availability of uncapped 98 Percent of 65 Percent state reimbursements to social service districts for this purpose allows for targeted district investments in filling gaps in services. On-going demand for post adoption services promise to distinguish for the state and its social services districts which services must be tailored to the unique circumstances of adoptive parents to achieve a suitable level of efficacy. For example, must a respite program incorporate information on adoption and its impact on family relationships to be effective? This question could be repeated for a wide range of health, mental health, educational and social services. The more information that is garnered through studies, demonstrations and research, the more programs can be provided to facilitate the ongoing success of adoptions.

The Child Welfare Finance Legislation, Chapters 53 and 83 of the Laws of 2002, enacted for a five year period, was extended by Chapter 57 of the Laws of 2007 to June 30, 2009 and by Chapter 57 of the Laws of 2009 to June 30, 2012. This provides districts uncapped state matching reimbursement for local spending on protective, preventive, aftercare, independent living and adoption services. OCFS has conducted regional training to train on the implementation of this spending. Among other things, the uncapped reimbursement allows districts to consider expansion of existing services or use of innovative strategies for supporting adoptive families.

The Adoption Album

The Adoption Album is a web-based system which caseworkers throughout New York are using to photo-list children on the Internet, and register and photo-list potential

adoptive families. Since 2008, OCFS has maintained the Adoption Album which interfaces with CONNECTIONS. Training is provided via Learnline which allows instructors and trainees from across the state to gather in a classroom environment using their desktop computers. OCFS Regional Office Adoption Specialists are also available to provide training and technical assistance. The Adoption Album allows caseworkers and photo listing contacts to continue the critically important recruitment work of photo listing children freed for adoption and registering families who have expressed an interest in adopting these children. The Adoption Album has always been a valuable resource as a first step in matching children with families and this redesign will encourage greater use of this valuable tool. The time required to photo list a child has been significantly reduced from weeks to, in most cases, the same day as referral to OCFS and workers are now able to upload digital photos. Additionally, New York State families with a completed and approved adoption home study can now register via the internet in the same manner out-of-state families can register. New York State families and out-of-state families interested in registering on New York State's Family Adoption Registry must: (a) complete the form online; and (b) submit the form to New York State Adoption Services (NYSAS) with the appropriate verification identifying that they have an approved home study. NYSAS reviews the registration and the supporting documentation and, if all materials are acceptable, the family is then placed into the Family Adoption Registry. This online form allows an out-of-state family to complete the registration online and electronically submit the information to NYSAS. The family will then mail the appropriate verification to NYSAS. Families can also digitally upload a photo that can also be placed on the Family Photo listing Registry. Once NYSAS receives and reviews the family's information, the family can be registered. The family will receive an e-mail message with notification that their family has been registered. Implementing the online registration eliminates the need for NYSAS to data enter the family's information into the Family Registry and helps to expedite the process of registration. The Adoption Album continues to be an invaluable recruitment tool for providing prospective adoptive parents the ability to view New York State children available for adoption online. The Album provides general information on the individual needs of each child. The internet version of the Adoption Album provides the name and phone number of each child's photo-listing contact on line. This provides prospective adoptive parents the information they need to make an initial inquiry of a child. In 2011, OCFS filmed, edited and posted six adoption videos for youth interested in participating in videos. Caseworkers report inquiries from the public increase when youth are featured in videos. Videos provide an opportunity to hear firsthand from the youth about their interests, favorite activities, goals and the family they hope to be part of some day. The videos can be accessed from the OCFS Video Gallery at <http://www.ocfs.state.ny.us/adopt/videoAdopt.asp>.

In 2011, OCFS introduced the Silverlight Adoption Album on the internet. The Silverlight Album is an alternative way for the public to view children currently photo listed on the internet in the Adoption Album. It provides prospective adoptive parents with thumbnail photos of all children currently in the Adoption Album. Photos can be sorted by gender or age and the child's narrative and contact information is viewed by clicking on each photo. This new feature is a user friendly addition to support recruitment of families for photo listed children.

Statewide Central Register Database Checks

Expediting processes for adoption-related cases for database checks against the SCR and for administrative reviews of cases involving indicated reports of child abuse or maltreatment. Additional training in search techniques is being provided to local districts.

Adoption Services

Development continues on the comprehensive Adoption Discovery Project, a web based system designed to allow data sharing with many stakeholders with completion of the Adoption Album and Subsidy modules, the project is now focused on development of a new Interstate Compact on the Placement of Children (ICPC) database that began in 2012.

Adoption Subsidy

Since 2011, the submission of subsidy applications through the electronic Subsidy database eliminated paper processing statewide. Agencies are required to scan and upload all supporting documentation allowing for submission of subsidy applications with the click of a button thereby eliminating mailing costs and reducing delays. Electronic submission and tracking of adoption subsidies, also significantly reduces errors, returns, copying and mailing costs. Training is provided via Learnline as needed. In 2011, the average length of time from receipt of the application to the approval/denial of the application by OCFS was three days.

Subsidy applications are stored within the system allowing for easy access to copies of the application in the future. One of the major barriers to completing Interstate Compact on Adoption and Medical Assistance (ICAMA) requests for children moving out of New York State has been the difficulty adoptive parent's face in locating a copy of their child's subsidy. Applications that are created electronically will be accessible to districts, agencies and OCFS as needed to support more timely submissions of amendments, upgrades and ICAMA requests.

Criminal History Review

OCFS has expedited processes for criminal history background checks for adoption-related cases. Rapid turnaround of requests for current documentation is being provided as cases are identified through the case review process.

In addition to making improvements in its operational systems, OCFS is bringing additional supports to this effort.

TPR Barriers

A work group including attorneys, judges, social workers and OCFS convened from 2004 to 2008 to explore barriers surrounding the Termination of Parental Rights. This group identified one barrier to adoption related to unclear lines between custody and guardianship, the TPR process and the need to explore methods to expedite appeals. In 2008, legislation was crafted by OCFS and was enacted as Chapter 519 of the Laws of 2008. It clarified the rights and responsibilities of custodians and guardians and created a permanent guardianship.

Other initiatives aimed at expediting adoptions statewide included the following accomplishments:

- Revising the Lawyers Guide to Adoption for the purpose of publishing this document as a statewide guide of the responsibilities of attorneys in the adoption process.
- The Comprehensive Adoption Report (CAR) is now available online for use by social services districts and voluntary agencies. The CAR was developed to provide a standard model/template that will guide practice and training on the contents of an agency's adoption report to be submitted to the court. The CAR provides a guide so that adoption reports prepared and submitted by agencies meet the requirements of State statute and the courts. In NYC, CAR training was provided to ACS, voluntary agency and the court personnel in an effort to initiate use of the CAR in all five boroughs.
- Collaborative effort to focus on the needs of older youth in foster care, the services available to them and improving permanency planning for these youth

Collaboration to AdoptUSKids:

The Collaboration to AdoptUSKids is a service offered by the Department of Health and Human Services' (DHHS) Children's Bureau. This is a national foster care and adoptive initiative to recruit new foster care and adoptive families for children in our foster care system. At the conclusion of the contract for the Response Recruitment teams in 2009, OCFS has taken on the responsibility of responding to inquiries for all upstate families by linking them to the local agency with responsibility for a child or linking them to the state/county/local agency responsible to provide pre-service training and home studies. The Administration for Children's Services continues to respond to inquiries from New York City, OCFS worked with AdoptUSKids to assist in updating New York State children with overdue or outdated photo listings and assisted AdoptUsKids in their efforts to clean up outdated family information.

ADOPTION MONITORING SYSTEM
FREQUENCY COUNTS FOR STATEWIDE
WAITING CHILDREN (FREED NOT PLACED) – 783
April 22, 2013

Age Group	NUMBER	PERCENT
0 TO UNDER 2	27	3.4
2 TO 5	186	23.7
6 TO 9	162	20.6
10 TO 13	192	24.5
14 TO 17	197	25.2
OVER 17	19	2.4
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TOTAL	783	99.8

Ethnic groups	NUMBER	PERCENT
WHITE	270	34.5
BLACK	319	40.7
HISPANIC	95	12.1
INTERRACIAL	41	5.2
OTHER	58	7.4
	-----	-----
TOTAL	783	99.9

Sex	NUMBER	PERCENT
FEMALE	366	46.7
MALE	417	53.3
	-----	-----
TOTAL	783	100.0

Number of siblings	NUMBER	PERCENT
01	729	93.1
02	18	2.3
03	17	2.2
04	2	0.2
05	13	1.7
06	4	0.5
	-----	-----
TOTAL	783	100.0

Services for Children under the Age of Five

P. L. 112-34 added a title IV-B, subpart 1 plan requirement to require the State title IV-B agency to describe activities undertaken to reduce the length of time children in foster care under the age of five are without a permanent family. In addition, the laws added a

requirement for States to describe activities to address the developmental needs of these children (section 422(b)(18) of the Social Security Act).

- The number of children under the age of five in foster care projected to be without a permanent family in FY 2013 and FY 2014;
 - OCFS estimates that the number of children under the age of five in foster care projected to be without a permanent family in FY 2013 will range between 682 and 757 children, and that for FY 2014 will range between 583 and 721 children. This is an estimate assuming that the trend pattern observed during the period from 2007 to 2012 will continue.
- The method of tracking these children and the demographics and characteristics of the identified children;

OCFS utilizes CONNECTIONS and CCRS to track foster care children.

- The targeted services provided to these children to find a permanent family and how they address the developmental needs of infants, toddlers, and children;
 - Early Intervention - The New York State Early Intervention Program (EIP) is part of the national Early Intervention Program for infants and toddlers with disabilities and their families. First created by Congress in 1986 under the Individuals with Disabilities Education Act (IDEA), the EIP is administered by the New York State Department of Health through the Bureau of Early Intervention. In New York State, the Early Intervention Program is established in Article 25 of the Public Health Law and has been in effect since July 1, 1993.

To be eligible for services, children must be less than 3 years of age and have a confirmed disability or established developmental delay, as defined by the State, in one or more of the following areas of development: physical, cognitive, communication, social-emotional, and/or adaptive.
 - Head Start - The Head Start program (for children ages 3-5) and Early Head Start program (for pregnant women, infants, and toddlers) promote school readiness for children in low-income families by providing comprehensive educational, health, nutritional, and social services. Parents play a large role in the programs, both as primary educators of their children and as participants in administering the programs locally. Both programs provide pre-literacy and literacy experiences in a multi-cultural environment. Parents are also provided social services, including assistance with childcare. Services are also available to migrant and seasonal farm worker families.
 - Photo Listing - New York State's waiting children, legally freed for adoption, are photo-listed on the OCFS website. Each child's brief narrative is intended

to introduce you to the child while respecting the child's right to privacy. The narrative is not intended to provide a detailed description of the child's history or current needs. However, when it is determined to be in the child's best interest, the agency contact will share more detailed information regarding the child with individuals who may be able to provide a permanent connection and/or adoptive home for the child.

Within the listing, you will find the name and phone number of the child's agency contact in the child's summary. It is helpful to provide the child's photo listing ID when speaking with agency contacts. Families can also obtain the contact information by e-mailing the New York State Adoption Services office.

- Family Resource Centers (FRC) – FRCs are accessible to all families in their communities without screening or other eligibility requirements, with a focus on families at risk with children 0-5. Over the past year, OCFS worked closely with the FRCs to focus on higher risk families and to make valuable connections with the local social service district priorities and strategies.
- The approach that has been developed for working with this group of infants, toddlers, and children (e.g. priorities for safety assessments, service delivery for reunification, and standards regarding the foster parent-to-child ratio);
 - Dual Certification for Foster/Adoptive Parents
 - Concurrent Planning
 - Family Engagement
 - Increased frequency of visitation w/Biological Family
- How the State addresses the training and supervision of caseworkers, foster parents, and other providers with respect to this population.
 - OCFS, provides training, technical assistance and monitoring to social service districts. The monitoring of social services district and contract agency compliance with program statutes, regulations and practice standards is a joint responsibility between home office in the Bureau of Program Monitoring and Performance Improvement (BMPI) and staff in the Regional Offices (RO) in the Office of Regional Operations and Practice Improvement (ROPI). Social service districts are responsible for the direct supervision of its caseworkers, foster parents, and providers.
 - Training related to caseworkers, foster parents, and other providers is listed under the training section of Goal 2.

Institutional Abuse/Maltreatment Investigations (IAB)

Accomplishments 2012 - 2013:

In 2008, New York State Law was amended to redefine Institutional Abuse and Neglect (IAB) practice and protocols. Chapter 323 of the Laws of 2008 took effect on January 17, 2009. This legislation changed definitions of abuse and neglect, practice protocols and outcomes of IAB report investigations.

OCFS continues to investigate and make determinations in those cases containing allegations of abuse or neglect of children in residential care that are registered by the Statewide Central Register of Child Abuse and Maltreatment (SCR) concerning certain residential care facilities within New York State. In those reports determined to be indicated, OCFS, through its regional offices, continues to promote the development and implementation of appropriate and effective plans of prevention and remediation. Additionally, it is necessary to establish in all cases (whether indicated or unfounded) whether a familial case must be registered at the SCR, whether a crime against a child may have occurred and whether a statutory or regulatory standard has been violated. In all circumstances, appropriate follow-up activity is required. IAB investigators remain empowered to send letters of concern to those agencies that are found to have programmatic issues regardless of the individual case determination. Legislation enacted in 2008 enhanced these requirements. OCFS IAB staff work closely with stakeholders in the field to continue to elevate trauma awareness and distribute information regarding trauma informed program models of residential care.

OCFS continues to investigate and reach appropriate determinations in reports accepted by the SCR that concern children residing in those New York State residential care facilities subject to the IAB jurisdiction of OCFS. In addition, OCFS will continue its efforts with regard to the development and implementation of appropriate and effective plans of prevention and remediation. OCFS remains focused on improving the timeliness of determinations and feedback to agencies in order to support the development and implementation of meaningful plans of prevention and remediation. IAB continues to promote close, productive working relations between home office and the various regional offices; to maintain a close working relationship between investigative staff and staff with responsibility for foster care and licensing; to coordinate among OCFS and the various State agencies with which it interacts regarding institutional child abuse/neglect (State Education Department, Office of Mental Health, Office for People With Developmental Disabilities, and the Commission on Quality of Care and Advocacy for Persons with Disabilities (CQCAPD)). Efforts are also focused on the development of ongoing training initiatives.

OCFS continues to use the Data Warehouse tracking system data elements regarding reports of institutional abuse and neglect incidents in residential settings. The data warehouse tracking system has been very helpful in identifying trends in types of allegations, reporting and determinations. Eventually, the data could be analyzed to support activities related to prevention and remediation efforts. Additionally, a tracking system has been developed and revised to support activities relative to the administrative review and fair hearing process.

As required by law, OCFS has been reviewing all recommended determinations made in IAB cases investigated by CQCAPD. Since the beginning of 2008, this function has been conducted within OCFS by the Division of Legal Affairs. OCFS has also been providing technical assistance and support to investigative staff at CQCAPD as needed

OCFS made several enhancements to the Automated Restraint Tracking System (ARTS) in 2012. The data base is a key component to our commitment to restraint reduction. The following enhancements were implemented: changed the ARTS reporting schedule from quarterly to monthly; a new electronic alert to ARTS users is generated on the last day of each month with a reminder to enter the agency's restraint data by the tenth day of the following month; and a new tab feature has been added that will allow an agency to request to update their designated ARTS user(s). As a result of the Close to Home initiative, modifications to the ARTS screen were made so that it is more consistent with the system currently used by the OCFS Division of Juvenile Justice and Opportunities for Youth to track restraints of youth in OCFS custody. Any update from an agency will generate an automatic email notifying the ARTS liaison in OCFS. OCFS efforts to encourage voluntary agencies to input information into ARTS have been ongoing.

There will be a major change in the way IAB is addressed in New York as a result of Chapter 501 of the Laws of 2013. That law creates the Justice Center for the Protection of People with Special Needs (Justice Center), which will assume responsibility for investigations of abuse and neglect of vulnerable persons in residential care. The populations currently protected by the IAB law will be subsumed within the definition of "vulnerable persons", so the investigation of what is now IAB will become the responsibility of the Justice Center. This change will take effect on June 30, 2013. The Justice Center will have the authority to delegate such investigations to the State agencies licensing residential facilities, so many of the investigations now done by OCFS as IAB investigations may continue to be done by OCFS staff, but as of June 30, 2013, these investigations will be done by IAB staff as agents of the Justice Center.

Safety of Children in Residential Care: Establishing Trauma-informed Facility Environments

Plans for 2012-2013:

Evaluation of Sanctuary Model:

In 2011, the Bureau of Evaluation and Research, in collaboration with the Center for Human Services Research at the University at Albany, completed a three-year evaluation of the Sanctuary[®] Model. Eight sites, including three OCFS facilities and five voluntary agencies, participated in the evaluation and provided annual feedback via youth surveys, staff surveys and/or focus groups, on the extent to which programs adhered to the seven Sanctuary[®] commitments and incorporated Sanctuary[®] tools into their daily program practices. Survey responses were also used to monitor the quality of staff-youth interactions, youth and staff's perceptions of personal safety and well-being, and staff-administrative relationships over time. Evaluation results indicated that while specific areas of change varied across sites, use of Sanctuary tools and endorsement of Sanctuary

practices/concepts generally increased in at least one commitment area over time. To facilitate future implementation efforts, overall patterns of implementation progress and barriers were shared with OCFS administrators and participating program sites were given site-specific feedback on observed program level changes.

Close to Home (CTH)

In 2012, Governor Cuomo signed into law legislation that authorizes New York City to provide juvenile justice services, including residential care, to adjudicated delinquent youth who reside in the City. With approval of New York City's CTH Plan by OCFS, adjudicated youth whom judges have ordered to be placed in non-secure or limited-secure placement facilities, will no longer be placed into the custody of OCFS. As of September 1, 2011, youth designated as needing a non-secure placement will be placed into the custody of the New York City Administration for Children's Services (ACS). Subject to OCFS approval, youth designated as needing a limited secure setting will be placed into the custody of ACS. These youth will be entering the foster care/voluntary authorized agency system, increasing New York's foster care population.

This historic legislation is transforming New York's juvenile justice system by authorizing New York City to provide a continuum of services with a wide range of program options in support of Governor Cuomo's vision of promoting public safety and more effectively serving youth and families. Like the OCFS reform plan, the City's plan is built on the principles of:

- being data informed,
- holding the system accountable to youth and their families, the courts, stakeholders, and the community,
- placing a priority on family and community involvement,
- relying on evidence-informed practices,
- emphasizing school achievement, and
- providing effective reintegration services.

OCFS has set the foundation for CTH by being a leader in reducing over-reliance on residential services for adjudicated youth and in bringing new models of care to its residential facilities and community programs, including the Sanctuary model and the Missouri Model. OCFS has led New York in an unprecedented shift in thinking about the role that youth and families must play in the rehabilitation of young people, and the critical importance of community involvement. In addition, reducing the disproportionate representation of minorities and meeting the needs of LGBTQ youth have become planning priorities for the OCFS and the City – issues that heretofore have not driven policy. CTH planning will be informed by the Brooklyn for Brooklyn initiative, which utilizes the Missouri model training for staff working with youth, and the New York model of milieu and treatment for youth from Brooklyn needing residential care.

New York City has spent the last several years developing and implementing unprecedented juvenile justice reforms. These include the creation of a detention risk assessment instrument (RAI), which gives stakeholders scientifically-validated

information about the risk level of individual youth to inform detention decisions, the creation of community-based alternatives to detention, and the development of alternatives to placement programs including evidence-based options developed as part of ACS' Juvenile Justice Initiative (JJI) and the New York City Department of Probation's evidence-informed Esperanza program. Finally, ACS and OCFS have collaborated to reduce lengths of stay of NYC youth placed by OCFS in voluntary agencies through the JJI Intensive Preventive and Aftercare Services (IPAS) program.

These targeted reforms have yielded a 28 Percent reduction in detention utilization since 2006. The number of NYC youth placed with OCFS has decreased by two-thirds since 2005. At the same time and equally important, serious juvenile crime has declined.

To prepare for the transition to CTH, OCFS Commissioner Carrión convened OCFS senior staff in a CTH Workgroup, and the group developed a work plan to address multiple facets of CTH implementation. Commissioner Carrion hosted ACS Commissioner Richter for a joint CTH implementation planning meeting in NYC with senior managers from OCFS and ACS.

The commissioners agreed to form a small inter-agency workgroup to identify and address CTH related issues. OCFS Deputy Commissioner Felipe Franco and Leslie Abbey from ACS, co-chaired the workgroup which met five times as New York City developed its CTH planning documents for the first phase of CTH implementation, the transfer and new placement of youth designated as needing a non-secure level of placement.

Workgroup meetings and topics discussed included:

- LGBTQ Specific Programming and Policies; Culturally Competent Programming; Addressing Disproportionate Minority Confinement; and Stakeholder Input.
- Case Management Services; Monitoring Restraints; Addressing Youth Absent Without Leave; and Modifications of Placement and Training.
- Finance, Resource Availability, and Staffing.
- Continuum of Services; Effective Date and Acceptance of Youth; Program and Policy Development and Implementation; Exploration of Disposition; and Intake Process.
- Permanency and Discharge Planning; Aftercare; Exploration of Placement; and Intake Process.

At ACS's request, OCFS provided substantive comments on the draft Negotiated Acquisition (NA) for non-secure providers. In addition, OCFS shared foster care and juvenile justice policies, procedural manuals and data as requested by ACS. OCFS drafted a comparison of current OCFS regulations to proposed CTH standards and provided feedback to ACS concerning components of the NA that would require a SAPA application from ACS or for OCFS to amend current regulations.

The OCFS Acting Executive Deputy Commissioner convenes bi-weekly meetings of the OCFS CTH workgroup to address priority issues, including:

- Establishing the OCFS Oversight Model for CTH
 - Develop system-wide performance standards and measures; confirm sources of needed data;
 - Develop voluntary agency performance standards and measures;
 - Identify voluntary agency monitoring methods; case reviews; data analysis;
 - Establish procedures and periodicity of voluntary agency reviews; provision of feedback; corrective action plans; identify agency needs for technical assistance and develop the Technical Assistance plan.
- Approval of new residential programs for the non-secure population and issuance of operating certificates to agencies where required.
- Developing the internal process for identification and transition planning for NYC youth impacted in Phase 1.
- Development of the Risk Assessment Instrument for pre-dispositional Assessment.
- IT Systems (CONNECTIONS) and BICS/WMS Claiming Systems analysis.
 - Finalize requirement for systems changes to CONNECTIONS, BICS, SSPS, CCRS and WMS;
 - Complete construction of systems changes in CONNECTIONS, BICS, SSPS, CCRS, and WMS;
 - Complete testing of systems changes in CONNECTIONS, BICS, SSPS, CCRS, and WMS;
 - Finalize all migrations to all impacted systems; and
 - Begin analysis activities associated with limited secure implementation
- Prepare a demonstration of OCFS's specialized information system for juvenile justice youth, Juvenile Justice Information System (JJIS), for ACS's consideration of certain components.

Close to Home (CTH) Performance Metrics and Evaluation

As the state agency charged with promoting the safety, permanency, and well-being of New York State's children, OCFS is rigorously monitoring implementation of the CTH initiative for plan fidelity and will eventually evaluate the impact of the new model on youth, families and communities served.

To date, this has involved BREPA staff working with child welfare and juvenile justice stakeholders on both the local and state level to develop a series of performance metrics aimed at monitoring system/program performance and safety, including indices of: placement stability, length of stay, and critical incidents. Evaluation designs to compare CTH and non-CTH involved JD youth on short-term (e.g., family contact, community connections, and modification rates) and long-term outcomes (e.g., re-arrest, reconviction, re-incarceration, foster care re-entry) are also being developed. Potential comparison groups include: a historical sample of NYC JDs served prior to the implementation of CTH and contemporary samples of JD youth served in other jurisdictions throughout NYS.

To better understand how CTH works for different subgroups of youth, follow-up analyses may also seek to compare outcomes separately for: boys versus girls, and Non-Secure versus Limited Secure youth. Evaluation findings will not be available for several years, as sufficient program start-up and follow-up time must be allotted.

Training Provided in Federal Fiscal Year 2012-2013

- **Training and Technical Assistance to Support Social Services District Permanency Planning**

This statewide and regional child welfare training resource project provides district-specific training and technical assistance to improve practice and performance to achieve the goals of safety, permanency, and well-being. Trainees for this program include: local district and voluntary agency child welfare administrators, supervisors, and caseworkers. Also provides consultation to OCFS Home Office on the development, design and delivery of child welfare training.

- **Training for New York City Voluntary Agencies**

Training for New York City voluntary agencies, development and operation of a training consortium (a network of training providers), provides a competency-based foundation program for child welfare caseworkers and supervisors, and a variety of in-service training resources to voluntary agencies. Technical assistance is provided. A one-day conference for child care staff was also delivered in NYC. In addition, the training project provides resources to support Children's Services Improved Outcomes for Children initiatives.

804 trainees
96 training days

- **Foster/Adoptive Parent Training**

This program consists of several foster/adoptive parent leader certification preparation components, including Group Preparation and Selection II/Model Approaches to Partnerships in Parenting (GPSII/MAPP), Caring for Our Own, Shared Parenting, and Deciding Together. These training programs prepare local

district and voluntary agency staff and foster/adoptive parents to lead training groups in their areas on the topics above.

- GPSII/MAPP: A 30-hour preparation and selection program delivered over a period of ten weeks by districts and agencies to prospective foster and adoptive parents to assess, develop, and strengthen the attitudes, skills, and knowledge needed by parents intending to foster or adopt children.
- Caring For Our Own: A preparation program specifically for relative caregivers given over a period of nine weeks.
- Shared Parenting: An eight-week program focusing on relationship building between foster parents and birth parents for best outcome of children in care.
- Mini-MAPP: Provides an overview of the basic concepts in the GPSII/MAPP training program to child welfare staff and foster and adoptive care staff within the agencies.
- Deciding Together: Seven consultations are provided in this model to individual families to prepare them to foster or adopt.
- COMPASS, the in-service (post-certification) portion of this training program, includes first-year basic and advanced courses for subsequent years in such topics as Loss and Separation, Preparing Children for Adoption, Managing Difficult Behaviors, Sexual Abuse, Child Development and Discipline among others. There is also a leader certification component to this training similar to the preparation trainings listed above.
- Special Topics and use of the iLinc electronic training platform are other trainings available to foster/adoptive parents, local district staff, and voluntary agency staff statewide.

5023 trainees
536 training days

- **Therapeutic Foster Boarding Home Training (TFBH)**

TFBH provides training and technical assistance in a set of core problem-solving and intervention skills for foster parents, agency workers, and trainers in therapeutic foster boarding home programs.

647 trainees
88 training days

- **Behavior Support, Crisis Prevention and Intervention in Residential Settings**

The program focuses on building the competence of staff to work more effectively and in a safe, positive, therapeutic manner with children in institutional settings. The training includes techniques on preventing, de-escalating, and intervening in crisis situations. The training leads to certification of Therapeutic Crisis Intervention (TCI)

trainers. In addition to the core program, refresher training and technical assistance is provided to previously certified TCI trainers, to assist them in keeping their certification current.

843 trainees
33 technical assistance days

- **Children and Residential Experiences: Creating Conditions for Change (CARE)**

This is a residential child care program model that provides staff from residential and congregate care agencies with the skills and knowledge they need to promote child development and keep kids safe.

20 days of technical assistance
309 trainees

- **Child Welfare Training and Technical Assistance**

Provide training and technical assistance to social services districts to improve casework practice and to overcome barriers to permanency for children in care. Provide training manuals and materials in support of OCFS policy and program initiatives.

214 training and technical assistance days

Training Planned for Federal Fiscal Year 2013-2014

- The training programs provided in 2012-2013, as described in Goal 2 of the APSR, have been judged effective, and continue to reflect an ongoing need. Therefore, all of these training programs will be offered in the coming year, subject to the availability of funds. In addition, the following programs will be offered or revised.
- The work of the Social Work Education Consortium will continue: OCFS has developed a Consortium of Schools of Social Work to work in partnership with the agency to elevate public child welfare practice. The Consortium activities include a full range of training and education activities including degree programs for local district staff, field instruction, curriculum development as well as short term training and workforce development.

OCFS plans to continue to provide a wide variety of management and computer training, which is available to State and local staff from all programs. These courses are open to managers and staff in the child welfare area as well to those serving in administrative functions that support all programs.

GOAL #3

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

ASSESSMENT OF NEED AND CURRENT STATUS

Local districts are required to provide emergency shelter and services to all victims of domestic violence regardless of financial eligibility.

All approved residential and non-residential domestic violence programs in the state are in compliance with the program regulations and offer the core services designed to provide safety and the supports needed to achieve self-sufficiency. NYS is fortunate to have a mandated funding stream and federal family violence funds to help support these initiatives.

2012-2013 PERFORMANCE TARGETS

In eleven counties CPS and DV staff will continue to implement a joint protocol to improve safety outcomes for families affected by child abuse/maltreatment and domestic violence.

Baseline: Eleven counties were funded to implement protocols to work jointly on cases with both domestic violence and child abuse/maltreatment in 2012. During the 2012 reporting period, approximately 1,800 families received specialized services through the CPS/DV collaboration projects. As follows:

- 289 families were visited jointly in the home
- 306 families were visited jointly outside of the home
- 1,262 were joint consultations

Outcomes:

- Of indicated, in 90 Percent of the cases the child (ren) remained safely with the non-offending parent.
- Of reports with unfounded allegations of child abuse or maltreatment, 91 Percent of the families were able to access necessary supports and services.

Approved residential and non-residential services will be provided to adult victims of domestic violence and their children in an effort to offer safety and self-sufficiency options.

Baseline: In 2012, there were 163 domestic violence residential programs licensed by OCFS with a total 3,046 beds, and 87 approved non-residential programs.

- 16,563 adults and children received domestic violence residential services.
- Approximately 46,000 adults and children received domestic violence non-residential services.
- 695 adults and children entered domestic violence transitional housing.
- Approximately 194,800 Domestic Violence (DV) crisis/hotline calls were received by individual providers across the state.

All CPS workers in NYS will receive the mandated DV training in accordance with Section 17(g) of the Social Services Law.

Baseline: In 2012, 309 CPS workers were trained, for a total of 3,074 since its inception in 2005.

STATE AND LOCAL ACTIVITIES

Domestic Violence Services

The prevention of and intervention in domestic violence is a central component of New York State's approach to preserving and strengthening families. After the passage of the State Domestic Violence Prevention Act of 1987 (Social Service Law Section 459-a et. seq.), OCFS completed a multitude of regulatory, funding and licensing initiatives which resulted in major changes in the way domestic violence programs are funded and services are provided to victims of domestic violence. Social services districts are required to refer victims of domestic violence, whether eligible or ineligible for public assistance, to available licensed residential programs and reimburse such programs on a per diem basis based on rates established by OCFS and approved by the New York State Division of the Budget. Social services districts are also required to provide non-residential services for victims of domestic violence directly or to purchase such services from a residential or non-residential domestic violence program. As a result, domestic violence programs, over a multi-year period, have become increasingly mainstreamed into the social services delivery system. These programs continue to offer the safety and support needed to assist victims of domestic violence and their children in becoming self-sufficient and living free of violence.

OCFS is responsible for funding, licensing, approving and monitoring these programs and providing the technical assistance needed to support quality and comprehensive services. This work requires on-going collaborative efforts with other state agencies, social services districts, service providers and Domestic Violence victims and their families.

Accomplishments for 2012-2013:

- Federal Family Violence Prevention and Services Act (FFVPSA) Funds – In 2012, OCFS received a FFVPSA award of \$4,256,486. Five percent of the funds (\$212,824.30) were applied to administrative expenses. A total of \$755,155 supported continuation of CPS/DV collaboration projects, and the remaining \$3,288,506.70 in the amount of \$34,984 each went to the rest of the 94 approved residential and/or non-residential domestic violence programs. The grants support program maintenance, health and safety improvements and/or program enhancements.
- Domestic Violence Information System (DVIS) – During 2012, the Domestic Violence Information System was used to support the statistical requirements of the mandated annual federal and state reports. The system has improved the accuracy and timeliness of the annual reports and makes related information more accessible to users and other stakeholders. DV providers are able to enter their data directly into the system. For NYC providers, who already report data to the Human Resources Administration (HRA), our data system was able to import data from the HRA system directly. County profiles were produced using the system. This information assisted the local social services districts in recognizing any areas which may be lacking and helped in planning and improving overall services for victims of domestic violence in their particular county.
- CPS/DV initiatives – During 2012, progress continued to be made towards improving safety outcomes for families experiencing both domestic violence and child abuse and maltreatment.
 - Eleven CPS/DV collaboration projects were funded in 2012. The collaborations have an out stationed domestic violence advocate at the local CPS office. To facilitate reporting outcome data, common outcomes were used by the projects.
 - OCFS presented six regional forums for child welfare, local district and voluntary agency caseworkers, supervisors and staff from approved domestic violence programs. Nationally recognized consultants, with expertise in domestic violence and child welfare, described a range of strategies for building capacity within child welfare to work effectively with, and provide appropriate services for each member of a family affected by domestic violence. Child welfare workers were also given strategies to promote effective collaboration with the domestic violence community. David Mandel and Kristen Selleck of “Safe and Together” and Shellie Taggart from the National Resource Center for Child Protection Services co-presented. OCFS Child Welfare guidance documents can be found at http://www.ocfs.state.ny.us/main/dv/child_welfare.asp.
 - A two-day mandated domestic violence training for CPS workers was again provided to local department of social services districts. OCFS contracts with The Office for the Prevention of Domestic Violence (OPDV) to provide the training. This training is designed to improve CPS capacity to intervene with families experiencing both domestic violence and child abuse and maltreatment. In 2012, OCFS updated this training to include the new child welfare guidance presented at the forums described above and the DV guidance documents created for child welfare in 2011.

- Non-residential Programming – Additional efforts were made to support the network of non-residential domestic violence programs across the state. In 2012, county plan updates were reviewed by OCFS. Included in the plans are the appendices for approving non-residential domestic violence programs. In response to county plan reviews, home and regional office staff, together with local districts, addressed regulatory, contractual and best practice issues.
- Office of the Prevention of Domestic Violence (OPDV) Advisory Council - OCFS participated in the OPDV Advisory Council. The 2012 topic was DV prevention. All of the participating state agencies shared initiatives related to DV prevention. OCFS did work on child welfare practice regarding domestic violence situations. Guidance documents were developed and circulated. New training has been developed. DV screening guidance for child welfare workers to use when working with families has also been created. OCFS also contributed domestic violence data to the OPDV annual report and the OPDV domestic violence dashboard.

Plans for 2013-2014:

Initiatives

- OCFS will continue to support CPS/DV collaborations. These collaborations are designed to improve safety for families experiencing both domestic violence and child abuse/maltreatment. Other anticipated outcomes include preventing recurrence of child abuse/maltreatment, and reducing out-of-home placements of children. Office staff will continue to assist in the provision of domestic violence training to child protective workers and other child welfare workers across the state. The domestic violence guidance documents for child welfare workers will be disseminated. A teleconference and regional workshops are planned to train child welfare workers on the new strategies.
- A two-day mandated domestic violence training for CPS workers will continue to be provided to districts. OCFS contracts with The Office of the Prevention of Domestic Violence (OPDV) to provide the training. This training is designed to improve CPS capacity to intervene with families experiencing both domestic violence and child abuse and maltreatment. The curriculum for this training was reworked in 2012 to include the new practice guidance being implemented by OCFS.
- Non-residential Programming – OCFS will continue to support the network of non-residential domestic violence programs across the state. County plans are reviewed by OCFS. Included in the plans are the appendices for approving non-residential domestic violence programs. Staff will also conduct site visits to many of the stand-alone non-residential domestic violence programs. In response to site visits and county plan reviews, home and regional office staff, together with local districts, will address regulatory, contractual and best practice issues.

- OCFS will continue to license and approve domestic violence programs and distribute Federal Family Violence Prevention and Services Act and TANF funds, if available, to support the viability of residential and non-residential programs.
- The internet based DV Information System allows staff to identify information that will be useful to programs and communities in identifying trends and gaps to assist in further supporting and enhancing services for victims of domestic violence. OCFS will collaborate with other state agencies on collecting and reporting information that can support such community development. Data collected will be used to provide Domestic Violence Profiles to each county social service district to assist them in evaluating the domestic violence services provided by their county. Also, this information will help them recognize any areas which may be lacking and assist them in planning and improving overall services for victims of domestic violence in their particular county.
- OCFS will review and approve county consolidated services plans as they relate to non-residential domestic violence services and will provide technical assistance to counties and programs as needed to comply with the non-residential program regulations and to provide quality services.
- OCFS will continue to collaborate with other state agencies to help achieve consistency and coordination regarding funding and program quality. OCFS will continue to participate in the OPDV Advisory Council.

Child Protective Services (CPS)/Domestic Violence (DV) Collaboration Evaluation

While it is well-known that child welfare services and domestic violence (DV) providers often serve the same families, there is frequently a lack of coordination between the two systems. In New York State, one approach to improve coordination is to physically place (or co-locate) a domestic violence advocate (DVA) in child protective services (CPS) offices. On-site DVAs provide ongoing consultation to caseworkers, participate in joint home visits and provide cross systems training. The goal of the program is to increase safety for children and families experiencing DV and child maltreatment by jointly improving the case practices of both CPS and DV workers.

OCFS contracted with the Center for Human Services Research (CHSR) at the State University of New York at Albany to evaluate the CPS/DV co-location model between October 2011 and September 2013. While OCFS currently funds eleven co-location programs, other counties support their own co-location or collaboration programs. As the first part of a multi-stage, mixed methods evaluation, interviews were conducted with all Directors of Services in 54 districts (excludes NYC) to identify the various practice models in use across the state. In addition to the 11 funded co-location programs, co-location programs were identified in eight other counties, creating a total of 37 Percent of districts with a co-location program. Sixteen districts (30 Percent) described a collaboration program that did not include co-location, and 18 districts (33 Percent) did not collaborate with a local DV program at all.

Although OCFS specifies certain activities for the local co-location programs it funds, the guidelines allow for a broad range of practice across sites. To better understand how the co-location program has been implemented, CHSR conducted focus groups with CPS and

Family Assessment Response (FAR) workers and supervisors, and interviews with DVAs and DV agency administrators in the eleven OCFS-sponsored counties.

Wide variation was found between the co-location sites in all their CPS/DV activities: identification and referral of DV cases, joint home visits, case consultations, DVA client services, and client engagement. However, along with significant variation, common themes and patterns were identified across collaborations, allowing overall findings and recommendations to be made for co-location projects as a whole.

In the next stage of the research, all CPS and FAR caseworkers in counties outside NYC were invited to take an online survey about their case practice with families experiencing DV. The surveys completed by 1,121 respondents represented an 87% response rate.

The survey was designed to test the following hypotheses:

- Workers in counties with a co-located DVA report better relationships with DV agency staff than workers in counties without a co-located DVA.
- Workers in counties with a co-located DVA report better caseworker practice with clients experiencing DV than workers in counties without a co-located DVA.
- Workers in counties with a co-located DVA possess a higher level of knowledge about DV and greater understanding of DV victims than workers in counties without a co-located DVA.

Currently (April 2013), a companion survey of over 550 DV staff from 68 domestic violence service agencies outside NYC is underway. Also underway is an analysis of CPS investigation case records from three co-location counties and three counties without colocation programs to get a better understanding of case practice differences between CPS caseworkers in co-located and non-co-located counties.

Individual reports on the findings from the three completed stages of the evaluation (interviews, focus groups, CPS caseworker survey) can be accessed here: <http://www.albany.edu/chsr/csp-dv.shtml>. Findings from the last two stages (DV worker survey, case reviews) will also be posted here as they are completed.

New York City Regional Office (NYCRO) and Administration for Children's Services (ACS) Monitoring and Activities

Domestic Violence

Permanency staff participated in planning and worked with the ACS Office of Domestic Violence and Policy Planning to support the OCFS presentation *Building Communities of Practice in Child Welfare and Domestic Violence* for domestic violence providers, ACS, and voluntary agency staff. These two-day well-attended regional forums had attendees from ACS (CPS, Preventive, and Foster Care), voluntary agency caseworkers, supervisors and staff from domestic violence programs. Two nationally recognized consultants with expertise in domestic violence and child welfare described a range of strategies for building capacity within child welfare to work effectively with, and provide

appropriate services for, each member of a family affected by domestic violence and to collaborate effectively with the domestic violence community.

Domestic Violence Providers are excited about the new legislation extending the length of stay for an additional 45 days at emergency DV shelters. With the loss of the Advantage Housing programs in New York City, DV providers and advocates struggled to find permanent housing for survivors approaching discharge dates. In 2013-2014, staff will examine whether the extension of the length of stay changes in regulation resulted in changes to programs and client services.

Permanency/Domestic Violence staff continues working with the Coalition on Working with Abusive Partners (CoWAP). Members include ACS, Human Resource Administration (HRA), domestic violence providers, and programs that serve abusive partners. As a coalition member staff assisted with planning, developing handouts, resource gathering forms and presentation information. In 2012, staff facilitated discussions at a Round Table meeting, *Moving Principles to Best Practice in Abusive Partner Intervention*. In 2013, CoWAP also held a panel presentation featuring five (5) New York City Abusive Partnership Intervention Programs working with teens and adult batterers who are agency or Court referred. These programs serve NYC youth involved in juvenile justice as a result of domestic violence, children, and families experiencing or affected by domestic violence and families involved with preventive services or foster care.

The impact of Super Storm Sandy and its effect on potential increases in the rates of domestic violence incidents in the affected zones was discussed during a conference call with Health and Human Services (HHS). In 2013-2014, staff will be exploring various data systems in the NYC hotline, and other resources to determine whether there have been increases noted in those areas. Preliminary research to HRA and the NYC hotline to locate the information has not yielded data in this area.

In 2012, following the Sandy Disaster Staff sent regular reports to HHS until agencies were able to resume normal operations. Discussions with individual agency providers also focused on cost of renovations, and necessary modifications to existing emergency disaster plans. Permanency staff also requested that all DV agencies provide information concerning Super Storm Sandy expenses, client service needs and expenses. Staff organized a telephone conference with Domestic Violence providers in both residential and Non-Residential programs to discuss how clients can be identify and served with additional supports.

Over the years, researchers and survivors of domestic violence have long raised the issue of the impact of domestic violence on the family and in particular the family pet. Mindful of the increases in pet ownership, and having heard survivor accounts of abuses suffered by their pets while in the intimate partner relationships, OCFS review a pilot project which would allow some small pets in one domestic violence shelter. In 2013, the shelter provider Urban Resource Institute will pilot Phase I of the project, People and Animals Living Safely (PALS) for small pets and cats. In 2013-2014 OCFS

will monitor the project implementations and evaluations to determine Phase II implementation which would include sheltering families with dogs.

Training Provided in Federal Fiscal Year 2012-2013

- **Domestic Violence Training for Child Protective Services Caseworkers**

This training provides CPS staff and supervisors with the knowledge and skills to identify domestic violence within their caseloads, to conduct comprehensive safety and risk assessments, and to develop intervention strategies in cases where domestic violence is present that promote child safety, permanency, and wellbeing. Chapter 280 of the NYS Laws of 2002 requires this mandatory training for all CPS workers.

309 trainees
18 offerings
36 training days

- **Domestic Violence Training for Child Welfare Caseworkers**

This training provides caseworkers with the knowledge to identify domestic violence within their caseloads, to conduct comprehensive safety and risk assessments, and to develop service plans that promote safety, permanency, and wellbeing.

287 trainees
15 offerings
30 training days

Training Planned for 2013-2014

The training provided in the current year has not only been judged effective but also continues to reflect an ongoing need. Therefore, the Domestic Violence and Child Welfare training, as described in Goal 3 of the last APSR, will be offered in the coming year, subject to the availability of funds.

- **Domestic Violence Training for Child Protective Services Caseworkers**

This training provides CPS staff and supervisors with the knowledge and skills to identify families who are affected domestic violence. The training will prepare participants to engage each family member safely, including the domestic violence offender, to conduct comprehensive safety and risk assessments, and to develop effective intervention

strategies that promote child safety, permanency, and wellbeing. Chapter 280 of the NYS Laws of 2002 requires this mandatory training for all CPS workers.

This two-day training is designed to provide a comprehensive skill base for child protective workers. Course topics include but are not limited to: Identifying domestic violence, Interviewing each member of the family affected by domestic violence, Assessing safety, and Making the determination decision. The training will be delivered to CPS workers in LDSS offices throughout the State.

The training was developed in collaboration with the National Resource Center for Child Protective Services and the NYS Office for Prevention of Domestic Violence and reflects current research-based domestic violence/child welfare training.

400 trainees
20 offerings
40 training days

- **Domestic Violence Training for Child Welfare Staff**

Provides training in Domestic Violence including the dynamics of family abuse and safety planning interventions for child welfare caseworkers and supervisors who are working with families experiencing domestic violence.

400 trainees
20 offerings
40 training days

GOAL #4

**ADOLESCENTS IN FOSTER CARE
AND AT-RISK TEENS IN RECEIPT OF PUBLIC ASSISTANCE
WILL DEVELOP THE SOCIAL, EDUCATIONAL AND VOCATIONAL SKILLS
NECESSARY FOR SELF-SUFFICIENCY**

Objective:

OCFS will increase the number of foster care youth and former foster care youth who will be able to make a successful transition to self-sufficiency and who will be able to develop into healthy, functional citizens with permanent attachments to supportive adults, families and communities.

Actions and Benchmarks:

1. Workgroup will be formed to plan for the presentation of educational and vocational forums targeted to foster care youth, service providers, foster parents

and the community, locations and dates of regional forums identified, materials to be distributed developed.

1.1a Six regional forums will be held and materials distributed.

ASSESSMENT OF NEED AND CURRENT STATUS

In 2012 the number of youth with a goal of Independent Living now called *Another Planned Living Arrangement with an adult resource* or APLA was 2,445 or 12.8 Percent of the total number of children in care. This percentage is slightly higher than the percentage of children in care in 2011 with a goal of Independent Living.

Of the youth discharged from care during 2012, 1,375 or 12.2 Percent were discharged to APLA. This represents a slight increase in percentage from the previous year of 11.5 Percent.

The mean length of stay at time of discharge for youth with a goal of APLA is 6.6 years. This is a slight decrease of .2 Percent from the previous year.

In 2012, 39.2 Percent of the youth leaving care after their fourteenth birthday had spent three or more consecutive years in care. Thus, for these youth, their residential care experience extends over a period of time in their development when the acquisition of self-sufficiency skills is very important.

STATE AND LOCAL ACTIVITIES

Independent Living Activities

Program Access

The Independent Living Program for foster care youth is directly administered by OCFS for the facilities it operates, each of the 58 social services districts, and the St. Regis Mohawk Tribe (hereinafter included in the reference to social services district) in New York State. Social services districts have the option of providing independent living services to foster care youth either directly or through a purchase of services contract. Each social services district's Independent Living Program must have available the array of services described below.

The Independent Living Skills program provides youth in OCFS direct care facilities, which are found in several locations throughout the State, twice-weekly life skills training sessions. In addition, youth returning to the community continue to receive community living skills training.

The Education and Training Voucher program for foster care youth and former foster care youth, including youth currently in or discharged from OCFS direct care facilities, is

directly administered by Foster Care to Success, formerly known as the Orphan Foundation of America, under contract with OCFS, with the cooperation of local social services districts.

Program Administration

OCFS is the State agency responsible for administering the John H. Chafee Foster Care Independence Program (CFCIP), including the newly established Federal Education and Training Voucher program carried out under this plan. OCFS has a strong commitment to supporting positive youth development and assisting youth in their transition from foster care to self-sufficiency. OCFS and its predecessor agency have been responsible for administering the federally funded Title IV-E Independent Living Program for foster care youth in New York State since the program's inception in 1987.

Program Description

New York State has a state-supervised, locally administered child welfare system. New York's Independent Living Program and Education and Training Voucher Program for foster care and former foster care youth is administered by the social services districts. In addition, OCFS has direct service responsibilities for the Independent Living Program for youth adjudicated as juvenile delinquents receiving care in our direct care residential centers.

Independent Living Program

New York State's Independent Living Program for foster care youth, which is operational on a statewide basis, is designed to help youth who are under the responsibility of social services districts or the State to develop skill in areas that promote self-sufficiency. The Independent Living Program consists of the following service components:

- A. Assessment Services and Case Planning activities include the setting of a permanency planning goal and documentation of case planning and service provision in the Uniform Case Record, self-identified goals and activities of the foster child and at a minimum, joint discussion of the plan semi-annually. Assessment services must include educational and vocational assessments as well as documentation of Life Skills competencies as a minimum, with semi-annual assessments and modifications of the plan to reflect continued growth and learning.

Upon discharge, the social services district, in consultation with the youth, must identify any persons, services or agencies that would help the child maintain and support him/her and must assist the child to establish contact with such agencies, service providers, or persons by making referrals and by counseling the child about these referrals prior to discharge. In addition, each youth who will be discharged to Independent Living must receive a written 90-day notification of discharge, including the established discharge plan. The plan developed in

consultation with the youth also outlines coordination of services otherwise available to the youth.

- B. Educational Services are integral parts of the Independent Living plan in helping youth receive the education, training and services necessary to obtain employment.
1. Academic Support Services are provided to assist youth in achieving literacy and basic academic skills required for completing a high school degree program or equivalency or, where appropriate, to help youth prepare for and enter post-secondary education institutions. Academic Support Services include, but are not limited to, educational and career assessment and counseling, tutorial and mentoring services, examination preparation and resource and referral services. These services, particularly the mentoring services, should provide personal and emotional support to youth and promote interactions with dedicated adults.
 2. Vocational Training, which should be selected on the basis of assessments of interests and aptitudes, is provided, where appropriate, to those youth in foster care who will not pursue post-secondary education or who may not graduate from high school before their 20th birthday. Remedial education is required prior to the provision of the vocational training for youth with limited academic proficiency. Vocational training includes, but is not limited to, training programs in a marketable skill or trade or formal on the job training. Vocational training may include two-year college programs with specific vocational objectives, occupational training supported by other State or federal funds or provided by organizations, which have demonstrated effectiveness in providing such training. Agencies will advocate and arrange for youth with special needs to receive specialized assessments in order to qualify them as eligible for Vocational and Educational Services for Individuals with Disabilities (VESID), mental health or other specialized services.
 3. Life Skills Training offers, at a minimum, job search, career counseling, locating housing/apartments, budgeting and financial management skills, alcohol and substance abuse prevention, preventive health activities, shopping, cooking and house cleaning.

Youth should be provided with experiential learning or practice opportunities in all areas under the guidance of coaches or mentors.

- C. Independent Living Stipends are provided to foster care youth who are actively participating in the Independent Living programs and serve as an incentive to participate in the program; provide money management experience; and provide the means where savings can accumulate to assist in the transition to independent living.

- D. Aftercare Services are provided to former foster care youth between the ages of 18 and 21 years and include financial, housing, counseling, employment, education and other appropriate support and services. Aftercare services are required for any youth over the age of 16 who is discharged to Independent Living through a trial discharge period. Trial discharge is required for every child discharged to independent living. Custody of the youth is retained for at least six months and certain requirements for casework contacts and service provision apply. The trial discharge period may continue until a youth reaches the age of 21. If a youth loses housing during the period of trial discharge, the social services district must assist the youth to find other appropriate housing or replace the youth in a foster care setting, if necessary. In addition, when custody ceases, the social services district must maintain supervision of the youth until the youth is 21 years of age. Supervision includes casework contacts, referral to needed services, including income and housing services, with sufficient follow-up so that the youth has begun to receive the necessary services.
- E. Room and Board Services, as defined include, but are not necessarily limited to, money for rent, ongoing maintenance (e.g. utilities), furnishings and start-up costs generally associated with renting an apartment, (e.g. money for security deposits on apartments or a utility deposit). For a residence to be considered appropriate under room and board services there needs to be a reasonable expectation that the housing the youth enters will be available to the youth for at least 12 months. Appropriate residence proposed will exclude shelter for adults, shelter for families, or any other congregate living arrangement that houses more than 10 unrelated persons, with the exception of college dormitories or new, innovative models which provide intensive employment or other supportive services in residential settings. In addition, youth receiving room and board services will be required to be supervised. Supervision will include at least monthly contact with the youth if the youth has not sustained adequate housing and income continuously for six months. Additionally, face-to-face quarterly contacts would be required. Quarterly casework contacts are required to be maintained for youth who have sustained adequate housing and income continuously for the past six months.

New York State's approach to room and board services affords social services districts the flexibility to determine how much of their Independent Living federal allotment (up to thirty percent) they will spend on room and board services and whether they will provide limited housing assistance (e.g. security deposits on apartments) or a more complete package of housing services. This approach will support the development of creative strategies to assist youth in a successful transition to adulthood. Social services districts that choose to provide room and board services must establish written policies and procedures for room and board services that address:

- The categories of youth that will be provided room and board services; including if room and board will be provided to the optional category of

eligible youth who left care before attaining the age of 18; the maximum levels of funding for the provision of room and board assistance to former foster care youth who aged out of foster care at 18, 19 or 20, but who have not attained the age of 21; and the expenses that will be covered under the room and board program; and

- The maximum dollar amount that will be paid to any youth for room and board assistance; the length of time room and board assistance can be provided to eligible youth; and any stipulations related to employment or school for the provision of room and board

In addition, New York State provides preventive housing services, including rent subsidies of up to \$300 per month, and up to three years, to youth in foster care who have a goal of independent living when the acquisition of housing is needed to complete the discharge.

In New York State, social services districts have the option of providing room and board services for youth who left foster care because they attained 18 years of age, but have not yet attained 21 years of age. These services may be provided for youth upon discharge from foster care or at a later point in time, provided the youth has not yet attained the age of 21. In addition, social services districts have the option to provide room and board services to former foster care youth who were in foster care and eligible for Independent Living Services while in care, but who left foster care before they attained the age of 18.

Services to Youth

New York State has a state-supervised, locally administered child welfare system. New York's Independent Living Program and Education and Training Voucher Program for foster care and former foster care youth is administered by the social services districts. In addition, the OCFS has direct service responsibilities for the Independent Living Program for youth adjudicated as juvenile delinquents receiving care in our direct care residential centers.

OCFS Direct Residential Care

A life skills assessment and Career Interest inventory are completed at our reception center by all youth placed in OCFS DJJOY facilities. These assessments are conducted using the following tools: Ansell Casey Life skills Assessment and NYS Department of Labor CareerZone web portal. Currently, career preparation is conducted in our education program where youth take part in a Career and Financial Management course.

Most youth in various residential facilities will be able to participate in a variety of training program from culinary arts to automotive. Life skills programming is offered during a variety of program activities within our residential facility.

Transition planning is conducted for youth in DJJOY residential facilities and will be documented either using out continuity of care plan or integrated Treatment Team Plan. This planning will guide the services and programs offered to youth in residential placement and the community.

Services and Supports for Youth in local district custody

Accomplishments for 2012 – 2013:

New York State's Permanency legislation, Chapter 3 of the Laws of 2005, brought about many changes to laws that will affect adolescents. The law includes a requirement to provide life skills services to foster care youth beginning at age 14, regardless of the youth's permanency goal. Implementing OCFS regulations were initially filed on an emergency basis. These regulations became effective as final regulations on December 20, 2006. With these new regulations, the discharge-planning goal of independent living has been renamed "Discharge to another planned living arrangement with a permanency resource." This permanency planning goal is to assist foster care youth in their transition to self-sufficiency by connecting the youth to an adult permanency resource, equipping the youth with life skills and, upon discharge, connecting the youth with any needed community and/or specialized services. An adult permanency resource is a caring committed adult who has been determined by a social services district to be an appropriate and acceptable resource for a youth and is committed to providing emotional support, advice and guidance to the youth and to assist the youth as the youth makes the transition from foster care to responsible adulthood.

The Chafee Foster Care Independence Act of 1999 provides individual states with the option of allowing young people to remain eligible for Medicaid up to the age of 21. New York State law was amended by Chapter 58 of the Laws of 2008 to provide Medicaid coverage to youth under age 21 who were in foster care on or after their eighteenth birthday without regard to an income or resource test. This provision became effective January 1, 2009.

The federal Fostering Connections to Success and Increasing Adoptions Act of 2008, (P.L. 110-351), which went into effect on October 7, 2008, includes requirements for a transition plan for youth age 18 and older exiting foster care. Implementing OCFS regulations were filed on an emergency regulations pertaining to the transition plan requirements. OCFS regulations require that whenever a child will remain in foster care on or after child's 18th birthday, the agency with case management, case planning or casework responsibility for the foster child must begin developing a transition plan with the child 180 days prior to the child's eighteenth birthday or, where the child is consenting to remain in foster care after his/her 18th birthday, 180 days prior to the child's scheduled discharge date. The transition plan must be completed 90 days prior to the scheduled discharge, and must be personalized at the direction of the child. The transition plan must include specific options on housing, health insurance, education, local opportunities for mentors, continuing support services, and work force supports and

employment services. The transition plan must be as detailed as the foster child may elect.

On October 1, 2010, federal Title IV-E foster care reimbursement became available to otherwise eligible youth between the ages of 18 who remain in foster care. Most recently, New York State legislation, Chapter 342 of the Laws of 2010, which became effective November 11, 2010, permits a former foster youth who exited foster care on a final discharge status at age 18, 19 or 20 to re-enter foster care under certain circumstances, provided the youth is under the age of 21. Local departments of social services are now required to provide notice to such a youth that the youth has the right to request that the local department of social services petition the Family Court to return him/her to foster care provided he or she is under the age of 21. In addition, the notice must inform the youth that he or she also may petition the court to return to foster care. The local department of social services or youth petitioning the court must prove that no reasonable alternative to foster care exists.

New York State addresses the needs of youth of various ages and at various stages of achieving independence through the following activities/services such as: assessment and case planning activities, after care services, self-sufficiency training and room and board services.

OCFS' Supervised Independent Living (SILP) Program assists older youth in making the transition to self-sufficiency. On February 13, 2008, new OCFS regulations were adopted governing the approval and operation of Supervised Independent Living Programs and Supervised Independent Living units. The regulatory amendments implement the legislative change enacted by Chapter 160 of the Laws of 2004. The regulations enable authorized agencies that operated supervised independent living programs approved by OCFS to certify homes or apartments as supervised independent living units. The benefit of authorized agencies operating supervised independent living programs and certifying supervised independent living units, is to facilitate expanded use of supervised independent living programs and increase the number of older youth having access to and placed in these programs. In addition, the regulatory change adds the definition of a Supervised Independent Living Unit. Supervised Independent Living Unit means a home or apartment certified in accordance with OCFS regulations by an authorized agency approved by OCFS to operate a supervised independent living program for the care of up to four youth, including their children. Each unit must be located in the community separate from any of the authorized agency's other congregate dwellings. Youth under supervision live on their own in the community in apartments or homes that more closely approximate the type of living quarters youth will be residing in after they are discharged. To participate in the program, youth must be between 16 and 21 years of age, have been in foster care for at least 45 consecutive days immediately preceding the placement in the program or have been in the care and custody or the custody and/or guardianship of the local commissioner of the social services district in a status of trial discharge. Youth must be visited in their unit at least twice per week. The services must provide youth with opportunities to achieve positive outcomes and make successful transitions to self-sufficiency.

To support the development of these skills by youth, OCFS currently offers its Independent Living Core Curriculum, "Introduction to Self-Sufficiency," to child welfare caseworkers in voluntary authorized agencies and social services districts, working with adolescents in foster care who will be discharged to independent living. This outcome-based training program is designed to give caseworkers and caregivers the knowledge, values, and skills that they need to prepare youth to lead self-sufficient and productive lives after they leave care. The Independent Living Core Training Program was developed in partnership with the Adolescent Services Resource Network staff (formerly known as the Independent Living Training Network), a network of four regionally based training centers, which provides training and technical assistance to those preparing youth 14-21 for self-sufficiency, and an advisory committee of social services district and voluntary authorized agency caseworkers, administrators and caregivers. The Independent Living Core is interactive and focuses on building the skills needed to achieve positive outcomes for youth through the use of case scenarios, group work and role-plays. The Independent Living Core is comprised of five days of classroom training, pre-training reading, and on-the-job training activities.

In addition to the Independent Living Core Training Program, OCFS provides a series of advanced courses for caseworkers that have completed the Independent Living Core. These programs highlight skill building around issues such as education and employment, and accessing community resources. Regionally requested training and technical assistance are also given through the Adolescent Services Resource Network. The Network offers regional training conferences and an annual "Youth Speakout" that gives foster care youth the opportunity to voice their concerns and feelings about being in placement, to State and local administrators, family court staff, and of course, their peers.

OCFS, in conjunction with the Adolescent Services Resource Network, conducts ongoing needs assessments of social services district and voluntary authorized agency training needs around working with youth in care. Additionally, OCFS Regional Offices provide periodic technical assistance and monitoring of Independent Living service provision. This allows programs to be responsive to emerging needs.

Foster and adoptive parents need many of the same skills and abilities that caseworkers need to prepare adolescents to live self-sufficiently. Using the Independent Living Core concepts, OCFS has developed in-service training that meets the specific needs of this group and the training curriculum for foster/adoptive parents is now available.

Staff working directly with youth in OCFS direct care facilities receives training on how to use the Independent Living Skills Curriculum and in innovative presentation techniques. The Annual Training Symposium provides an additional two-day formal training opportunity for all direct care Independent Living Skills providers.

A practice guidance paper has been issued to provide social services districts and voluntary agencies, and the OCFS Division of Juvenile Justice and Opportunities for Youth with a new framework for practice with adolescents to strengthen services to adolescents and improve their achievement of permanency. A tool for monitoring

adolescent services has been revised and is being used by OCFS Regional Offices to help social services districts strengthen services to adolescents. The new practice framework recognizes for adolescents to achieve functional independence they must be provided with life skills development and a connection with at least one adult permanency resource to assist them after they are discharged from foster care. Older adolescents in foster care must continue to be provided with opportunities to identify adoption resources and obtain a permanent home. The new practice framework also recognizes that youth who are discharged from placement settings should be provided with resources to support them moving into the community.

On June 3, 2011, the Office issued 11-OCFS LCM-06 advising local social services districts of the process for applying for FFY 2011-2012 Education and Training Voucher program funds, the process of selecting program participants, and information on eligible expenditures and match requirements. The priorities for selecting eligible participants for the Education and Training Voucher program for FFY 2011-2012 were as follows: (1) Priority is given to youth over the age of 21 who had received an ETV award in 2010-2011 who continue to be enrolled in and attending a post-secondary educational or vocational training program and making satisfactory progress toward completion of that program; (2) Second priority is for any other youth who received an ETV award in FFY 2010-2011; (3) Third priority is for youth who are 20 years of age and will be 21 by July 1, 2012, and who are enrolled in and attending a post-secondary or vocational training program and are making satisfactory progress toward the completion of that program. These youth would not have received an ETV award in FFY 2010-2011. (4) Fourth priority is for youth who are 17, 18, 19 and 20 years of age who are enrolled in a post-secondary or vocational training program and making satisfactory progress toward the completion of that program.

A White Paper on: Educational Opportunities for Youth in Care has been developed which provides statistics, background and research information on the importance of enhancing post-secondary education and vocational training opportunities for youth in care.

Transition Plans

On August 26, 2009, an Administrative Directive, 09-OCFS-ADM 16 Transition Plan Requirements for Youth 18 and Older Aging Out of Foster Care was issued to districts and agencies transmitting the newly required Transition Plan Form. Districts and agencies are now required to document transition plans on the form for youth exiting foster care who are 18, 19 and 20 years of age. This new Transition Plan form is intended to assist districts and agencies in developing transition plans with youth that are youth driven and cover the areas that are required by law and regulations. The Transition Plan Form consists of two parts: Part One: Transition Plan Discussion and Part Two: Transition Plan Update and Summary. The questions on the Transition Plan Discussion form are intended to be used by a worker, over a period of time beginning 180 days before the youth's scheduled discharge from care, to engage and guide a youth in discussions about the youth's plans after leaving care. The Transition Plan Discussion form must be completed 90 days prior to the youth's scheduled discharge. Part Two:

Update and Summary form provides a comprehensive snapshot of a youth's transition plans at 90 days prior to the youth's scheduled discharge. Training has been developed on the transition plan form and is being provided to districts and agencies.

Health Care Proxy

On September 17, 2010, OCFS issued an Administrative Directive, 10-OCFS-ADM-12 Health Care Proxy for Youth Transitioning Out of Care to districts and agencies advising them of the requirements of the Patient Protection and Affordable Care Act (P.L. 111-148) that prior to the youth's emancipation from foster care, the caseworker must develop a personalized transition plan as directed by the youth. Additionally, with regard to P.L. 111-148, New York State is required to insure that the transition plan, conducted during the 90 day period immediately prior to the date on which the child will turn 18 years of age, or such greater age as the title IV-E agency may elect in accordance with section 475(8)(B)(iii) of the Act, include "information about the importance of designating another individual to make health care treatment decisions on behalf of the child if the child becomes unable to participate in such decisions and the child does not have, or does not want, a relative who would otherwise be authorized under State law to make such decisions, and provides the child with the option to execute a health care power of attorney, health care proxy, or other similar document recognized under State law."

Re-entry into Foster Care of Youth between 18 and 21

On March 3, 2011, the Office issued an Administrative Directive, 11-OCFS-ADM-02 on Re-entry into Foster Care By former Foster Care Youth between the Ages of 18 and 21 advising districts and agencies of the provisions of Chapter 342 of the Laws of 2010. Districts are now required to provide notice to a youth transitioning out of care of his or her right to re-enter care. Chapter 342 became effective November 11, 2010. The notice must advise the youth that: (1) the application to return to foster care must be done within 24 months of the youth's first final discharge, provided the youth is under the age of 21; (2) inform the youth that re-entry into foster care will only be available where the youth has no reasonable alternative to foster care and consents to enrollment in and attendance at an appropriate educational or vocational program, unless evidence is submitted that such enrollment or attendance is unnecessary or inappropriate, given the particular circumstances of the child; and (3) includes the name and contact information of the youth's attorney.

The district may use the model written notice transmitted in the ADM or an alternative notice, as long as it includes the required information outlined above. The district must make every effort to provide notice to the youth in person. If this is not possible, the notice must be sent to the youth's discharge address. Additionally, the Transition Plan has been revised to require local department of social services and agencies to document the date the youth was told about and given written notice of his or her right to re-enter care, and the name of the youth's attorney and the attorney's contact information. Since a youth is required to get a copy of his or her transition plan, the youth will be able to contact his or her attorney and/or worker to request to re-enter foster care.

Reproductive Health and Services for Youth in Foster Care

On September 1, 2011, the Office issued 11-OCFS-09 ADM entitled Reproductive Health and Services for Youth in Foster Care. This ADM advised local departments of social services and voluntary authorized agencies of the requirements pertaining to reproductive health services for youth in foster care. This ADM also provided guidance and resources to assist LDSS and agencies to become more knowledgeable and competent in the provision of such services, including information on: relevant definitions, reproductive health services, required actions, training and resources. Attached to this ADM was the booklet, *A Medical Guide for Youth in Foster Care*. This booklet is a resource for youth in foster care.

Youth in Progress (YIP)

The OCFS' new framework for practice also supports youth involvement in improving the child welfare system. Youth In Progress, commonly referred to as YIP, is the New York State Foster Care Youth Leadership Team. YIP was established in 2003 and is comprised of teams of youth leaders, each with an adult mentor, from each of the six regional foster care youth leadership groups. Activities of the regional groups are supported by participation of OCFS Regional Office Liaisons, the New York State Adolescent Services Resource Network and other OCFS partners. The motto of YIP is "We are Today's Youth, Tomorrow's Leaders." The mission of Youth in Progress is:

"To enhance and advance the lives of today's and tomorrow's youth by supporting their sense of self and responsibility. To do this, we pledge to educate everyone involved in the various systems. Youth In Progress members represent to the realities of this experience."

The Ongoing Goals of Youth In Progress are to:

- Raise public awareness of the experiences of youth in care;
- Increase youth involvement in all systems that touch their lives;
- Empower youth through the development of leadership and decision-making skills;
- Improve policies and practices to assist youth transition out of foster care; and
- Increase awareness, availability, and participation in services provided to youth transitioning out of care.

From 2003 to the present, YIP has achieved an impressive number of results including:

- co-writing a handbook for youth in foster care;
- holding regional speak-outs;
- participating in the filming of a video to accompany the handbook;
- enacting regional distribution plans for the handbook;
- producing a video on clothing;

- developing a proposal on clothing in partnership with OCFS which was incorporated into an Informational Letter issued by OCFS to social services districts and authorized voluntary agencies on meeting the clothing needs of foster care youth ages 12 through 20 years of age;
- producing a video to address issues related to the stereotyping of youth in foster care;
- continuing to meet with state legislators and are participating in local, statewide and national/events featuring Youth Voice; and
- becoming trained and certified by Foster Club, a national organization, to teach other youth about the importance of permanency for older youth in foster care. This training is being used in New York State to train service providers as well as youth.

In addition, each year Youth In Progress in partnership with OCFS, produce four informational resource guides for youth in care. To date, we have developed pamphlets on: the YIP mission; clothing allowances; privacy issues; sibling placement; pregnancy and parenting; law guardians; Chafee Foster Care Independence Program; college/vocational training; Lesbian, Gay, Bi-Sexual, Transgender and Questioning youth (LGBTQ), Housing, Money Smarts, Adoption and Transition Planning, KinGAP, Bullying, Supportive Adults and Permanency Resources, Getting a Job, and Wellness. Youth In Progress is also represented on the Commissioner's Youth Advisory Board which meets on a quarterly basis with OCFS Commissioner Carrion.

The major efforts in the coming year will be geared to enhancing the implementation of the Chafee Foster Care Independence Act of 1999 (CFCIP), including the Chafee Education and Training Voucher Program and the implementation of the new provision of federal law, added by the Child and Family Services Improvement and Innovation Act (P.L.112-34) pertaining to foster youth identity theft.

OCFS will be instituting a new, evidenced-based, strength-based Life Skills Training program throughout its direct care system as a key core component of the OCFS residential treatment program. Additional life skills interventions will be identified and prescriptively provided for youth in OCFS direct care programs from the newly developed "Counselor's Toolbox".

OCFS will be revising our strength-based Life Skills Training program that was used at its residential program. Additional life skills interventions will be identified and prescriptively provided for youth in OCFS direct care programs.

Training Provided in Federal Fiscal Year 2012-2013

- Adolescent Services Resource Network for Training and Technical Assistance

This network provides training and technical assistance to caseworkers, voluntary agency staff, foster parents and DJJOY staff who work with all youth ages 14-21

preparing them for self-sufficiency. A variety of specialized programs address regional needs around independent living services/skills. This includes the outcome based Adolescent Services Core Training “Introduction to Self Sufficiency” and the Adolescent Services “Toolbox” Skills Development Training that is delivered statewide. Youth leadership is emphasized through youth forums and speak outs statewide. The New York State Adolescent Services Resources Network administers the Regional and Statewide Youth Advisory Leadership Team called “Youth in Progress” (YIP). YIP consists of a team of foster care youth, including youth in OCFS facilities who represent each of the six regions in New York State.

340 training days

Adolescent Services Resource Network

The Adolescent Services Resource Network provides individualized training and consultation to support preparation of foster care youth for discharge to self-sufficiency. Each regional provider offers services in all competency areas of life skills. They assist workers with the skills needed to engage and motivate youth through the developmental steps required to achieve permanency and self-sufficiency in the community. Services are provided through training, educational forums, technical assistance, newsletters, curriculum seminars, practicum, etc. The network provides an integrated delivery of coordinated services.

The outcome-based Adolescent Services Core Training called “Introduction to Self Sufficiency” is offered throughout the State. This program gives caseworkers the knowledge, skills, and value base they need to prepare youth to achieve self-sufficiency. Content areas include: using interpersonal skills with adolescents; special needs of youth leaving care; assessment and case planning; developing and enhancing supportive relationships; and identifying and building community supports.

The Adolescent Services “Toolbox” training provides caseworkers, foster parents and DJJOY staff with the tools needed to assist youth in developing competencies needed for transition to adulthood. The toolbox provides participants with practical, concrete instruction and materials to engage youth either in groups or individually to assess and promote life skill development.

A training developed in 2010 to address the federally required Transition Plan for youth preparing to be discharged from foster care continues to be delivered in multiple districts statewide. This training provides participants with comprehensive information about how and when to engage youth in developing their transition plan. This training was developed in consultation with OCFS Youth Summer Interns and is now offered to Child Welfare and DJJOY staff either via iLinc or as classroom training.

The statewide youth advisory group, Youth in Progress, formed in August 2003, addresses and provides input into improving the CW and DJJOY systems. This group is composed of foster care adolescents and their adult mentors, including youth in OCFS

facilities and representing each of the six regions in New York State. YIP focuses on making targeted improvements in the quality of foster care services and improving positive outcomes for children and families. YIP training activities in 2012 continues to focus on strengthening the practice around permanency for youth in care. Foster care and DJJOY youth continue to meet quarterly with the OCFS Commissioner.

Training Planned for Federal Fiscal Year 2013-2014

Plans for 2013-2014 include the following: The Adolescent Services Core “Introduction to Self-Sufficiency” is still in the process of being revised incorporating feedback from the National Resource Center for Youth Development. The Adolescent Services “Toolbox” Training was revised in 2013 based on the changes to the new Casey website. Topic specific training and technical assistance are courses designed to help foster care youth transition from care to self-sufficiency and will continue to be offered. The trainee population for these programs includes caseworkers, supervisors and foster parents of the local social service district and residential child care facilities, as well as OCFS DJJOY facility staff.

OCFS plans to support the regional and statewide Youth Advisory Leadership Team, “Youth in Progress” (YIP) which consists of a team of foster care youth, including youth in OCFS facilities who represent each of the six regions in New York State. OCFS will accomplish this mission by listening to youth in care and by offering them guidance that will allow them to achieve success in their lives and to realize their full potential.

Each Network member presents an annual youth speak out and leadership development event that gives youth the opportunity to inform agency and OCFS and LDSS administrators, judges and elected officials of issues of youth in care.

For 2013-2014, training programs that focus on adolescent issues and support state and federal legislation including ASFA and the 1999 Chafee Foster Care Independence Act will continue.

All planned activities for 2013-2014 are subject to the availability of funds.

GOAL #5

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

ASSESSMENT OF NEED AND CURRENT STATUS

Based on a review of data collected on Native American children in out-of-home placement as of December 31, 2012, it was found that 118 children were found to be subject to the provisions of the Indian Child Welfare Act (ICWA). These children lived in various parts of New York State, both on and off reservation territories. The geographic breakdown of these placements is as follows: 31 Percent of these placements were in the five Western New York counties adjacent to or near Indian Nation reservations (Tuscarora, Seneca, and Tonawanda Seneca Nations). An additional 12 Percent of the placements were in three Central New York counties near the Onondaga and Oneida Indian Nation territories. The northern portion of New York State accounted for 17 Percent of Native American out-of-home placements, with a majority of those placements on the St. Regis Mohawk Reservation. With the knowledge that our largest Native American population resides in the five boroughs of New York City and Long Island, we found 22 Percent of the Native American placements in this area of the state. The total number of Native American placements represents .006% of the total foster care population of NYS.

During 2012, OCFS reviewed 118 of the 138 Native American cases. Fourteen of the Native American children achieved permanency by return to parents or adoption. Of the 104 Native American children remaining in out-of-home placement, twelve children required a higher level of care, including therapeutic foster homes or group home institutional settings. The remainder of the foster care placements is as follows; there are 47 in certified foster homes, and 45 were in kinship foster placements. Of the 92 youth in foster/kinship placements, 40 were matched consistent with the placement preferences of ICWA.

OCFS is supporting this goal by involving tribal representatives in collaborative meetings with our administration, court personnel, and regional initiatives for Family Assessment Response (FAR) and Disproportionality Minority Representative (RECC) trainings and education. New York's Tribal staff has been invited to participate in CORE caseworker and other training opportunities to strengthen their skills in the child welfare field and to develop better partnerships with local districts involved in their communities. OCFS also continues to build strong networking activities among tribal staff through quarterly stakeholder meetings sponsored by the Native American Services Unit.

PERFORMANCE TARGETS

Indian Child Welfare

- Increase to 50 Percent the number of Native American children who are placed in foster care families of the same ethnicity over a five year period.

Baseline: The number of Native American children who are placed in foster boarding homes or adoptive homes of Native American ethnicity in 2008.

2008: 29 Native American children of the 60 in placement (48.3 Percent)

Current Data:

2009: 36 Native American children of the 73 in placement (49.3%)

2010: 35 Native American children of the 79 in placement (44.2%)

2011: 28 Native American children of the 45 in placement (58.8%)

2012: 40 Native American children of the 92 in placement (43.4%)

Projected Targets:

2013: not below 50 Percent *

*It is anticipated that the identification of Native American children will continue to increase based on ICWA trainings from 2008-2013. It is not known if the number of licensed Native American foster homes will meet such increase of identified Native American children. Improved preventive efforts and kinship placements may factor into the performance targets.

Placement of Native American children and youth in Native American homes and programs whenever possible remains a state policy. Some of the data reported in this target comes directly from the field including contacts with local districts in New York State. As demonstrated by the data, we have been successful in our efforts to support our goal. The difference in current year data reflects more children properly identified as Native American, but a drop in placement resources that match the child's tribal heritage. Of the 92 Native American youth in foster homes placements, 40 were matched with placements to support their tribal heritage. An additional twelve youth were placed in residential placements, which met their higher level of need. Factoring in the higher level of care required and the increased number of kinship placements, NYS is actually at 68 Percent compliance rate.

Some Native American children are not placed in Native American homes because of the type of placement required. These placements are often for youth and children with special needs. Some placements in non-Native homes have been reviewed by either tribal staff or Native American services agencies, which have approved the placements. These placements, as well as "relative or kinship placements" are included in the data above. It was also found that direct Tribal ICWA placements were at 100% compliance in 2012 in placing Native American children in Native American

placements (17/17). The specific training activities and quarterly stakeholder meetings have also strengthened the ability to serve tribal families under ICWA.

Data Source to measure progress for the performance target above: Data Warehouse and OCFS Native American Services Unit*

STATE AND LOCAL ACTIVITIES

State/Tribal Relationship

The St. Regis Mohawk entered into a State/Tribal Agreement with the predecessor of OCFS in August 1993 that was effective April 1, 1994. That Agreement contained two specific components: legal terms and conditions; and a service plan for the provision of foster care, preventive services and adoption services. The plan contained in the Agreement outlines strategies to: reduce the need for foster care through intensive preventive services; increase recruitment and certification of foster homes on the Reservation; and promote the provision of foster care services in a way that maintains cultural and Tribal values and permit the earliest return of the child to natural family. Children freed for adoption will be placed in adoptive homes that will meet their personal and cultural needs. The delivery of child and adult protective services is addressed through an amendment to the State/Tribal Agreement and the tribe's updated services plan that became effective in April 2005. On-going meetings between the St. Regis Mohawk Tribe and OCFS to improve and expand services take place on a regular basis.

The Seneca Nation of Indians and their various administrations have expressed an interest in improving their working relationship with local districts. OCFS Native American Services Unit has been involved in an ongoing dialogue regarding such a relationship. OCFS arranged for several training events to meet the needs identified by Seneca Nation. In 2002, the Seneca Nation developed and endorsed a tribal protocol for child protective services. Meetings between OCFS, local districts and Seneca Nation continue to refine this protocol and meet the child welfare staff development needs.

Although the Oneida Indian Nation no longer accepts federal Indian Child Welfare funding, it staffs a Family Services Program and has continued to work with Native American Services on ICWA issues and training. OCFS continues to include Oneida Nation in our training initiatives).

Neither Tuscarora Nation nor Tonawanda Seneca's operate ICWA programs on their reservations or accept federal funds. Onondaga Nation hired staff to support at-risk families on their tribal territory in 2010. They do not wish to enter into a formal agreement with the State or local districts at this time. The Onondaga Nation Family Protective staff has participated in OCFS Core Training for caseworkers and other staff development trainings offered by OCFS. They also participate in OCFS quarterly trainings and Tribal Consultation meetings.

Of the two Long Island Tribes, the Unkechaug Nation, does not receive funds to operate programs. However, since the Shinnecock Nation received federally recognized tribal

status in late 2010, OCFS has initiated dialogue to support their development of child welfare services.

The interactions that take place through Native American Services (NAS) are complemented and strengthened by ongoing interactions between the social services districts, OCFS and those who provide services to Native Americans.

Within the last eight years, an ICWA desk aid was developed for use by local districts and voluntary agencies. Copies were distributed to the Indian Nations and OCFS Regional Offices. An update to include information on use of a Qualified Expert Witness was added to the desk aid along with an updated list of tribal contacts. In 2011 and 2012, the ICWA desk aid was updated again with correct tribal contacts and to include the federally recognized status of the Shinnecock Nation and posted on our website.

A training DVD titled "ICWA: What Caseworkers Need to Know" was developed within the last six years and has been used extensively as a training tool. Three of the Tribal Nations participated in the filming and production of this DVD.

To continue efforts to improve child welfare services in Native American families, additional training events were held to train local districts and voluntary agency staff on ICWA compliance issues throughout 2012-2013.

Description of Native American Population in New York State

The Native American population in New York State resides in every county across the State in urban and rural areas, with concentrations near urban areas and near reservations. Approximately ten percent of the Native American population resides on reservations. The Urban Centers are located in New York City, Buffalo and Niagara Falls, and Rochester. Available data also reports that over 40 Percent of the Native Americans living in New York State resides in the five boroughs of New York City.

The Native Americans who live outside of the reservations seek services and social interaction at the Urban Centers or with other Indian Nations, if they are not located in close proximity to their own Tribe.

Native American Population in New York State as Reported by the Indian Nations/Tribes

Indian Nation	Reservation	Enrollment	Resident Population
Iroquois:			
Cayuga Nation of Indians	Seneca Falls Territory	502	40
Oneida Indian Nation	Oneida Nation Territory	1,000 *	500 *

Onondaga Nation	Onondaga Reservation	1,959 *	900 *
St. Regis Mohawk Tribe	St. Regis Mohawk	14,473	14,473
Seneca Nation of Indians	Allegany/Cattaraugus/Oil Springs (All Seneca Territories)	7,978	22,796
Tonawanda Band of Senecas	Tonawanda Reservation	1,100 *	600 *
Tuscarora Nation	Tuscarora Reservation	1,200 *	1,500 *
Algonquin:			
Shinnecock Tribe	Shinnecock Reservation	250 *	500 *
Unkechaug Nation	Poospatuck Reservation	128 *	250 *

*Approximate estimates based on previous data. OCFS does not collect tribal census figures from these Indian nations.

St. Regis Mohawk Tribe

The St. Regis Mohawk territory, known as Akwesasne, "Land Where the Partridge Drums", is located in northern New York State and crosses the international border and the St. Lawrence River, extending into Canada. The St. Regis Mohawk Tribal Council is the duly elected and recognized government of the Mohawk people. The Tribe provides comprehensive services to the community through ten basic divisions: Education, Economic Development, Environment, Community and Family Services, Planning, Justice, Health, Office of the Aging and Department of Social Services.

Education programs include support for students enrolled in the public schools to encourage their continuation, Head Start, GED programs, higher education and vocational training, including college extension services and Workforce Investment Act Program services. Health Services include a medical clinic, a Dental Clinic, WIC, alcohol/chemical dependency program, Teen/Women Health program, nutrition services and mental health services, and a program to empower young mothers. Community and Family Services staff addresses the needs of developmentally disabled children, families and disabled residents in the community while maintaining the integrity of the Mohawk family unit. The Community and Family Services program provides respite services for families of the developmentally disabled and supportive apartments provide services to allow residents who are developmentally disabled to transition from home to a sheltered, independent environment. The Department of Social Services provide support services for families at risk of dissolution, providing a vital link to families while insuring the maintenance of cultural values. The social services programs provide intensive preventive, foster care, adoption, child protective services and adult protective services on the Reservation through the State/Tribal Agreement with OCFS. The St. Regis Mohawk Tribe has incorporated the Family Assessment Response (FAR) as an

alternative approach to providing protection to children by focusing on engaging families in support services to increase their ability to care for their children. OCFS has licensed the tribally operated Awkesasne Youth Group Home to serve 12 at-risk Native American youth which also operates under the Tribes Department of Social Services. The Tribe's Indian Child Welfare Act staff advocates for Mohawk children throughout New York State and the United States.

Seneca Nation

The Seneca Nation operates with an elected form of government. Elections for Tribal Council members and officers including President, Treasurer and Tribal Clerk occur every two years. The Seneca's judicial elections for Surrogate Judges, Peacemakers, and a Court of Appeals take place every two years opposite the general elections. Most judges serve four-year terms. The Tribal Council administers all Tribal programs on both the Cattaraugus and Allegany Reservations.

The Seneca Nation Child and Family Services Program provide a variety of child welfare services including preventive and foster care services. In addition, Indian Health Services provides state-of-the-art health clinics on both Reservations. Mental health, alcohol and substance abuse, domestic violence, job training, Head Start and day care programs, Indian education, housing, and a senior nutrition program are provided through staff that spends time alternating between the Cattaraugus and Allegany Reservations.

In addition to the above, the following Indian Nations or Indian organizations provide limited Indian Child Welfare services.

Cayuga Nation

The Cayuga Nation operates a traditional form of government and provides limited ICWA services. The Tribe receives official tribal notification and attends court proceedings involving minor Cayuga children entering foster care or being freed for adoption. OCFS Native American Services unit also distributes tribal annuity payments three times a year.

Onondaga Nation

The Onondaga Nation initiated a Family Protective Services program approximately two years ago. The tribal staff assigned to provide protective and support services to families residing on the Onondaga Nation territory, participate regularly on child welfare training offered by OCFS. The tribal staff also participates in quarterly workgroup meetings and OCFS Tribal Consultation Meetings.

Summary of Governmental Structures

The Indian Nations in New York State have adopted a number of different forms of governmental and administrative structures. There is interaction and consultation between these structures in the decision making process which also includes the Clan Mothers. This respect and inclusiveness of differences within the communities has an impact on the decision-making process.

Indian Nation/ Tribe	Governing Structure	Administrative
Cayuga Nation of Indians	Hereditary Chiefs	Council of Chiefs
Oneida Indian Nation	Tribal Appointment	Representative Acts as CEO
Onondaga Nation	Hereditary Chiefs	Council of Chiefs
St. Regis Mohawk Tribe	Tribal Elections/Chiefs	Chiefs Council
Seneca Nation of Indians	Elections/ Tribal Council	Tribal Council with President
Tonawanda Band of Senecas	Hereditary Chiefs	Council of Chiefs
Tuscarora Nation	Hereditary Chiefs	Council of Chiefs
Shinnecock Tribe	Tribal Elections/Trustee	Trustees Serve as President, Secretary and Treasurer
Unkechaug Nation	Tribal Elections/Trustee	Trustees Elected to 1, 2, 3 year terms

ICWA Funding:

Three of the Indian Nations receive federal ICWA funds to provide Indian Child Welfare Services. The following outlines the Indian Nations/Reservations that operate ICWA programs and the counties that are included in their service area.

Indian Nation/Reservation	County Service Area
St. Regis Mohawk Tribe/ St. Regis Mohawk Reservation	Franklin, St. Lawrence counties primarily, but also statewide for Mohawk children
Seneca Nation of Indians/ Allegany Reservation Cattaraugus Reservation	Erie, Cattaraugus and Chautauqua counties

Cayuga Nation

Cayuga members only, statewide,
are served through administrative staff;
designated tribal territory Seneca Falls

Urban Indian Centers

Local non-profit Urban Centers provide a wide range of programs, including job training, alcohol and substance abuse and services for the developmentally disabled. The New York City Urban Center programs include a Youth Council and Health Services. The Buffalo/Niagara Falls Urban Centers provides ICWA services including preventive counseling, foster care recruitment and certification, intervention, AIDS training and outreach, a program for seniors, youth and cultural programs.

Since 1997, the Urban Indian Centers do not receive federal Indian Child Welfare Act funding, but do provide some support services to the following areas:

New York City

Queens, Bronx, Brooklyn, Manhattan, Staten Island, Nassau, Suffolk, Putnam, Westchester and Rockland counties.

Buffalo/Niagara Falls

Niagara, Erie counties (off-reservation)

Rochester

Orleans, Genesee, Wyoming, Livingston counties

The Buffalo Urban Center provides ICWA services including preventive counseling, foster care recruitment and certification, and intervention through a purchase of services contract with the local district.

Accomplishments for 2012–2013:

Throughout 2012-2013, the OCFS Native American Affairs Specialist (NAS) met on a formal basis with various Tribal Representatives across New York. A formal protocol for regular and on-going dialogue and consultation with Tribal Leaders was established in 2002. Two formal Tribal Consultation meetings were held in May and October 2012, with the OCFS CWCS Assistant Commissioner presiding.

Site visits are conducted to Indian Reservations in New York by the Native American Affairs Specialist. The primary purpose of the site visits is to assess the needs of the Indian Nations and to address concerns related to the delivery of child welfare services.

From March 2012 – March 2013, 13 site visits were made to six of the nine Indian Nation territories. As a result of the site visits, child welfare protocols were strengthened, staff training needs were identified and family court personnel were introduced to tribal officials.

OCFS Bureau of Native American Services continued to host quarterly meetings with Tribal and local district caseworkers in both urban and reservation settings. The primary purpose of these meetings was to support and improve compliance with the Indian Child Welfare Act. Such meetings were held in Buffalo in April 2012, at the Tuscarora Nation in June 2012, at the St. Regis Mohawk Reservation in August 2012 and in New York City in January 2013. OCFS hosted the second 2013 quarterly meeting in Buffalo in April.

Also In 2012-2013, OCFS supported Indian Child Welfare compliance through trainings offered at various forums including local districts, voluntary agencies and OCFS regional meetings. Approximately 365 workers attended the various trainings, with an additional 57 caseworkers completing the on-line ICWA training in 2012.

OCFS also sponsored twelve tribal representatives from five Tribal Nations to attend the Adult Abuse Training Institute in Albany on October 2–3, 2012 to strengthen Tribal Adult Protection programs.

NAS offered technical assistance and compliance support to over 290 calls for assistance on ICWA cases identified by the local districts, voluntary agencies and Tribal staff in 2012-2013. The OCFS ICWA desk aid was distributed to 187 caseworkers in 2012 and an additional 60 through March 2013.

Tribal Recruitment and Retention Activities

OCFS recognizes that the lack of certified Native American foster homes can hinder compliance with the Federal Indian Child Welfare Act. After the development of a DVD highlighting successful models of recruitment in 2010, the DVD was sent to the Tribal Nations in 2011.

OCFS will continue to support recruitment efforts with Tribal Stakeholders. In 2012 one of the quarterly meetings was dedicated to the topic of Recruitment and Retention of Native American Foster and Adoptive Homes. As a result, several county caseworkers agreed to work with the Seneca Nation to develop cross training and certification of Native American foster homes.

In June 2012, the OCFS Native American Specialist and a representative of the Federal Region II Administration for Children met with Seneca Nation officials to discuss federal funding to support a tribal foster care recruitment program. In December 2012, OCFS

and several local district caseworkers met with Seneca Nation Child and Family Services staff to review the number of Seneca families that have been recruited and trained.

As the OCFS Native American Specialist provides Indian Child Welfare Act training to local districts and regional consortiums in 2012-13, a segment on the importance of recruitment of Native American foster and adoptive families will be incorporated. More than half of the trainings in 2012-2013, had a discussion on recruitment efforts.

OCFS Tribal Consultation

The OCFS Assistant Commissioner of Special Populations, the Native American Affairs Specialist and the respective Regional Directors participated in the Tribal Consultation Meetings with Tribal Leaders and delegates in 2012-2013. These meetings provided an opportunity for OCFS to present updates on initiatives for ICWA compliance. The meetings provided the newly appointed Assistant Commissioner of Special Populations the opportunity to meet with various Tribal representatives to discuss OCFS priorities and learn about specific needs of some Indian Nations. The May 2012 Tribal Consultation meeting was held at the OCFS Home Office to encourage participation from more OCFS officials. The agenda for this meeting focused on disparity and racial equity, a significant OCFS agency priority. Casey Family Programs also joined our consultation discussion on capturing ICWA data. As a result of this meeting, Casey has committed a portion of staff time to support New York State's attempt to improve our ICWA data collection.

The second Tribal Consultation meeting of 2012 was held at the Oneida Indian Nation on October 24. The on-site meeting allowed the Tribal Nation delegates and OCFS representatives to meet with a variety of tribal service providers from Health, Substance Abuse & Treatment Programs and Tribal Administrations. OCFS invited the NYS Office of Alcohol and Substance Abuse Services (OASAS) to join our dialogue to support access to services to at-risk families.

With the support of the Center for Development and Human Services (SUCB), Native American Services was able to conduct four meetings with the Native American Family Services Commission in April, June and August 2012, and January 2013. The Commission was expanded to include more tribal caseworkers and administrators from around the state, as well as local districts and voluntary agencies. The quarterly meetings provide an excellent forum to introduce other OCFS supported initiatives such as Court Collaboration, Protective Services for Adults, and Chaffee Independent Living Services to Tribal and agency staff who need additional resources to serve their respective Tribal and Urban Indian communities. Other guest speakers this year were representatives from Domestic Violence Unit, Erie County Sheriff's and Children's Justice Act (UTS) Advisory Board.

Throughout 2012-2013, the OCFS Native American Specialist also met with representatives from New York City's Administration for Children's Services and staff from the American Indian Community House to develop an ICWA training plan for New York City child welfare workers. In a follow up to the large training event that was held at New York Law School in November 2011, a series of trainings were presented to court personnel and ACS caseworkers.

Also, in May 2012, the OCFS Native American Specialist attended the Federal/State Tribal Courts Meeting held at Syracuse Federal Court House. This full day meeting provided an opportunity for OCFS to hear about broader legal issues impacting New York State's tribal communities.

Further, to support the development of tribal programs and staff development, NAS distributed 915 training opportunities and 122 funding announcements to the Tribal Nations in 2012.

Plans for 2013– 2014:

- OCFS will continue to promote interaction with directors of services from social services districts to reiterate and strengthen awareness regarding the need to identify Native American children and to make the appropriate notifications with assistance from the NAS staff.
- OCFS' Native American Services Unit will continue to participate in quarterly meetings with Tribal and local district representatives in both urban and reservation settings to improve ICWA services to this population.
- OCFS will be available to support efforts of Tribes interested in establishing or expanding services under a State/Tribal Agreement.
- New York State will continue to utilize existing structures to promote that appropriate federal Indian Child Welfare Act (ICWA) continued goals can be identified in consultation with the Tribal Leadership. There continues to be a need to reinforce social services district requirements to inform Tribes of involvement with Native American children and families.
- OCFS will continue to support regional and statewide training to social services districts, other public and private agencies, tribal staff and community members to develop strategies to keep Native families intact and to identify resources to support at- risk families.
- OCFS will continue efforts to improve child welfare services in Native American families, regional training events are being planned to address cultural competency and ICWA issues.

Child Abuse Prevention and Treatment Act (CAPTA) Overview**New York State CAPTA Coordinator:**

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CAPTA Initiatives and Accomplishments

The federal Child Abuse Prevention and Treatment Act (CAPTA) (42 USC 5101, et seq.) supports a number of activities designed to develop and strengthen child abuse and neglect prevention programs in New York State. CAPTA funds continue to support the federal Children's Justice Act programs, and management of the Healthy Families New York (HFNY) Program, the William B. Hoyt Memorial Children and Family Trust Fund and the federal Community-Based Child Abuse Prevention program. In addition, funds support a statewide twenty-four hour Prevention and Parent Helpline for parents, professional development activities and distribution of printed child abuse and neglect prevention materials.

Through CAPTA project coordination, OCFS verifies that the state's utilization of CAPTA funds is in compliance with federal requirements and guidelines and that CAPTA projects meet stated objectives. The CAPTA Coordinator assumes the role of State Liaison Officer and works with OCFS' policy, legal and regional office staff to fulfill that responsibility. The CAPTA Coordinator oversees the Children and Family Trust Fund, TANF Prevention program, and the Community-Based Child Abuse Prevention Grant, as well as coordinates activities under the Basic State Grant, Children's Justice and Assistance Grant, and the HFNY Program as needed. In this capacity, the CAPTA Coordinator is able to facilitate collaboration and integration with other child welfare and other services for children and families, respond to individual requests for information on programs available in New York State, and respond to complaints from individuals that are brought to the attention of the Department of Health and Human Services, Administration for Children and Families (ACF). Additionally, as previously indicated OCFS is the state agency responsible for the administration for both the Title IV-B and the CAPTA Grant funds, allowing for improved coordination and collaboration.

Accomplishments in 2012-2013:

OCFS continued a variety of strategies and initiatives to prevent and treat child abuse and maltreatment.

The Prevention & Parent Helpline is Prevent Child Abuse New York's (PCANY), an umbrella program for helping people throughout New York State understand how to prevent child abuse and maltreatment and to support strong, safe, nurturing families. The agency addresses individual, community, and societal responsibility through four inter-related strategies: the Parent Helpline, the NYS Parenting Education Partnership (NYSPEP), prevention education, and an annual professional training conference. The Helpline provides direct assistance, in the form of information and referrals, to parents, family members, service providers and other community members.

During 2012, 2,368 New York families and professionals were directly assisted through the Helpline. 81 Percent of the calls were from or about at-risk families, and 54 Percent were from parents themselves. Of the parents in at risk families who called, 50 Percent were involved with child welfare and/or court, 15 Percent were overwhelmed and 15 Percent have a mental or physical health issue. Other callers were friends/relatives, youth or service providers. About 71 Percent of people who use the Helpline are known to be from the five boroughs of New York City and 17 Percent of the callers are known to be from upstate counties. The most frequent requests received in 2012 included:

- Parenting education and support;
- Preventive services including supervised visitation, respite care, substance abuse services and mental health evaluation family counseling;
- Court/legal services
- Emergency goods/services
- Victim services (other than Child Protective Services).

An analysis of calls during 2012 identified an area for some potential efforts in the future. A small number of the calls included caller concerns about ACS/CPS. Issues identified by the caller included questions about the protocols and decisions of ACS/CPS, communication issues, and concerns about foster care placement. Although these calls were a small proportion (24 out of 2,368), it points to an area where efforts with New York's differential response could have an effect. Public education efforts include a variety of outreach strategies, including literature development and distribution, presentations and exhibits, media activities, and a parenting education and services database and website. More than 45,550 people received prevention information through these avenues this past year and 70,704 prevention literature materials were distributed. Prevention information went to 27,972 web site users, 8007 blog users, 4469 e-newsletter subscribers, 1787 Facebook fans, and 68 Twitter followers. A total of 32 e-newsletters were sent. As of December 2012, the resource and referral database contained 2,788 records of programs.

The annual New York State Child Abuse Prevention Conference, co-sponsored with OCFS/Children and Family Trust Fund, built the knowledge and skills of professionals, advocates, community leaders, and parents who are concerned about preventing child abuse and assuring healthy growth and development for children. A total of 99.2 Percent of returned evaluations agreed or strongly agreed the participant gained new knowledge,

skills and tools to take back to the community. All participants agreed or strongly agreed that the conference was relevant and useful for their work.

Plans for 2013-2014:

During the coming year, PCANY will establish the Enough Abuse Campaign (EAC) to address the epidemic of child sexual abuse. Based on the campaign initiated in Massachusetts, EAC will be launched in three communities in New York in 2013. The communities selected are Broome, Suffolk and Tompkins counties. Strategies include mobilizing communities to establish infrastructure to implement prevention/response programs, and educate professionals and members of the public about prevention strategies and responses to disclosures of sexual abuse.

In addition, PCANY will continue with follow-up efforts identify outcomes for Helpline callers and systemic gaps in services needed, increase the knowledge and skills of those attending the annual training conference, and educate the public to take action to prevent child abuse and strengthen families.

Federal Family Violence

Federal Family Violence funding continues to provide financial support to residential and non-residential programs experiencing low occupancy or needing health and safety enhancements to their residential program.

Children's Justice Act

The federal Children's Justice Act (CJA) Program Grant continues to enhance OCFS' ability to develop, establish, and operate programs designed to improve (1) the handling of child abuse and maltreatment cases, particularly cases of child sexual abuse and exploitation, in a manner which limits additional trauma to the child victim; (2) the handling of cases of suspected child abuse and maltreatment related fatalities; (3) the investigation and prosecution of cases of child abuse and maltreatment, particularly child sexual abuse and exploitation; and (4) the handling of cases involving children with disabilities or serious health-related problems who are victims of abuse or neglect.

Children's Justice Act program funds are primarily used to promote start-up and/or improved functioning of local community coordination of the investigation, prosecution and treatment of child abuse and neglect cases. Through the implementation of local multidisciplinary investigation teams (MDTs), child advocacy centers (CACs) and child fatality review teams (CFRTs), child protective services, law enforcement, prosecution, medical, mental health, and advocacy agencies are better able to coordinate, collaborate and communicate on cases. The goals of all funded programs are to reduce additional trauma to child victims after their disclosure, improve the handling of cases for all agencies involved, and improve the skills and knowledge of all professionals involved.

The federal Children's Justice Act Program has allowed OCFS to expand its efforts to develop and maintain MDTs, CACs and CFRTs across the State. The NYS Child Advocacy Resource and Consultation Center (CARCC) provides services that include specialized and/or interdisciplinary training, team functioning analysis, technical assistance, resource development, and coordination of a statewide coalition of CACs and MDTs wishing to develop CACs. CARCC also assists MDTs throughout the state with access to current information and research on: child sexual abuse; child fatalities; child abuse and neglect data from a multidisciplinary perspective; training resources and opportunities, including a directory of discipline specific consultants; and technical assistance material to assist in team development.

One of the primary programs funded through CJA has been the CARCC Program. During the last year, CARCC was instrumental in assisting the CJA staff with providing technical assistance for many innovative programs as well as provision of assessment and consultation services; a mentoring program; marketing and co-sponsorship; the CARCC website; the CARCC listserv; the Case Tracking Database; a toll free telephone number; the Child Abuse and Disabilities website; an enhanced website and training module development. These activities are described in more detail below.

Assessment and Consultation Services

CJA staff worked closely with CARCC staff to provide more individualized consultation services to MDTs and CACs throughout the State. At the request of CJA staff, nine on-site consultations were provided. These consultations include such activities as attending a team meeting and providing feedback and facilitation, trainings and exercises on team building and conflict resolution, and mentoring with successful teams of similar demographic composition. CARCC provides on-going consultation by phone, email, and additional site visits as necessary. Common issues and goals included:

- Development of written interagency agreements and protocols
- Implementation of case tracking methods
- Advancement of a team's organizational capacity
- Securing an appropriate facility to serve as a CAC

It should be noted that CARCC also provides information to professionals, students and concerned citizens throughout the nation, responding to over 382 technical assistance requests in the past 12 months. Technical assistance included, but was not limited to, statistics on the prevalence of child sexual abuse, the multidisciplinary approach to investigations, case tracking resources, and working with the New York State Children's Justice Task Force (CJTF) on developing Forensic Interviewing Best Practices (FIBP). CARCC's resource library has expanded and offers users a wealth of printed, audio and video materials. In addition, CARCC's website, listserv, and Resource Guides have aided in the provision of this service.

New York State Children's Justice Task Force Forensic Interviewing Best Practices

Train the Trainer

An advanced training curriculum is being developed through a contract with CARCC. Feed-back and program evaluations will be reviewed by CJTF and CJA staff.

The FIBP training has proven very successful in establishing a sound foundation for the investigation of child abuse and neglect cases. The MDT/CAC program standards provide the rationale and criteria for comprehensive forensic interviews. These specialized standards include expectations regarding the quantity and quality of skills and knowledge expected from child abuse investigative interviews. The CJTF made this recommendation to establish further model and demonstration programs to enhance the level of knowledge and skills of MDT member agencies. A program is needed in order to provide follow-up sessions on Enhancing the Interview Experiences Involving Individuals with Disabilities to participants who have completed the FIBP Interview Training.

A training curriculum has been developed that includes three distinct components to maximize usefulness. The first component is an online session; the second is an in-person one-day session; and then a follow-up (online) session later. The follow-up sessions will be made available in two parts of New York State involving 24-25 participants in each. All participants will have to complete all three segments in order to receive an Advanced Certificate of Participation in this module. This type of format provides the needed knowledge and skill building to test the trainings effectiveness.

This advanced training was offered on a limited, “pilot” basis only to those who have successfully completed FIBP training. Anyone interested in participating must participate in all training parts (I-II-III).

Part I: Disability Considerations – Participants receive an online series of short modules which introduce them to some of the issues and skills that are needed in working with children with disabilities (e.g. Topics such as “IQ level functioning...what does it mean?”; “Communication pathways that have worked”; “JARGON clarification across disabilities”; “Interview set-ups: Pros-Cons”; “Sign Language Basics”; “Tips on asking better questions, before-during-after”... are just a few areas.) Trainees must have access to a computer and internet which will allow for video viewing. Modules can be viewed at any time 24/7. Modules are opened, reviewed and completed before attending Part II training.

Part II: Disability Considerations – The CJTF believes that it is impossible to just “talk” about individuals with disabilities to really understand the issues. You must continue to spend more time with them, in their more “natural” (i.e. school, home) environments to learn more about functioning and strategies that can be useful. Therefore, Part II of this training takes place in a school program where trainees will have the opportunity to interact, consider and discuss strategies and challenges that are “real” when interacting with individuals with disabilities with professionals whose work involves these individuals. They work with children who provide challenges in terms of communication and behavior and the intent is to learn how to more effectively intervene, if possible on their behalf.

Part III: Disability Considerations – Focuses on what happens when trainees return back to their offices/jobs and how they can continue to stay in touch with the issues and concerns or questions that were raised. Sometimes the real learning occurs after the “onsite” training and therefore, it is important to share those questions/concerns. Therefore, trainees must have access to a computer and internet which will allow for blogging. There is a blogging website for use by trainees ONLY. Participants are requested to “check in” throughout the following two months to participate in some ongoing “how are you doing” types of conversations.

Child Abuse Prevention Evaluation and Treatment: The CHAMP Program

The Child Abuse Medical Provider (CHAMP) Program consists of a group of physicians, nurses and nurse practitioners with comprehensive skills and knowledge standards that exceed any other medical expectations or requirements in the State. CARCC is instrumental in providing linkages from CHAMP to MDT and CAC programs across the State. Regularly scheduled webinars are made available to medical professionals working with abused and neglected children. Social workers and other non-medical professionals in the child abuse field from across New York State may also access this specialized training, as necessary. The webinars provide guidance on prevention methods, recognition, reporting methods, management and referral needs for the abused child. The website www.champprogram.com or www.ChildAbuseMD.com may be accessed for more details.

Child Abuse and Disabilities Training Project

CJA staff continues to work with CARCC and Columbia University on expanding the Child Abuse and Disabilities website (<http://online.tc.columbia.edu>). Since the site was launched in 2007, there have been over 21,000 hits to the site and visitors from over 140 countries. Over 650 individuals have fully registered on the site, receiving full access to the articles, video clips and other resources that are available. During 2012, the program has continued to add more state contacts on disabilities. Our goal is to reach all 50 States from the 42 already targeted. We are working on developing an on-line training module incorporating the “pilot” recommendations received from the “Advanced Disability” Training held this year. There are also a number of other activities being developed to enhance intervention outcomes for children with disabilities.

Mentoring Program

Of the several approaches used by CJA staff to improve team building, one is team-to-team mentoring. There are several mutual benefits of mentoring sessions between counties. These relationships are vital to the multidisciplinary team process as teams learn from each other and work through practical solutions to common problems. This collaborative effort also promotes ongoing relationships between counties. In the past 12 months, CJA staff requested two mentoring sessions to be facilitated by CARCC. Some key topics that have been addressed through the mentoring program include team start-up, board development, co-location, protocol development, case review, community

outreach, and CAC site selection and renovation. CARRC staff also met with representatives from Norway and Cameroon to share information on MDT/CAC Programs in New York State.

Marketing and Co-Sponsorship Program

CJA staff use CARCC's marketing and co-sponsorship program to assist MDTs and CACs with initiatives to support training, awareness events, and team-related needs. This service is only provided when CJA staff are unable to provide direct support. The co-sponsorship program includes initiatives designed for an audience of multiple counties. Both programs serve as an added benefit to the MDTs and CACs of New York State by providing for collaborative events where expertise is openly shared. Assistance is made available in the form of financial reimbursement for event-related costs, such as but not limited to meeting rooms, promotional materials, and honorarium fees. The marketing program also provides support to MDTs and CACs through the CARCC website and listserv, which provides the equivalent of free advertisement of events and employment posting services. In the past 12 months, CARCC has supported a total of five trainings and events in counties throughout the State, with one of those trainings being a multi-county co-sponsorship with over 250 people in attendance. Typical events covered topics such as medical examination guidelines, multidisciplinary team building, and open house outreach promotions. This is in addition to the numerous website and listserv postings on behalf of MDTs and CACs.

CARCC Website

A valuable tool for sharing and collecting information is through CARCC's website (www.nyscarcc.org), New York State's child abuse response efforts receive a worldwide audience and can offer resources and information to virtually anyone with access to the Internet. Professionals from academic institutions and nonprofits as well as concerned citizens worldwide often learn of CARCC via the website, which includes technical assistance materials, up-to-date training opportunities from across the country and program outcome data on CACs. The site is linked to numerous government, private and public websites addressing a wide range of topics of interest to child abuse professionals.

Not only are CJA staff able reach a wider audience through this website, but this technology also provides for a means of dissemination and information sharing for teams themselves. The directory of MDTs and CACs provides a detailed profile report of all the teams in New York State, highlighting demographic information, case criteria, funding sources, and interagency partners. A Photographic Virtual Tour of CACs highlights the various designs that support a child-friendly setting and offers a perfect opportunity for those CACs to showcase their dedicated efforts. Teams also utilize the website to post job announcements and training opportunities.

The website was updated again in 2012, to make it a more user-friendly site, with easy navigation and information that is most often requested.

CARCC Listserv

CFSU staff often use the CARCC listserv to reach out to professionals in the field. By inviting professionals to join crucial discussions concerning issues such as investigation, prosecution, medical and mental health treatment we have extended our ability to provide considerable information and knowledge on a larger level. There are over 186 members currently on the listserv. The members participate in a forum for exchange of information and ideas. The listserv is designed to provide an opportunity for electronic dialogue and facilitate information sharing. Members have the ability to pose questions, request feedback or join a discussion regarding funding or other pertinent discourse. Information continues to be exchanged at an active rate on the listserv, with over 126 messages posted in the past year.

New York State Case Tracking Database for Child Advocacy Programs

In order to meet the growing need for sound data collection methods, CJA staff continue to use CARCC to assemble MDT/CAC data through the Case Tracking Database (CTDB). This system can be used by all MDTs/CACs throughout the State. With the database, a MDT or CAC can track some of the most common demographical information of children seen and services provided, as well as generate common reports, such as NCA statistics and Crime Victims Board services. There is also a feature that allows a MDT or CAC to produce a specialized report tailored to their individual queried needs. Because the database is provided free of charge, there has been a welcomed response and now all CAC programs counties use this format or the NCATrak data collection instrument. Technical assistance is always provided either by CJA staff, CARCC staff or a technical consultant, and this past year over 382 requests for assistance were answered by CARCC staff alone.

Toll Free Telephone

Programs are encouraged to use CARCC services when CJA staff are not available. To facilitate this option a toll free telephone number has been established in order to accommodate those teams who have limited or no long distance access. In 2012, CARCC received 154 calls on the toll free number from 39 different counties in New York State, in addition to five international calls and calls from 14 other states. This has helped facilitate program access to more professionals in the field. The toll free number is 866-313-3013.

Child Advocacy Center /Multidisciplinary Team Program Standards

During 2012 there were five Tier II CAC programs elevated to Tier I OCFS approved programs. There are now 40 OCFS approved programs serving 43 counties, including over 15,000 physically and sexually abused child victims. There are a growing number of MDT/CAC programs exploring the feasibility of expanding services into surrounding counties. The National Children's Alliance (NCA) has accredited 32 of the programs through their national standards. CJA staff continues to provide technical assistance to the remaining eight programs in their application for NCA accreditation.

All MDT/CAC Programs are required to submit annual Program Standard Evaluation Instruments. The instrument is a key tool in the annual evaluation and assessment process conducted by CFSU staff. All programs receive a comprehensive review that includes attendance at an MDT case review meeting, individual interviews with key MDT members and a follow up site review letter that identifies the strengths and weaknesses of the program. This letter is then used as a foundation for performance targets and/or corrective actions.

The following are the required standards or components of a fully functioning CAC:

- A Child Appropriate/Child Friendly Facility: A comfortable, private, child friendly setting that is both physically and psychologically safe for clients. It is preferable that this site be in a location separate from other service providers. However, it may be a special family/victim-oriented sub-facility within a larger agency.
- Established Multidisciplinary Team: There must be a well-functioning multidisciplinary child abuse investigation team in place with a protocol for the investigation and interviewing of child victims. The team must consist of representation from Child Protective Services, the District Attorney's office, law enforcement agencies and medical providers. The team should also include mental health, victim advocacy, and other agencies involved with targeted cases.
- Organizational Capacity: A legal entity responsible for program and fiscal operations that implements sound administrative practices.
- Cultural Competency and Diversity: Promotes policies, practices and procedures that are culturally competent.
- Forensic/Investigative Interviews: Interviews are conducted in a manner that is of a neutral, fact finding nature, and coordinated to avoid duplicative interviewing.
- Medical Evaluation: Specialized medical evaluation and treatment are made available to child victims as part of the MDT response, either at the CAC or through coordination and referral with other specialized medical providers.
- Therapeutic Intervention: Specialized mental health services are made available as part of the team response, either at the CAC or through coordination and referral with other providers, throughout the investigation and subsequent legal proceedings.
- Victim Support/Advocacy: Victim support and advocacy are available, throughout the investigation and prosecution.
- Case Review: Team meetings and information sharing regarding the investigation, case status and services needed by the child and family occur on a routine basis.
- Case Tracking: CACs must agree to collaborate to develop and implement a system for monitoring case progress and tracking case outcomes for team components.

It is important to note that in Chapter 494 of the Laws of 2006, Chapter 517 of the Laws of 2006 and Chapter 485 of the Laws of 2006 were enacted to further support the mission

of these programs. Chapter 494 requires all counties to use a MDT approach or a joint response to cases of child physical abuse, sexual abuse, child deaths and cases where a child has been physically harmed after two prior reports by mandated reporters within the previous six months. Chapter 517 codifies the parameters of CACs to further support the initiatives of our Office.

Child Fatality Review Teams

In 2010, the New York State established the “Keeping New York Kids Alive” program and awarded a contract to Stony Brook University, New York State Center for Sudden Infant Death. The program has changed their name to more accurately reflect their mission. It is now the “Sudden Infant and Child Death Resource Center.” The CJA staff continues to work with this program and local CFRTs across the State.

According to NYS Department of Health and NYS Office of Children and Family Services data:

- 40 Percent of child deaths in NYS may be preventable.
- 1,000 deaths occur each year among infants under 28 days old – there is “inadequate” information on these deaths, as they considered primarily congenital, prenatal issues.
- Child fatality rates remain higher in minority communities, especially among African-Americans.
- OCFS reviewed child deaths in counties with CFRTs are over 50 Percent higher than counties without approved CFRTs.

In early 2013, a competitive RFP requested applicants from across NYS to apply for funding to support a local or regional child fatality review team. The RFP provides a total of \$829,100 for continuation and or start- up of CFRT Programs beginning on August 1, 2013. The primary purpose of the RFP is to build and strengthen agency(s) performance and community partnerships for the prevention of child fatalities through child fatality reviews.

The selected applicants will support OCFS, DOH and National Center for Child Death Review (NCCDR) in efforts to accomplish the following outcomes to expand and improve child fatality review and prevention activities.

Outcomes for child fatality reviews are to:

1. Provide accurate identification and uniform, consistent reporting of the cause and manner of deaths that are reviewed.
2. Improve communication and linkages among local and state agencies and enhance coordination of efforts.

3. Improve agency responses in the investigation of child deaths.
4. Improve agency responses to protect siblings and other children in the homes of deceased children.
5. Improve criminal investigations and prosecution of child homicides.
6. Improve delivery of services to children, families, providers and community members.
7. Identify specific barriers and system issues involved in the deaths of children.
8. Identify significant risk factors and trends in child deaths.
9. Promote policies and practices and expanded efforts in child health and safety to prevent child deaths.
10. Increase public awareness and advocacy for the issues that affect the health and safety of children.

Selected applicants will be required to:

1. Develop a mission statement and goals.
2. Develop interagency protocols and confidentiality procedures within the parameters of the OCFS CFRT Guidelines and Protocol Template.
3. Become an approved OCFS CFRT within three months of contract approval.
4. Implement the case review process and collect data through the NCCDR Case Reporting System.
5. Collaborate and support efforts of the NYS DOH's "Prevention of Child Morbidity and Mortality in New York State: Keeping New York Kids Alive" Initiative. The RFA for this Initiative is posted at <http://nyhealth.gov/funding/>. Additional questions or concerns may be directed to the DOH, Division of Family Health's Child Morbidity and Mortality Prevention Program. Phone: (518) 473-3511.
6. Attend an OCFS-sponsored event for the purposes of training and networking.

New York State Police:

Children's Justice Act funds are also used to support the annual New York State Police Sex Offense Seminar, which is a five-day comprehensive training program for state and local police officers. CPS workers and other team members who work with police as an investigative team are also invited. The program reaches about 200 professionals a year. Started in November 2006, this seminar was expanded to include child physical abuse training and will be presented as a two part training. The training is known as the "Crimes Against Children Training Seminars".

Citizen Review Panels

Chapter 136 of the Laws of 1999, commonly referred to as New York's CAPTA (Child Abuse Prevention and Treatment Act), details the state's compliance with the federal Child Abuse Prevention and Treatment Act Amendments of 1996. Subsequently, New York State established three Citizen Review Panels (CRP) required by the CAPTA Amendments of 1996. One Panel was established specifically for New York City to address the issues particular to the City. The New York City panel also established one subcommittee for each borough. The other two panels meet in Buffalo and Albany with jurisdictions representing the rest of the State. Panels are required to examine the practices (in addition to policies and procedures) of State and local agencies to evaluate the extent to which the agencies are effectively discharging their child protective responsibilities. The Panels provide for public outreach and comment in order to assess the impact of current procedures and practices upon children and families in the community. The Panels also submitted their 2012 recommendations on ways to possibly improve the child protective services system at the State and local levels prior to the required February 1, 2013 due date. The response from OCFS will include a description of whether or how the State will incorporate the recommendations of the panel (where appropriate) to make measurable progress in improving the State and local CPS systems. The Panels are authorized to:

- Review the procedures, policies and practices of the State and local agencies relating to child protective services.
- Examine specific cases to evaluate the effectiveness of the agency's discharge of its duties and responsibilities.
- Have access to pending and indicated cases reported to the SCR.
- Have reasonable access to public and private facilities providing child welfare services within their respective jurisdictions. OCFS is required to assist the panels to have reasonable access to public facilities that receive public funds and are providing child welfare services.
- Provide for public outreach and/or call public hearings on issues within their jurisdiction.
- Review and evaluate any criteria that the panel considers important to provide for the protection of children.
- Issue an annual report, setting forth a summary of the panel activities and the findings and recommendations of the panels.

Accomplishments for 2012-2013

During the year 2012, CJA Program staff provided ongoing technical assistance, monitoring and support to programs across the State. Activities included, but were not limited to; technical assistance to ensure compliance with State policies and statutes, site development, identifying training resources and referrals, contract development, state reporting requirements, navigating the Contract Management System, team conflict resolution, board development, CAC staff support, assistance with appropriate LCM/ADM and other external or internal correspondences regarding program parameters, interpreting such policy and program standards.

During FFY 2012 there were five Tier II CAC programs elevated to Tier I OCFS approved programs. There are now 40 OCFS approved programs serving 43 counties, including over 15,000 physically and sexually abused child victims. There a growing number of MDT/CAC programs exploring the feasibility of expanding services into surrounding counties. The National Children's Alliance (NCA) has accredited 32 of the programs through their national standards. CJA staff continues to provide technical assistance to the remaining eight programs in their application for NCA accreditation.

CJA staff conducted 58 on-site technical assistance and/or monitoring reviews during 2012. Some programs required as many as three or four visits to provide the necessary program development services. Staff also provided an average of three technical assistance phone consultations a day to programs. Many consultations can be very lengthy and/or require considerable follow up.

CJA staff worked to develop of 43 contracts during the year. This includes:

- 40 county or regional specific work plans, performance targets and budgets;
- Three statewide initiatives through the Children's Justice Act Program
- Assisting contractors in contract development;
- Assisting contractors in budget modifications and/or amendments;

Of the 43 contracts requiring new agreements CJA staff developed single source justification for 25 programs. Single source justification allows programs to continue to be funded without issuance of a new Request for Proposals. Single source contracts are developed in accordance with the requirements of a "new" contracts rather than renewals. This is a somewhat more comprehensive application package.

The CJA staff continued to collaborate on intra-agency initiatives with the Bureau of Training, Continuous Quality Improvement; Strategic Planning and Policy Development, Program and Community Development. Activities included participation on curriculum design for Forensic Interviewing Best Practices, Child Fatality Review Team Programs, Sex Trafficking, Child Sexual Abuse Prevention Initiatives, LCMs and/or ADMs related

to investigation, treatment or management of child abuse cases, and provide technical assistance and consultation to regional offices.

The CJA staff assisted in development of numerous specialized training initiatives for MDT/CAC investigations, treatment, management and prosecution of child abuse cases, particularly sexual abuse and exploitation. Trainings included

- Annual Special Education Conference on Children with Disabilities - Columbia University Teachers College on March 23, 2012
- 4th Annual Bivona Summit on Child Abuse – Bivona Child Advocacy Center on April 25-26, 2012
- Team Up to Prevent Child Abuse: Third annual MDT Conference – Child Advocacy Center of Columbia and Greene, Schenectady, Otsego and Schoharie Counties on May 21-25, 2012
- What Sex Offenders Can Teach Us About Protecting Children – New York State Children’s Alliance on September 25, 2012
- Safe at Home: Seeking Solutions for Adult and Child Victims of Family Violence on October 2, 2012
- Evidence Based and Best Practice Treatment Interventions for Victims of Child Abuse in a Variety of Community Settings- New York State Professional Society Against the Abuse of Children on October 19, 2012
- 4th Annual Multidisciplinary Team Training – Lee Gross Anthonie Child Advocacy Center on October 26, 2012
- 26th Annual Conference: Working and Living with Children Who Have Experienced Trauma on October 26, 2012
- Child Abuse and Children With Disabilities - Broome County Child Advocacy Center on December 6, 2012
- 5th Annual Bivona Summit on Child Abuse – Bivona Child Advocacy Center on April 22-23, 2013

The CJA staff continued to establish and maintain linkages with other state and local organizations that support inter-agency and multidisciplinary collaboration on child abuse cases, particularly child sexual abuse cases. These collaborations included attending meetings and/or teleconferences with:

- NYS Coalition Against Sexual Assault
- NYS Association for Treatment of Sexual Abusers
- NYS Alliance of Sex Offender Service Providers
- New York State Children’s Alliance
- NYS Prevent Child Abuse
- National Center for Missing and Exploited Children
- Child Abuse Medical Provider Program
- National Children’s Alliance
- American Prosecutors Research Institute/National Center for Prosecution of Child Abuse

- National Children's Justice Act Program Coordinators Grantee's meeting and webinar's
- Keeping New York Kids Alive
- NYS Sudden Infant and Child Death Resource Center
- National Center for Child Death Review

CJA staff developed draft Guidelines for Multidisciplinary Team Response for First Responders to Child Death and Near Death. The Guidelines will provide a comprehensive response to cases of death or near death. This is the first such set of guidelines in the State and expected to be released to local MDTs and Child Fatality Review Teams in 2013.

CJA staff drafted an application process for CACs to establish satellite offices. The guidelines will provide a more codified process for approval; assist local MDT members by reducing travel time; and improve access to services for child victims and their families that have been victims of abuse.

The CJA staff continued to work closely with the New York State Police Special Victims Unit to conduct a five-day comprehensive training seminar for training professionals in investigation of sex offenses. The training included a four day comprehensive training on physical abuse and serious neglect cases. The sexual offense seminar was held in May of 2012, and the physical abuse seminar was held in November. The combined seminars are referred to as the Crimes Against Children Training Seminars. These annual seminars encourage professionals to participate as members of their MDT. The seminars were attended by approximately 200 professionals from law enforcement, child protective services (CPS), probation, parole, corrections, prosecution, victim advocacy, Sexual Assault Nurse Examiner (SANE) Program, Child Abuse Medical Provider (CHAMP) Program and mental health disciplines throughout the state. The collaboration between the State Police, OCFS and the CJTF members has produced a training seminar recognized across the State as a model of excellence. Applicants often need to be put on waiting lists for the next year's training.

Plans for 2013- 2014:

1. CARCC will continue to serve as a resource for CJA staff and MDT/CAC programs across the State. Services and resources provided by CARCC are available upon request. CARCC is developing an Advanced Forensic Interviewing Best Practices Training (Advanced FIBP) curriculum to build upon the existing Forensic Interviewing Best Practices three-day training in response to the growing need for the development of advanced forensic interviewing skills in New York State. The complex task of conducting effective forensic interviews of children requires a comprehensive knowledge base and skill set. Forensic Interviewers must have flexibility in interviewing each individual child and knowing what questions will elicit what types of answers. They must utilize best practices in accordance with New York State law, and have the ability to discern external factors that affect the child and the case including developmental and cultural characteristics, trauma, support system, and circumstances of disclosure. This advanced training will be designed for experienced professionals who have already

completed the Forensic Interviewing Best Practices Training. The Advanced FIBP will address topics such as dealing with recantation, difficult cases, multiple victimization, mock trial and court, linguistics, narrative practice, children with special needs, and issues with time.

During the upcoming year, CARCC will complete the Advanced FIBP training curriculum. Work will be done to build the presentation slides and activities that will help trainers deliver the research-based teaching points to the attendees. After this is completed the national consultant, Linda Cordisco-Steele, who is collaborating with the CJTF committee, will provide a train-the-trainer session for a select group of trainers who will teach the Advanced FIBP curriculum. CARCC will also sponsor a pilot training during this grant period.

2. The CJTF and CJA staff will continue to support the Child Abuse and Children with Disabilities Program through a contract with CARCC. The project will explore ways to continue to expand the knowledge base and resources available to better serve children with disabilities.

More specifically, the project goals/objectives for ongoing work on the website in 2013-2014 fall into a number of categories with the ultimate goal of establishing a well-researched/documented website in the area of disabilities that can be sustaining and fully accessible to most technology currently available (e.g. iPhones, iPads, various computer platforms and cell phones that allow for internet connections.) Therefore, the areas of work that have been targeted by are:

- Complete gathering and making available the information on disabilities for all 50 states, including a final review of the current ones to be sure they are currently updated regarding disability information;
- Identify five or six users of the website and professionals in the field working with child abuse and disabilities to complete a targeted online survey that asks them to review various aspects of the website (e.g. current articles, strategies, etc.) to determine if there is any other area that we should research and include that would be useful to them in their work. There is a wealth of information on the site and before the site moves into “other” formats, users will need to provide some feedback to developers.
- Finish the development of an “online” component for the website that would allow for a short “quiz” on basic information, or “blog” feature that would provide opportunities for Q&A from users on specific topics.

Major development for the website is planned in 2013-2014, once the above is completed there will be movement to a more fully accessible website which will allow users access with multiple forms of technology (i.e. responsive design for the entire website). In addition, based on the “piloting” in 2012-2013, of an “APP” containing the critical

information on disabilities that could be quickly available , reviewing and expanding this aspect of the website so that MORE users can have this available when needed. This APP will work as a companion to the more comprehensive information offered on the website. Reference information will be highly-optimized. In just a few clicks, the end user will have a condensed version of the information they need. The information will also be self-contained in the APP. (i.e. If the end user does not have an Internet connection (cell service, WiFi), they will still have access to the reference.) This could be important in crisis situations to get some quick reference information on disabilities and WHERE to start.

3. The New York State Police will continue to hold their current comprehensive Crimes Against Children Training Seminar. This two-part initiative includes a four-day seminar on child physical abuse and maltreatment related topics and a five-day sex abuse seminar. The physical abuse and neglect seminar will be held in November 2013, and the sex abuse seminar will be held in May 2014. The sex abuse seminar will add a component on child sex trafficking this year. Most attendees participate in this training as a team. The training accommodates about two hundred child abuse investigators. The CJTF has decided to continue funding of this program in support of a number of areas around intra-agency collaboration and the enhancement of MDT/CAC's.

4. CJA staff will continue to expand the scope and functions of CFRTs while monitoring and reviewing CFRT Guidelines and Protocols for CFRTs as per Task Force recommendations. For example, the Development and implementation of new CFRT programs through the use of new OCFS Child Fatality Review Team Request for Proposals (RFP). The new CFRT programs selected through the RFP will begin operation in August 2013, and will facilitate more standardized practice among CFRTs across New York State.

5. OCFS and DOH will continue to meet to collaborate on how to prevent child deaths. The ongoing expansion of the State's standardized child fatality review database and fatality report will be used by local review teams and OCFS Regional Offices. When data from case reviews are analyzed over time, significant risk factors or patterns in child injury may be identified. This data will help with local prevention initiatives and provide a basis for state-level prevention initiatives.

6. The New York State Citizen Review Panels will continue to be supported through CJA. The Panels will continue to comply with all CAPTA requirements and work in collaboration with the Children's Justice Task Force to avoid duplication of efforts and support initiative(s), when appropriate. This activity is in response to a prior CJTF recommendation.

7. CJA staff will continue to provide technical assistance, training and, monitoring to all MDT/CAC/CFRT programs in order to improve the handling of child abuse and neglect cases per the recommendation of the task force and the federal CJA requirement.

CJA staff will continue to provide technical assistance, training and, monitoring to all MDT/CAC programs in order to improve the handling of child abuse and neglect cases per the recommendation of the task force and the federal CJA requirement.

William B. Hoyt Memorial Children and Family Trust Fund and Community-Based Child Abuse Prevention Program

Accomplishments in 2012-2013:

In December 2012, OCFS released the Children and Family Trust Fund Request for Proposals (RFP), combining state allocated funds to the Trust Fund and federal Community-Based Child Abuse Prevention (CBCAP) grant funds aimed at improving the safety and wellbeing of children and families who may be at risk of and/or experienced some form of family violence.

Due to the complex issues facing families, better aligning public and private resources to support effective neighborhood-based interventions can create a continuum of care to improve outcomes for all community residents. OCFS relies on both community-based services and the local departments of social services (LDSS) to help strengthen and support families. This partnership is critical to improving the safety and well-being for children, adults and families in New York's highest need communities.

These funds were targeted to certain high risk communities, including specific cities in New York State that are based on rates of child abuse, foster care and detention admissions. Applicants were strongly encouraged to consider the following key concepts:

- Emphasis on early intervention opportunities to improve the lives of children, adults and families;
- Consider community context to match program strategies to evidence-informed and evidence-based practices;
- Collaborate with community cross-sector services to support common goals; and
- Use and share data for planning and evaluation purposes, and identify trends and outcomes

In keeping with the mission of the Trust Fund to engage families before the system intervenes, proposals needed to address the following outcomes:

- To strengthen families by building protective factors to reduce the risks of child abuse and maltreatment;
- To improve safety and well-being of children and families affected by domestic violence;
- To improve the safety and well-being of the elderly at risk of abuse by family members.

Applicants were required to demonstrate that their proposed strategy supported applicable local social service district strategies/priorities, reflected cross-sector community planning to address specific needs, demonstrate community input, including parents/caregivers, provide local resources, and target services in certain high need communities and/or certain high risk populations through evidence-based and evidence-informed programs and practices.

Applicants proposing to provide child abuse prevention services were required to incorporate evidence-based/evidence-informed parenting education and support services in a community-based location and delivered off-site in settings such as local departments of social service, substance abuse programs, day care centers, mental health programs, and/or in the home. Programs needed to reflect best practices related to the strengths, culture and needs of families, participant engagement, and connections to other needed resources. In addition, programs needed to support integration of services for families in the community. Possible evidence-based and evidence-informed programs to be considered included Family Resource Centers, HFNY home visiting programs, Parents as Teachers, Parent/Child Home Program, Triple P, Incredible Years, Nurturing Parenting Program, among others.

Funding priorities to support families affected by domestic violence and elder abuse included CPS/DV Collaborations, Supervised Visitation for Families affected by Domestic Violence, Elder Abuse Services, Collaboration of Agencies serving the Elderly; and 2010 Elder Abuse Summit Recommendations. Awards are expected to be released in April 2013 with implementation tentatively planned for August 1, 2013.

The Trust Fund continues to collaborate with Healthy Families New York, Kinship, TANF Prevention and Post Adoption Programs, and various state partners through initiatives such as NY Loves Safe Babies, and the NYS Parenting Education Partnership (NYSPEP).

The Trust Fund continues its support of the NYS Shaken Baby Prevention hospital-based education program with targeted outreach to all maternity and birthing hospitals in the state. The purpose is to educate all parents of newborns to the dangers of shaking and reduce the incidence of Shaken Baby Syndrome (SBS). Continued tracking of the incidence of SBS in the Western New York, Finger Lakes and Hudson Valley regions documents a sustained 50 Percent reduction in the incidence of SBS in the Western NY Region, a 54 Percent reduction in the Finger Lakes Region, and a 75 Percent reduction in the Hudson Valley Region of the state.

In 2012, over 137,000 parents of newborns received information through the project, close to 87 Percent of live births in the service areas. Collaboration with the DOH continues in an effort to promote child safety and the prevention of SBS. The new shaken baby prevention video which will replace "Portrait of Promise" is not yet approved for release. This video meets the requirements of Chapter 219 of the Laws of 2004 signed in July of 2004 which requires every birthing and maternity hospital to show the video to all parents prior to discharge and ask them to sign a consent form that they viewed the video or declined to participate in the educational programs.

Kaleida Health/Woman and Children's Hospital of Buffalo, which oversees the program in Western NY, Finger Lakes and Capital regions, and WMC-NY (Westchester Medical Center) which educates all maternity nurses in the Hudson Valley Region, NYC and Long Island, remain committed to sustaining this educational program. Under consideration is implementing a similar approach to educating parents about safe sleeping practices, which can serve to strengthen OCFS and DOH efforts to reduce child fatalities where unsafe sleeping environments are a factor. Preliminary data indicates that of those child death notifications reported to OCFS in 2010-11, 57 Percent cited unsafe sleep conditions. (Source: OCFS reviewed fatalities). This change to the scope of services will be implemented in June 2013.

The publication from the U.S. Department of Health and Human Services called "*What does a safe sleep environment look like?*" and Safe to Sleep magnets are now available to local social service districts and community based programs to support local safe sleep initiatives. On January 16, 2013, OCFS issued 13-OCFS-LCM-01 – Investigation and determination of Sleep-Related Fatality and Injury CPS Reports, to provide policy guidance to child protective services staff of social services districts regarding the investigation and determination of Child Protective Services (CPS) reports involving sleep-related fatalities or injuries. Also, on February 11, 2013, OCFS issued 13-OCFS-ADM-02 – Safe Sleeping of Children in Child Welfare Cases, to describe the steps child welfare staff must take regarding the issue of safe sleep conditions in households they serve. OCFS also joined in a press conference to support Albany County's *Safe to Sleep* campaign which kicked off in March 2013. Additionally, over 1600 safety approved cribs were distributed to local departments of social services, child care centers, DJJOY facilities, and community-based organizations.

Once again the availability of a series of safety tips entitled Helpful Tips to Keep Your Baby Safe are posted on the OCFS website and available in six languages. Other materials developed as part of the campaign include Personalized Safety Tips and Emergency Contact Sheet for Baby Sitters, also now available in other languages, a Helpful Strategies for Keeping Infants and Young Children Safe DVD, and a Keeping Sleeping Babies Safer brochure. These are both available in English and Spanish. Requests for materials remain robust. Efforts to identify and promote child safety issues will continue as resources allow.

The Trust Fund recognizes the multi-generational nature of family violence and emphasizes primary prevention by supporting domestic violence and elder abuse prevention and intervention programs. Domestic violence prevention programs focus on education of students K-12, trauma counseling and support services for children, and supervised visitation services for families affected by domestic violence. Elder abuse prevention programs focus on educating both seniors and communities regarding the problem/risks of elder abuse, outreach and services to reduce these risks, providing coordination, counseling, and advocacy services to victims of elder abuse. Programs funded in 2012-13 included: (1) Cattaraugus Community Action, Salamanca, NY (2) Oswego County Opportunities, Inc., Oswego, NY (3) Putnam Northern Westchester

Women's Resource Center, Mahopac, NY (4) The Salvation Army, Jamestown, NY, and (5) Equinox, Inc., Albany, NY.

OCFS/Trust Fund will continue its role as convener and member of the Executive and Steering Committees for the New York State Parenting Education Partnership (NYSPEP) along with the NYS Council on Children and Families, Prevent Child Abuse New York, and the NYS Office of Mental Health. NYSPEP includes direct service providers from communities across the state, other state agency staff and other organizations that serve families and children.

During this reporting period, NYSPEP launched the Tier III, Senior Parenting Educator level. To date, fifty individuals received a Tier II Credentialed Parenting Educator, and 5 received a Tier I Credentialed Resource Associate. Successful applicants must demonstrate their skill, knowledge and experience in a variety of areas. Tier IV Master Parenting Educator is expected to be launched later this year. More information on NYEPEP is available at <http://www.parentingeducationpartnership.org/> including a list of credentialed educators.

The federal 2012 Community-Based Child Abuse Prevention funding is in keeping with the mission of the Trust Fund, which administers the federal program to support child abuse prevention and certain domestic violence services. Trust Fund initiatives also support some of the strategies of the OCFS Child and Family Services Review (CFSR) Program Improvement Plan such as increased efforts to support strength-based and family centered practices that engage parents, evidence-based and evidence-informed programs and practices, and efforts to promote safety, permanency and child wellbeing through enhanced family support services. One-year funding was also allocated to partially support eight Kinship Programs serving kinship caregivers and their children. Programs deliver or link families to services that address the multiple needs of the caregivers and children including: counseling, support groups, respite, legal information, financial assistance, parenting education, advocacy, and case management. Services reached over 1000 caregivers and children. Programs include: (1) Catholic Charities of the Albany Diocese, Hudson, NY, (2) Cornell Cooperative Extension of Dutchess County, Millbrook, NY, (3) Family Service Society of Yonkers, Yonkers, NY, (4) Hispanic Counseling Center, Hempstead, NY, (5) Jewish Board of Family & Children's Services, NY, NY, (6) Lutheran Social Services of Metro, NY, and (7) The Neighborhood Center, Utica, NY.

In 2012-13, Trust Fund federal and state funded child abuse prevention and family support services included: Statewide Public Education targeting all parents of newborns - (1) Kaleida Health/Women Children's Hospital of Buffalo, Buffalo, NY, (2) WMY-NY at Westchester Medical Center, Valhalla, NY; Parenting Education and Support services targeting families at risk including young parents and fathers - (3) Gateway Longview, Buffalo, NY (4) Women's Prison Association, Brooklyn, NY (5) SCO Family of Services, Bronx, NY (6) Cornell Cooperative Extension of Tompkins County, Ithaca, NY (7) Homes for the Homeless, Bronx, NY; School-based prevention education targeting elementary students and school personnel - (8) Child Abuse Prevention Services, Long Island, NY; Family Resource Centers providing early and comprehensive support to

parents and caregivers of young children - (9) North Country Prenatal/Perinatal Council, Watertown, NY, (10) Child Care Coordinating Council of the North Country, Plattsburgh, NY, (11) Child & Family Resources, Penn Yan, NY, (12) Cornell Cooperative Extension of Cortland, Cortland, NY, (13) Catholic Charities of Fulton and Montgomery Counties, Amsterdam, NY, (14) Chinese American Planning Council, New York, NY, (15) Mothers and Babies Perinatal Network of SCNY, Binghamton, NY, (16) Pro Action of Steuben and Yates, Bath, NY, (17) Cornell Cooperative Extension of Tioga, Owego, NY, (18) Niagara Falls City School District, Niagara Falls, NY (19) Family Resource Centers of Crestwood Children's Center, Rochester, NY, (20) Phipps Community Development Corporation, Bronx, New York, (21) Association to Benefit Children, East Harlem, NY.

During 2012, state and federally funded programs administered under the Trust Fund served approximately 162,242 children, parents, caregivers and professionals through direct services, training and educational opportunities. OCFS applied for and received federal CBCAP grant funds to complement Trust Fund child abuse prevention efforts in 2012.

A grant award of \$1,490,210 will allow OCFS to support programs awarded funding under the 2012 Trust Fund RFP including the Family Resource Center Network, which is engaged in efforts to recruit and retain high risk families, and work collaboratively with local departments of social services. Funds will also support the PCANY's Prevention and Parent Helpline, and New York's annual child abuse prevention conference, along with providing training and technical assistance.

The 2013 Conference, "Many Voices, One Vision" held in April, once again afforded the opportunity to showcase best practices and to recognize parent partners who demonstrate their leadership as a result of participation in local programs. Trust Fund-sponsored programs and staff are regular presenters at the conference. Funds also support networking activities, training and technical assistance that focused on trauma-informed care, family engagement, working with families affected by domestic violence, peer mentoring in the delivery of the Incredible Years, as well as FRC regional networking.

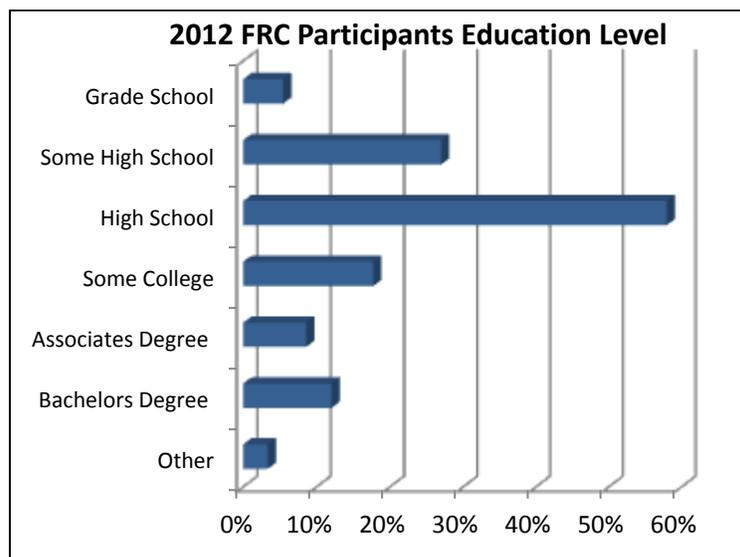
The Trust Fund-sponsored Family Resource Center (FRC) Network meets on a quarterly basis for the purpose of receiving technical assistance and training related to program development, service delivery, evaluation, and data analysis. Training and networking opportunities this past year included building on efforts over the last two years to engage and retain high risk families; strategies to deepen connections to local departments of social services, and identifying opportunities to support families in New York's alternative response to allegations of child abuse and maltreatment known as Family Assessment Response (FAR).

In addition to quarterly meetings, the Network continued to meet in regional groups. This format began in fall 2011, and FRC staff report a high degree of enthusiasm. Regional meetings allow for deeper discussions and opportunities to include local partners and department of social services staff to focus on specific issues. Additionally, more FRC staff can participate in regional meetings than statewide meetings because of reduced

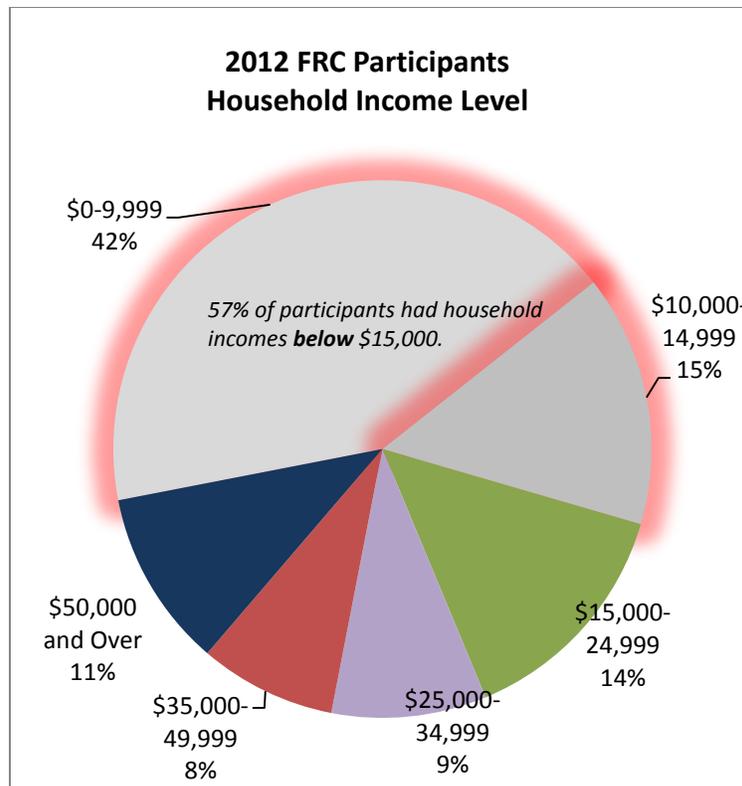
travel expenses. OCFS regional office staff and other experts in the field are included in these regional discussions.

As in 2011, Family Resource Centers received additional funds to enhance efforts to engage and retain families at increased risk during 2012. These populations were identified through discussions with local departments of social services, community partners, data analysis, and their own expertise. In 2012, 78 Percent of families served at FRCs had one or more risk factors for child abuse and neglect. More than 29 Percent had three or more risk factors.

One risk factor is low educational attainment. In 2012, 58 Percent of participants reported high school completion as their highest education level; more than one in four completed only some high school. The chart below delineates education levels of FRC participants in 2012.



Another risk factor is low-income. In 2012, over 42 percent of FRC participants had household incomes below \$10,000, regardless of family size. The proportion of participants with incomes below \$15,000 increased from 48 percent in 2011 to 57 percent in 2012. To put this in context, the federal poverty threshold for a family of two was \$15,130 in 2012.



The Family Resource Center Network continues to use the Protective Factor Survey (PFS) to assess changes for all new participants. Analysis of PFS scores showed that Family Resource Center services strengthened families. While all participants showed improvements in their scores, the results are greatest for those with low baseline scores—an indicator of high risk. Over 55 percent of families who had low scores in two or more protective factors when they began services attained higher scores in those protective factors after services. These increases point to a reduced risk of child abuse through increases in protective factors.

Programs implementing The Incredible Years trainings communicated regularly through conference calls. Meeting by phone addresses the challenges of demanding schedules, diminished travel budgets and geographic distances between programs. This group shared strategies, developed a common participant evaluation tool, and standardized their approach to service delivery issues such as make-up sessions. Building on this success, the Trust Fund supported training of 20 additional Incredible Years facilitators. As of December 2012, more than 500 caregivers were engaged in building their skills through this evidence-based program.

In 2012, the National Alliance continued its technical support to the Trust Fund to support local level engagement of families and community partners in an approach based on the World Café process, which engages parent leaders and community members in spirited conversations. Known as the *Community Café Collaborative - Parents Partnering with Communities and Organizations to Strengthen Families*, the Cafés are

planned, facilitated and monitored by trained parents and community members who can relate to the participants and build on the assets of their community or neighborhood. This technique “harvests” collective knowledge and transforms it into action. Built on the protective factors necessary for children to thrive, questions posed during the Café can spark leadership development, effective partnerships with parents, and strengthen families in the context of the cultures represented at each café. Planning partners supported Community Café Orientation training for 100 community members and parents from sixteen community organizations. The Trust Fund and the Council on Children and Families provide technical assistance and monitoring of local implementation and lessons learned. Three of the community teams are leading a workshop at the annual child abuse prevention conference in April 2013 to share their experiences and the efficacy of this approach. A Community Café Report offering a synthesis of common themes compiled from mid-term interviews with 13 of the 16 teams is available on request. For more information, go to http://www.ctfalliance.org/initiative_parents-2.htm.

Efforts to strengthen families through early care and education by engaging child care providers in preventing maltreatment continued through dialogue with ZERO to THREE (ZTT) and the state leadership team created through the Preventing Child Abuse and Neglect (PCAN) Project. The leadership team remains committed to supporting this initiative and creating opportunities for sustaining the program at state level conferences and through future training and networking opportunities for trainees. Training held in October 2012 supported participation of 40 additional professionals from across the state. The Trust Fund continues to support individual trainers in local implementation of the 20 hours of training they each committed to deliver.

Trainees provided rich feedback regarding their experience. This exceptionally knowledgeable group of trainers reported that this training was extremely effective and that the training was highly relevant to their work. Participants in the group were highly skilled trainers with extensive knowledge in the area of preventing child abuse and neglect which likely resulted in a lower knowledge gain of only 24 Percent on understanding the importance of prevention of abuse and neglect of children under 3. However, this group claimed higher knowledge gains in the area of reflection in-on-and for action (69 Percent) as more participants were less familiar with these concepts.

The evaluation collected quantitative data using a Likert-like scale of 1-5, with 1 being low and 5 being high. It also collects quantitative data using four open-ended questions.

a) Number of evaluations completed: 40

b) Overall Average Score: 4.9

c) Subsection Average Scores:

Subsection	Average Score
Learning	4.9
Instruction	5.0
Relevance to Work	4.9
Relationships that Support Learning	4.9

New York's participation in the Promoting Responsive Relationships Initiative funded by the Doris Duke Charitable Foundation was completed in 2012. The three New York teams from Wayland (Steuben County), Queens, and Lower Manhattan each established in depth coaching relationships with one child care provider and worked with them over a 3-year period. Research Triangle Institute (RTI Intl) was contracted by Zero to Three to conduct the evaluation. The project also included South Carolina and Virginia and a total of 12 childcare programs. The evaluation team followed the project training and technical support for the teams including monthly team and individual calls, as well as full day training sessions during the year. Three questions were posed as part of the assessment of the project: 1) Is training taking place? 2) Is coaching taking place? And 3) How is the combination of training and coaching benefiting relationships between childcare providers and parents? Preliminary data shows that the answers to the first two questions are a resounding, yes. For the third question, at baseline, 100 Percent of the teachers relied on their director to handle family issues. In Year 2 of the project, teachers reported that "Having the coaching helps me to make the leap and do the conversation that I know I need to do with parents." Data also showed that parental stress decreased between Year 1 and Year 2, further demonstrating the positive affect of the coaching and relationships created between the parents and the teachers. Year 3 data is not yet available but it is hoped the same trends will emerge.

CBCAP funding also supported the implementation of a CPS/DV Co-location Study. Activities were initiated in 2011. The results to date capture findings from focus groups and interviews of the 11 intervention sites, findings from CPS/DV caseworker experience survey, and interviews with the local districts' Directors of Services. These *Research Briefs* can be found on the Center for Human Services Research (CHSR) website at www.albany.edu/chsr.

Plans for 2013-2014:

The 2013-14 CAPTA funds will be utilized to support a number of initiatives aimed at improving the child protection system in New York State. The areas that will be targeted include:

- The use of Citizen Review Panels to review policies, procedures and practices of State and local agencies to evaluate the extent to which the agencies are effectively discharging their child protective responsibilities. The contract for Administration was awarded to the Schuyler Center for Advocacy and Analysis (SCAA). SCAA has taken a proactive role in helping the three Panels develop specific work plans.
- Implementing Program Standards for all Child Advocacy Centers and Multidisciplinary Child Abuse Teams in New York State. The Standards were developed through input from New York State Children's Alliance, Multidisciplinary Team/Child Advocacy Center projects, and the Children's Justice Task Force
- Developing and enhancing the capacity of community based programs to integrate shared leadership strategies between parents and professionals to

prevent and treat child abuse and neglect at the neighborhood level, which is a focus of all of OCFS' program development efforts including the Healthy Families New York Home Visiting Program, the Trust Fund, and the Community Based Child Abuse Prevention Grant Program. These efforts are described below and throughout this plan.

The 2013-2014 CAPTA Basic State Grant funds will continue to support initiatives related to the OCFS Performance Improvement Plan, including New York's Family Assessment Response (FAR) Initiative, Kinship programs, public education and awareness activities, domestic violence training and technical assistance, as well as research. In addition to these existing initiatives, OCFS may use funds for additional child protective improvements as needs are identified.

William B. Hoyt Memorial Children and Family Trust Fund and Community-Based Child Abuse Prevention Grant Program

2013-14 SFY funding in the amount of \$621,850 will be combined with federal 2013 CBCAP funds to continue programs awarded funding under the 2012 Children and Family Trust Fund Request for Proposals (RFP).

Promotion of the highly successful New York Shaken Baby Prevention program will continue targeting all maternity and birthing hospitals in the state. This joint effort reinforces the 2004 State law requiring hospitals to talk to parents about the dangers of shaking a baby and to have a plan for coping with infant crying. Close to 250,000 parents of newborns (approximately 90 Percent of all live births) are expected to be reached each year. Efforts to incorporate the safe sleep message will be implemented as part of the hospital-based education program in 2013 along with further tracking of the incidence of SBS in the Western New York, Finger Lakes and Hudson Valley regions. The results from instituting the safe sleep message will also be evaluated through parent surveys to assess increase in knowledge.

A continuing partnership with DOH, other state agencies and local providers will assist with OFCS's increasing efforts to promote *Safe Sleeping Practices for Infants and Young Children*. The Trust Fund will assist with identifying and/or producing an appropriate video to convey the current American Academy of Pediatrics (AAP) recommendations for safe sleep to child welfare workers and the general public.

The Trust Fund will continue to promote the use of research-based evaluation to support reliable outcome data, and the use of evidence-based curricula and program models. The Incredible Years' (IY) FRC training staff will continue to network and share experiences to strengthen their facilitating skills and increase participation by families at higher risk for child abuse. With the initiation of new child abuse prevention programs in 2013, other evidence-based and evidence-informed programs will be implemented including Triple P, the Nurturing Program, Parent/Child Home, and SPIN Video Interaction Guidance Program. Programs will be required to use the Protective Factor Survey (PFS)

which will enhance the existing data documenting an increase in family protective factors linked to the risk child abuse and neglect.

The National Alliance will continue its technical support to the Trust Fund to support local level engagement of families and community partners in an approach based on the World Café model. Built on the protective factors necessary for children to thrive, questions posed during the Café can spark leadership development, effective partnerships with parents, and strengthen families in the context of the cultures represented at each café. Planning for this effort includes the Council on Children and Families and Prevent Child Abuse New York. Results from the local cafés will be compiled into a Final Report and released in the fall of 2013. Additional Café Orientation Trainings will be considered as resources allow. The primary focus for this year will be to establish a skilled Parent Leadership Team that becomes a statewide resource for local training. For more information, go to http://www.ctfalliance.org/initiative_parents-2.htm.

Viewing child abuse through the lens of family violence positions the Trust Fund to be an integral part of coordinated child abuse prevention resources and activities, and provide leadership in supporting the continuum of child abuse prevention efforts to better align with the CFSR and local PIPs. Trust Fund community-based programs located in Family Assessment Response (FAR) counties are increasingly linked with their LDSS to discuss how they can support local needs and engage the harder to reach families. Trust Fund monitoring of programs includes reaching out to LDSS to elicit their feedback and participation in yearly site visits. The Trust Fund can also take a leadership role in promoting critical universal messaging on child safety and wellbeing.

Child Maltreatment Deaths Reporting

By State statute, all child fatalities due to suspected abuse and neglect must be reported by mandated reporters, including, but not limited to, law enforcement, medical examiners, coroners, medical professionals, and hospital staff, to the *Statewide Central Register of Child Abuse and Maltreatment*. No other sources or agencies are used to compile and report child fatalities due to suspected child abuse or maltreatment.

CAPTA Annual State Data Report Items

Information on Child Protective Services Workforce

Education and qualifications

- a) Social Services Law §421(4)(b) states that child protective services supervisors must have a minimum of a baccalaureate or equivalent college degree and three years of relevant work experience in a human services field.
- b) New York State regulation 18 NYCRR 432.2(e)(5)(iii) requires “Each child protective service worker must have a baccalaureate or equivalent college degree and/or must have relevant human services experience.

Training

- a) New York State regulation 18 NYCRR 432.2(e)(5)(ii) requires that “Each child protective worker, including supervisors, must satisfactorily complete a basic training program in child protective services within the first three months of his/her employment in the child protective service. Such program must be approved by the department [OCFS] and must focus on the skills, knowledge, and attitudes essential to working in the child protective service. Such training program must include, but need not be limited to: basic training in the principles and techniques of child protective service investigation, including relationships with other investigative bodies; legal issues in child protective service matters, diagnostic assessment of child abuse and maltreatment cases; methods of remediation, treatment and prevention of child abuse and maltreatment; and case management and planning of child protective service cases, including the relationship of the child protective service issues to permanency planning for children who remain at home or who are in out-of-home care.”
- b) Social Services Law §421(5)(b) requires that all persons employed by a child protective service must complete six hours of annual in service training, beginning in the second year of their employment.
- c) Social Services Law §421(5)(c) requires that all persons assigned to be a supervisor, within the first three months of employment as a supervisor, must satisfactorily complete a course on the fundamentals of child protection. Such training course shall, among other things, strengthen and expand current training procedures for child protective service supervisors; provide the skills, knowledge and standards to practice effective case planning and case management; provide comprehensive assessment tools needed in critical decision making; require participation in the existing common core training required by child protective service case- workers; strengthen recognition and response to safety and risk indicators; improve skills to promote consistent implementation of training and practice; provide the necessary tools and assistance to build the ability to coach and monitor child protective service caseworkers and model effective investigation practice; increase cultural competency and sensitivity; and establish an annual in service training program specifically focused on child protective service supervisors.
- d) New employees of the OCFS New York Statewide Central Register for Child Abuse and Maltreatment (SCR) must complete an intensive five (5) week training program comprised of three (3) weeks of instructor-led classroom and two (2) weeks of on-the-job training. The curriculum includes but is not limited to:
 - NYS Social Services Law
 - Child abuse and maltreatment allegations and definitions
 - Interviewing public and mandated callers
 - Decision-making/evaluating information against the law
 - Criteria for registering a CPS report
 - Decision-making and criteria necessary for taking a law enforcement referral
 - Jurisdiction and assigning CPS reports for investigation
 - Report narrative construction

- Use of CONNECTIONS for recording report information and searching the database for prior CPS history
- Use of SCR Business Continuity Application (BCA)

Data on the education, qualifications, and training of such personnel

Please see Appendix "D" for specific information regarding training taken in 2012 by child protective services staff who work in social services districts throughout New York State. The data shows that 4,841 individual CPS caseworkers attended 17,595 classes in 2012, for a total of 187,393 class hours, or an average of approximately 39 hours of training per worker.

OCFS does not track data on the education or experience of child protective service workers throughout the state. Because child protective services are locally administered, these staff persons are hired by each county and their personnel records are maintained by the counties. Each county may establish its own hiring requirements, subject to the minimum state requirements, which are described above. In 2006, OCFS surveyed all counties regarding their minimum requirements for education and qualifications for CPS Supervisory staff. All responding counties required significantly more than the state minimum requirements. Of 30 counties (out of 58) responding to this question, all but three required at least a bachelor's degree. Those three required up to seven years' experience for those with less formal education. All counties required new supervisors to have experience, with all but three requiring three years or more.

Demographic information

Information on the location of child protective service personnel, i.e. the number of caseworkers in each county of the State, can be found in Appendix "D". OCFS does not track other demographic information on its child protective services workers. As stated above, each county is responsible for its own hiring of such personnel; OCFS has no role in the hiring or supervision of individual local staff members.

Caseload or workload requirements for child protective service workers

Aside from the requirement in Social Services Law §423(1)(c) that the CPS unit must have sufficient staff of sufficient qualifications. New York State does not have statutory or regulatory caseload requirements for child protective service workers. OCFS issued an informational letter in 2006 (06-OCFS-INF-08, New York State Child Welfare Workload Study) in which it presented the results of a workload study it had commissioned. That study recommended that each child protective service set a caseload goal of no more than 12 investigations per month per CPS worker.

Juvenile Justice Transfers

The number of youth transferred to juvenile justice facilities in FFY 11-12 was 179 youth, a decrease from FFY 10-11 which was 213. This population consists of children who:

- Were in CCRS shown as in the custody of a social services district as a result of a judicial dispositions of PINS (Person in Need of Supervision), JD (if placed, and

- placement not exceeding 12 months), JD (initial placement exceeds 12 months), and do not have a disposition of OCFS custody within the same hearing, or
- Have a judicial disposition of transfer custody and guardianship (Surrender or Terminated Parental Rights only) or care and custody to a social services district, or
 - Have a voluntary or emergency removal, and
 - Have a subsequent hearing with a disposition of OCFS custody during FFY 11-12 (the two events must occur between the track open date and the first discharge date, if any that lasts more than one day), plus
 - Children that were discharged to an OCFS Facility during FFY 11-12, and
 - Do not have an open admission in the juvenile justice system between the last movement and discharge in CCRS.

Chafee Foster Care Independence Program

The major efforts in 2012-2013 were geared to continue the implementation of the Chafee Foster Care Independence Act of 1999 (CFCIP), including the Chafee Education and Training Voucher Program, the Medicaid option available to states under Chafee, the new requirements for a transition plan under the Fostering Connections to Success and Increasing Adoptions Act of 2008, and new legislation under Chapter 342 permitting a former foster youth who exited care on a final discharge status at age 18, 19 or 20 to re-enter foster care under certain circumstances, provided the youth is under the age of 21. OCFS has developed a transition plan form and training for districts and agencies on the new transition planning requirements as noted in Goal 4 under Transition Plan.

OCFS Division of Juvenile Justice and Opportunities for Youth (DJJOY) continues to refine its strength-based Life Skills Training program throughout its direct care system as a key core component of the OCFS residential programming. Additional life skills interventions are being identified and integrated within OCFS direct care programs to better engage youth.

In an effort to better prepare and support eligible youth with lifelong learning skills that will enhance their educational and employment prospects, OCFS DJJOY merged its Bureau of Independent Living and Office of Workforce Development to create the Bureau of Youth in Transition Programs (BYTP). This new Bureau will work with direct care programs and aftercare staff to link youth with comprehensive services designed to help in the transition to adulthood and self-sufficiency. The new unit will also be better able to support direct care programs in offering life skills programming throughout a youth placement.

DJJOY has implemented a new transition plan form that will allow staff to better document and track the services that will be offered to youth as part of their permanency planning. The new form is an electronic based record which will allow all staff working with youth to know their transition plan.

OCFS has also begun using as part of its intake process the Ansell Casey Life Skills Assessment Tool in conjunction with the career interest tool, Career Zone. The Ansell Casey Tool, a free set of assessments, learning plans and resources, is used to help engage youth to gain the life skills they need for self-sufficiency. The assessment consists of questions about life skills domains deemed critical by youth and caregivers for successful adult living. These domains include Daily Living, Career Planning, Work Life, Self-Care, and Money Management.

Fatherhood Program

In non-secure facilities around the state with young fathers, a BYTP team member meets with these young fathers individually to explain their parental rights while they are placed with OCFS. A BYTP team member discusses with them the importance of education, their future plans, and assists with identifying community resources. Lastly, the young father is given responsible parenting brochures/literature; videos; and the Inside Out Dads Curriculum to better prepare them for fatherhood upon return to the community.

Through the new Bureau, OCFS will continue to provide technical assistance and support to independent living program sites serving youth in its custody and on aftercare status. Those youth who are in residential placement in OCFS operated facilities continue to receive independent living skills (life skills training) as part of a Focus Intervention Process and an integrated model. This two-pronged approach will better prepare youth and offer more opportunities to develop life skills. In addition, OCFS will work to enhance Life Skills programming through community partnerships, training, site visits including group observations, and the provision of various materials to support this program (See Goal 4 for additional Chafee information).

The following pages provide information about the in-care population in receipt of Independent Living Services. The data is presented for 16-21 year olds and for the previously State-funded population 14-15 year olds. The data for 14-15 year olds includes only those children who have a goal of APLA. It does not capture information about other children who, because of the service needs identified, are receiving Independent Living Services, even though their primary goal is not Independent Living.

Children in Foster Care Receiving Independent Living Services

Age	Frequency	Percent
14	1469	12.5
15	1932	16.5
16	2247	19.2
17	2015	17.2
18	1547	13.2
19	964	8.2
20	932	8.0
thru 21	600	5.1
Total	11706	100.0

Sex	Frequency	Percent
F	5665	48.4
M	6041	51.6
Total	11706	100.0

Race/Ethnicity	Frequency	Percent
Native Amer-Alaskan	40	.3
Asian	83	.7
African American	4709	40.2
White	2564	21.9
Unk	2340	20.0
Latino	1970	16.8
Total	11706	100.0

Current Living Arrangement	Frequency	Percent
ADOPTIVE HOME	4	.0
RUNAWAY SHELTER	3	.0
INSTITUTION	3370	28.8
GROUP RESIDENCE	282	2.4
GROUP HOME	1055	9.0
SILP	222	1.9
AOBH	273	2.3
FOSTER HOME	4696	40.1
APPVD REL HOME	1560	13.3
SNF	2	.0
RTF	93	.8
SPEC RES CENTER	1	.0
NON-SEC DET FAC	29	.2
SEC DET FAC	2	.0
CFR DEV CENTER	1	.0
ICF-DD	33	.3
VOL COMM RES	18	.2
PROP RES SCHOOL	7	.1
VOL RES SCHOOL	1	.0
UNION FREE SCHOOL	1	.0
PSYCH CENTER	2	.0
CHILD PSYCH CTR	1	.0
SUPERVISED LIV	3	.0
SUPPORTIVE LIV	1	.0

PSYCH HOSP	2	.0
OTHER-NONSANC	40	.3
Total	11702	100.0
System	4	.0
	11706	100.0

Duration of Foster Care	Frequency	Percent
UP TO 6 MOS.	2044	17.5
7-12 MOS.	1907	16.3
13-18 MOS.	1145	9.8
19-24 MOS.	812	6.9
25-36 MOS.	1378	11.8
37-48 MOS.	1041	8.9
49-60 MOS.	908	7.8
61+ MOS.	2471	21.1
Total	11706	100.0

As indicated earlier in the APSR, the Close to Home initiative, which began in September 2012, has been transferring youth in OCFS direct care non-secure settings into the custody of New York City ACS. Through training and resource sharing, OCFS will continue to work with our local partners to prepare eligible youth to be equipped and ready as they prepare to transition to adulthood.

Education and Training Vouchers

New York State's Education and Training Voucher program is designed to help youth aging out of foster care to make the transition to self-sufficiency and receive the education, training and services necessary to obtain employment. Under this program, eligible youth may receive up to \$5,000 per year to attend a post-secondary education or vocational training program. The following categories of individuals may be eligible to receive vouchers under the Education and Training Voucher program: (1) youth otherwise eligible for services under the Chafee Foster Care Independence Program; (2) youth adopted from foster care after attaining age 16; and (3) youth participating in the voucher program on their 21st birthday, until they turn 23 years old, as long as they are enrolled in a post-secondary education or vocational training program and are making satisfactory progress toward completion of that program.

OCFS will continue to contract with the Foster Care to Success (formerly Orphan Foundation of America (OFA)) to administer and serve as New York State's fiscal agent for the Education and Training Voucher Program. Social services districts continue to be responsible for determining program eligibility. Priority for funding will be given to former foster care youth who are participating in the voucher program on their 21st

birthday, until they turn 23 years old, as long as they are enrolled in a post-secondary education or vocational training program and are making satisfactory progress toward completion of that program.

New York State's Permanency legislation, Chapter 3 of the Laws of 2005, brought about many changes to laws that will affect adolescents. The law includes a requirement to provide life skills services to foster care youth beginning at age 14, regardless of permanency goal. Regulations were filed on an emergency basis to implement the new law. With these new regulations, the discharge-planning goal of independent living has been renamed "Discharge to another planned living arrangement with a permanency resource." This permanency planning goal is to assist foster care youth in their transition to self-sufficiency by connecting the youth to an adult permanency resource, equipping the youth with life skills and, upon discharge, connecting the youth with any needed community and/or specialized services. An adult permanency resource is a caring committed adult who has been determined by a social services district to be an appropriate and acceptable resource for a youth and is committed to providing emotional support, advice and guidance to the youth and to assist the youth as the youth makes the transition from foster care to responsible adulthood.

Accomplishments

889 youth received ETV awards during FFY 2011-2012

411(46%) were New 2011-2012 Students and **478**(54%) were Returning 2010-11 Students

Female: **2609** (69%)

Male: **280** (31%)

Age and Number of students:

18 **225** 29%

19 **240** 27%

20 **212** 244%

21 **106** 12%

22 **76** 9%

Ethnicity:

African-American: **497** (21%)

Asian American: **12** (5%)

Caucasian: **100** (444%)

Latino: **38** (17%)

Mixed Race: **26** (11%)

Native American: **1** (<1%)

Pacific Islander: **2** (1%)

Funding awarded to New York students: **\$3,085,880.00.**

All eligible New York youth who completed the application and attended school were funded. Students who applied, but were ineligible to receive funding include those who were not in foster care, did not attend school, were first time applicants over the age of 21, or previous recipients who are older than 23.

* Data is derived from the Foster Care to Success report (Appendix C)

OCFS will continue to build on the education work we began in 2007-2008. Beginning in 2008, regional educational forums were held around the state for caseworkers in local districts and authorized voluntary agencies and foster parents. In 2009 six regional forums were again held around the state. Recognizing that not all youth will go to college, the 2009 forums built and expanded upon the previous years' forums and included a career planning and job readiness component. Beginning in 2010, and continuing through 2013, the regional forums target population include youth.

Plans for 2013-2014

OCFS will continue to contract with the Foster Care to Success to administer and serve as New York State's fiscal agent for the Education and Training Voucher Program. Social services districts continue to be responsible for determining program eligibility. Priority for funding will be given to former foster care youth who are participating in the voucher program on their 21st birthday, until they turn 23 years old, as long as they are enrolled in a post-secondary education or vocational training program and are making satisfactory progress toward completion of that program.

Supporting Information

Inter-Country Adoptions

On October 6, 2000, the federal Inter-country Adoption Act (ICAA) of 2000 (P.L. 106-279) was signed into law. In compliance with the ICAA, currently 15 New York State authorized voluntary agencies and one New York State private attorney are accredited by the Council on Accreditation to provide adoption services for Hague adoption cases. Three of the 15 accredited agencies have the authority to provide adoption services for incoming and outgoing adoption cases. The remaining 12 agencies are accredited to provide adoption services for incoming adoption cases only. In 2009, OCFS issued Administrative Directive 09-OCFS-ADM-12 Inter-country Adoptions. This ADM informs local districts and voluntary agencies of the impact of the Hague Convention and provides the circumstances under which non-Hague Convention inter-country adoptions may take place.

As residents of New York State, children adopted from other countries have access, if they otherwise satisfy the eligibility standards to mandated preventive services. In addition, all New York State authorized agencies providing inter-country adoption

programs are regulated and supervised by OCFS. Prospective adoptive parents are evaluated for suitability to adopt through a home study process, which includes a national and state criminal history record review and a check against the Statewide Central Register of Child Abuse and Maltreatment data base.

OCFS directive 04-OCFS-LCM-05 requires social services districts to collect and maintain information on foster placements of children who are adopted from other countries. During the reporting period for 2011-2012, of the districts reporting, there were eight placements of children into foster care who had been adopted from other countries. Four of the children were initially adopted from Russia. Two have since returned to their adoptive homes while two children from Russia remain in foster care. The other four children placed in foster care were adopted from China, Ethiopia, Haiti and Honduras. Three of the children are still in foster care while the child adopted from Haiti has since returned to his adoptive home.

Child Welfare Demonstration Projects (Not Applicable)

New York State is not participating in a Child Welfare Demonstration Project

Health Care Services Overview

Health care services: The Federal Fostering Connections to Success and Increasing Adoptions Act of 2008 (P.L. 110-351) amended the section 422(b)(15) of the Act which previously required an update regarding ongoing efforts by the State agency to actively involve and consult physicians or other appropriate medical professionals in assessing the health and well-being of foster children and determining appropriate medical treatment. The law now requires States and Tribes, in coordination with the State title XIX (Medicaid) agency, and in consultation with pediatricians and other experts in health care, and experts in and recipients of child welfare services, to develop a plan for ongoing oversight and coordination of health care services for children in foster care. States are required to submit a copy of the Health Care Services Plan with their CFSP.

New York State has a state-supervised, locally administered system of foster care. As such, provision and oversight of the medical care received by these children is the responsibility of the social services districts, that are the legal custodians and case managers, and the authorized foster care agencies with which these departments contract to provide foster care services. Over 80% of NYS children in foster care are cared for by non-public foster care agencies (voluntary authorized agencies) rather than local departments of social services. OCFS routinely conducts site visits and provides technical assistance to departments and agencies to monitor the quality of services provided.

The models of delivery for health care services to children in foster care vary significantly across New York State. Some authorized foster care agencies deliver primary health care directly through on-site clinics. Some agencies have contractual agreements with health care providers; for example, an agency may contract with one psychologist in the community to conduct mental health evaluations on all new

admissions. Most agencies have medical staff that provide some tracking and oversight of routine and specialty health services. Children residing in foster homes often use community health providers.

While OCFS does not provide direct clinical services to children in foster care, OCFS promulgated regulations regarding appropriate medical care [18 NYCRR 441.22]. OCFS regulation 18 NYCRR 441.22 sets forth the schedule for initial and follow-up health screenings for children in foster care. OCFS proposed amendments to 18 NYCRR 441.22 so that the periodicity schedule will match the most current version of the American Academy of Pediatrics: Recommendations for Preventive Pediatric Care. The proposed amendments are moving closer to approval in the required administrative process. New York State Social Services Law (SSL) provides the statutory authority for OCFS to supervise social services districts and promulgate regulations. OCFS regulations require that licensed medical professionals assess the health and well-being of children in foster care and determine appropriate medical treatment. OCFS has also provided practice guidance on necessary and optimal health services for children in foster care with our comprehensive manual, "Working Together: Health Services for Children in Foster Care". This manual was developed in close collaboration with our medical director (a pediatrician), and a representative group of foster care agency and social services staff that included medical professionals in 2009.

To support optimal health services for children in foster care, social services districts and voluntary authorized agencies use the services of licensed medical practitioners to inform policy and practice. For example, the NYC Administration for Children's Services (ACS) has a Medical Services Office that is led by a physician. This office provides policy guidance and oversees the health services provided to NYC children in foster care. They meet regularly with medical staff from the authorized foster care agencies to discuss new policies and address concerns.

NYC has a local coalition, the Committee of Mental Health and Healthcare Professionals in Child Welfare, which provides a forum for members to consult with each other on common concerns around health services for children in foster care. This group has also advised OCFS on the contents of CONNECTIONS, New York's SACWIS system. The Health Care Workgroup of the Council of Family and Child Caring Agencies (COFCCA) was instrumental in development of the Foster Care Initiative (FCI). FCI is a project in 2 NYC agencies that demonstrated new approaches for mental health services for children in foster care, including addressing trauma.

In the Albany area, a foster care agency has contracted with Albany School of Pharmacy to advise their medical staff on medication matters. In central New York, several counties have contracted the services of a child psychiatrist, who must approve all prescriptions for psychotropic medications for children in foster care before the prescriptions can be filled. This psychiatrist has also conducted chart reviews of medication usage for children in congregate care settings in Onondaga County and advised the county on the appropriateness of the prescribing practices.

The Coordinated Children's Services Initiative (CCSI) legislation requires that counties employ a collaborative approach to children with intensive cross-system needs. These collaborative vary in accordance with local government and community resources, and typically include representatives from social services, mental health, developmental disabilities, substance abuse services, schools, and community providers. The goal is to implement a comprehensive, coordinated, individualized service plan for each child. In 2002, the Center for Governmental Research, Inc. (CGR) concluded that CCSI is a viable model that should be continued and strengthened, and presented a number of recommendations designed to strengthen the state-local partnership. Many of the recommendations in the report were subsequently implemented. In addition, a coordinated children's services statute that amended state Executive Law went into effect subsequent to the report and incorporated a number of issues raised in the report.

At the state level, the OCFS medical director is involved in any regulatory or guidance documents disseminated on health issues. OCFS employs a chief treatment officer, chief psychiatrist and psychologists. OCFS routinely engages local and national experts, including psychiatrists, physicians, pharmacists, and psychologists to assist in health-related initiatives. Activities in 2008 included a series of three teleconferences on trauma, the development and distribution of a guidance document on the use of psychiatric medication for children in out-of-home care, and an interagency collaboration to address Fetal Alcohol Spectrum Disorders (FASD). OCFS has used an expert consultant to customize the Child and Adolescent Needs and Strengths (CANS) assessment tool for use in our Bridges to Health foster care waiver program.

Bridges to Health (B2H) (*Working Together Manual* B-21, B-175) continues to assess for service needs and plan for goals; B2H utilizes the Childhood Adolescent Needs and Strengths Assessment (CANS). Recently, OCFS and the Office of Mental Health collaborated to update the CANS for use across both systems. The new CANS-NY includes a wider range of domains to better identify and address the multi-system needs of children. As of January 31, 2013 there are 3065 children enrolled in B2H. The breakdown is as follows: 2534 in B2H Seriously Emotionally Disturbed (SED), 407 in B2H Developmentally Disabled and 124 in B2H Medically Fragile. BWM continues to receive weekly requests from Local Departments of Social Services across the state for more B2H SED slots. New York City has 160 children on their B2H SED waitlist. (Additionally, see B2H noted in Goal 2)

On September 17, 2010, OCFS issued Administrative Directive 10-OCFS-ADM-12 Health Care Proxy for Youth Transitioning out of Care to Directors of Services, Child Welfare Supervisors, and Staff Development Coordinators to address the federal Fostering Connections to Success and Increasing Adoptions Act of 2008 requirement of a transition plan for youth exiting care at age 18, 19, or 20. The federal Patient Protection and Affordable Care Act, (P.L. 111-148) signed into law on March 23, 2010, amended the Fostering Connections to Success and Increasing Adoptions Act of 2008 to require "*information about the importance of designating another individual to make health care treatment decisions on behalf of the child if the child becomes unable to participate in such decisions and the child does not have, or does not want, a relative who would*

otherwise be authorized under State law to make such decisions and provides the child with the option to execute a health care power of attorney, health care proxy, or other similar document recognized under State law.”

During the completion of the transition plan, the case worker is required to inform and educate youth exiting care at age 18, 19, or 20 of the importance of having a health care proxy, and provide the youth the opportunity to execute a health care proxy by helping the youth obtain and complete the form.

On September 1, 2011, OCFS released 11-OCFS-ADM-09-Reproductive Health and Services for Youth in Foster Care w/attachments. The purpose of the Administrative Directive (ADM) is to advise local departments of social services (LDSS) and voluntary authorized agencies of the requirements pertaining to reproductive health services for youth in foster care. This ADM also provides guidance and resources to assist LDSS and agencies to become more knowledgeable and competent in the provision of such services. Attached to this ADM is the booklet, *A Medical Guide for Youth in Foster Care*. This booklet is a resource for youth in foster care. OCFS collaborated with NYS Department of Health, New York City ACS and HRA and Local Districts to enhance current systems to provide Medicaid for the transitioning juvenile delinquent population. The booklet, *A Medical Guide for Youth in Foster Care*, is intended to answer questions youth may have about their medical rights and to better inform their health care decisions.

Improving the Use of Psychotropic Medication among Children and Youth in Foster Care: *A Quality Improvement Collaborative* - OCFS is collaborating with NYS Department of Health and NYS Office of Mental Health on the federal project being conducted by The Center for Health Care Strategies on Psychotropic Medication: Improving the Use of Psychotropic Medication Among Children & Youth in Foster Care: *A Quality Improvement Collaborative*. New York State was among 32 states that sent letters of interest and 24 states that applied for five available slots. New York was among the five top-rated applicants, and was invited to participate in the three-year quality improvement collaborative. The work done on this project will inform NYS in the ongoing efforts to improve Health Services and enhance planning. Project information is available at the following link:

http://www.chcs.org/info-url_nocat3961/info-url_nocat_show.htm?doc_id=1261326

OCFS also has consulted with pediatricians Dr. Suanne Kowal-Connelly and Dr. Lucy Weinstein, who have expertise in child abuse. Dr. Weinstein also has expertise on health and safety and does consultant work for the Nassau County Dept. of Health. Together the pediatricians developed a curriculum on psychotropic medications. “Psychotropic Medications and their use in the Treatment of Mental Health in Children” and is presented in all regions of the state on contractual agreement. In 2011, across New York State there were six offerings with 185 attendees. In 2012, we held six offerings and with 150 trainees.

A General Information System (GIS) message was released on April 4, 2012, to remind local departments of social services (LDSS) of Medicaid categorical eligibility for

juvenile delinquent youth who are released to the community from an Office of Children and Family Services (OCFS) residential facility or a voluntary foster care agency, and who remain under the custody of the OCFS Commissioner. OCFS Case Managers, Local Districts and the OCFS Federal Resource Unit must follow certain procedures for expediting Medicaid coverage for these youth.

As per the expectation of the Health Services Plan, this provides further direction in securing Medicaid for transitioning youth and continuity of health care coordination.

http://www.health.ny.gov/health_care/medicaid/publications/docs/gis/12ma011.pdf

These efforts by OCFS with active collaboration and coordination with sister agencies resulted in our continuous development and improvement of a health care services plan for coordination and oversight of health care for children in foster care. As required per P.L. 111-148 of the Act, OCFS is submitting an updated Health Care Oversight and Coordination Plan on with the APSR on June 30, 2013.

Disaster Planning

Emergency Preparedness/ Disaster Plans:

OCFS continues to refine and test its disaster plan to identify, locate and service children in care in the event of disaster. The approach will include responding to new cases as needed, maintaining communication with essential personnel, and how to maintain records and coordinate services under such circumstances.

OCFS plans address state and local needs as well as federal requirements to:

- identify, locate and continue availability of services for children under State care or supervision who are displaced or adversely affected by a disaster;
- respond to new child welfare cases in areas adversely affected by a disaster, and provide services in those cases;
- remain in communication with caseworkers and other essential child welfare personnel who are displaced because of a disaster; and
- preserve essential program records and coordinate services and share information with other States (Section 422(b) (16) of the SSA).

OCFS' paramount priority has been to protect the health and safety of our employees, stakeholders and the children and families we serve. As part of this commitment, OCFS has developed plans to strengthen the agency's ability to prevent, respond and recover from any type of emergency disruption. The following agency plans are available:

- An updated copy of the OCFS Continuity of Operations Plan (COOP) formally known as the OCFS Business Continuity Plan (BCP). This Plan formalizes the policies and procedures developed by the agency and serves as

a foundation for all OCFS staff to continue to provide essential services during emergencies. There are four divisional program COOP plans which focus on directing resources to support the essential services required to maintain the health and safety of OCFS stakeholders. There are two support units' plans which identify critical functions to support program divisions in the reestablishment of services.

- An updated copy of the OCFS Continuity of Operations Plan (COOP) formally known as the Business Continuity Plan Light. This Plan is an action document used to reestablish essential services during emergencies. It includes listing of agency critical functions, organizational structure, notification chart, 24 hour contact information, relocation sites, and stakeholder contact information.
- An updated copy of the OCFS Division of Child Welfare and Community Services (CWCS) Continuity of Operations Plan (COOP) formally known as the CWCS Business Continuity Plan. This Division has the primary responsibility for the oversight of child welfare services delivered by local departments of social services plan
- A copy of the template used by OCFS juvenile facilities to develop a "Ready Emergency Data Book", which details each DJJOY facility's continuity of operations plan in the event of an emergency.
- Comprehensive Emergency Management Plan (CEMP) in an internal agency management tool which sets forth basic information necessary to prevent, mitigate, respond to and recover from emergencies.
- Emergency Response Plans (ERP) which are individual office plans needed to effectively react to building emergencies.
- OCFS Pandemic Influenza Plan: Established in response to the outbreak of the H1N1 virus in New York State.

The COOP provides the foundation for OCFS staff to continue to provide essential services during emergencies, and to facilitate an orderly recovery from emergency situations. In support of this, they:

- Outline key concepts of business continuity operations;
- Identify roles and responsibilities of key OCFS staff;
- Describe how the agency and its four programs and two support units will function in the event that their essential services are disrupted;
- Outline the mechanics and flows of communication within and outside the agency;

- Identify when and by whom the plan is activated and provides procedures for relocation and for a return to normal operations;
- Outlines agency requirements for COOP awareness training and exercises;
- Establish procedures to update and maintain the COOPs.

In relation to OCFS' role in oversight, OCFS issued 07-OCFS-ADM-10: "New York State Disaster Plan – Local Department of Social Services Requirements," on July 30, 2007. This ADM outlines the requirements for local departments of social services pursuant the federal Child and Family Services Improvement Act of 2006, P.L. 109-288. The submitted local plans will be incorporated into state planning.

Every year OCFS staff members are sent to a State Emergency Operations Center course sponsored by the New York State Office of Emergency Management (SOEM). This training ensures that in response to and support of disasters or major emergencies, personnel are prepared when assigned to work at the OCFS desk at the Emergency Operations Center.

OCFS keeps an active volunteer list to assist in disaster response.

OCFS remains compliant with the National Incident Management System (NIMS) required by the federal government which establishes standardized incident management processes, protocols, and procedures that all responders -- Federal, state, tribal, and local -- will use to coordinate and conduct response actions.

OCFS has maintains a Geographic Informational Center (GIC) mapping computer application which is widely used as a tool to identify impacted areas for disaster response.

OCFS is a member of the New York State Disaster Preparedness Commission (DPC).

OCFS serves on the New York State Human Services Task Force under the DPC and is the Co-Lead of the NYS Disaster Assistance Center Group.

OCFS is a member of the Regional Catastrophic Planning Team (RCPT) which brings together NY, NJ, PA and CT to collaborate on Human Service response should a catastrophic event occur in the region.

OCFS has been deployed to assist in several NYS emergency response efforts:

- Buffalo NY Plane Crash: Identify stakeholders located in accident proximity
- Binghamton NY Shooting Incident: Deployed to assist in establishment of Family Assistance Center
- Champlain Bridge Closure: Deployed to assist in identifying and provide assistance to affected stakeholders

- Haitian Earthquake Resource Center: Deployed to establish center in response to the American families of earthquake victims in Port au Prince Haiti

Activities and Accomplishments 2012-2013:

OCFS partnered with the Office of Emergency Management (OEM), Department of Health (DOH) and the State Education Department (SED) to hold educational sessions for school administrators/personnel and child care providers located within 10 miles of nuclear power plants, on administering potassium iodide (KI) to children in the event of a radioactive release.

The Acting Deputy Commissioner for Administration and the agency's OEM Liaison participated in a Multiagency Coordination Functional Exercise presented by the New York State Office of Emergency Management, Division of Homeland Security and Emergency Services on June 29, 2012. The exercise brought together 35 State Agency Executives and Liaisons to share information on functional roles, responsibilities, policies and procedures during a hypothetical hurricane event impacting New York State.

OCFS remained in constant state of alert during the significant severe weather event on July 26, 2012. The agency participated in weather briefings held by the National Weather Service and monitored Executive Situation Reports sent by the NYS Office of Emergency Management. OCFS facilities in the targeted area actively prepared for the event with the activation of plans, procedures and protocols.

Due to a fire at a recycling plant in Columbia County involving hazardous materials, OCFS reached out to all stakeholders located within the 15 mile radius of the site due to potential plume movement, to reinforce safety concerns. Location information on OCFS Juvenile Justice Facilities and Child Care Programs in the area were shared with the NYS Office of Emergency Management (OEM). Executive Staff monitored OEM Situation Reports throughout the event. All stakeholders were notified and advised to cancel all outdoor activities, remain indoors and heed local emergency notification channels until the advisory was lifted.

OCFS staff participated in a full scale, level 1 activation exercise at the NYS Office of Emergency Management on August 9, 2012. The simulated scenario was a "no warning" 6.2 magnitude earthquake in Malone, NY impacting Franklin and surrounding counties in the North Country. The exercise involved loss of infrastructure, building collapses, fires, blackouts, landslides, multiple fatalities, injuries and missing persons. In addition to staffing the OCFS desk at the Emergency Operations Center, OCFS participated in our role on the Human Services Functional Branch. The exercise provided staff the opportunity to test process, functions, mission control requests as well as interface between agency partners and the Functional Branches.

OCFS staff participated in a full scale exercise on September 12, 2012 on state protocols in response to a radiological event at the Indian Point Energy Center in Westchester County.

OCFS staff provided support to Westchester County Department of Social Services on their initiative to support the development of Continuity of Operations Plan's (COOP) to local social services districts.

OCFS staff attended the bi-yearly New York State Nuclear Safety Sub-Committee Power Pool Meeting on October 23rd and 24th. The meeting is run by the Office of Emergency Management's Radiological Emergency Preparedness Program (REP).

Commencing in February of 2012, OCFS, along with a few other states that have experienced significant natural disasters, participated with FEMA, DHHS, the federal Department of Justice and the federal Department of Education in the preparation and review of a proposed policy on Post-Disaster Reunification of Children.

Super Storm Sandy 2012-2013

In preparation for Super Storm Sandy, OCFS implemented all emergency management planning protocols with mitigation measures employed and additional resources deployed to anticipated impacted areas. Juvenile Justice Facilities were carefully monitored and plans to shelter in place or evacuate to an alternate location were readied.

All OCFS Divisions reached out to stakeholders to confirm that emergency plans were reviewed with adequate back up procedures and sufficient provisions on site. OCFS activated the agency's command center at home office. Communications were in place with employee notifications and agency updates, prior and post storm, links to the Governor's web page and the Office of Emergency Management Hurricane page on our internet site.

OCFS staff was assigned to work at the NYS Emergency Operations Center for several weeks in two shifts, 8:00AM – 8:00PM and 8:00PM – 8:00AM.

Post storm, OCFS mission essential services remained fully operational. Agency employees displaced due to the storm, relocated to pre-identified alternate sites. The Division of Child Welfare and Community Services continued to contact and monitor voluntary agencies on an ongoing basis to respond to post-storm impacts including the provision of a generator to a voluntary agency in Westchester County and intervention with local utility companies to prioritize the restoration of power. Daily conference calls with local social service districts were held to offer assistance and support to counties. The Division of Child Care Services (DCCS) developed a protocol to facilitate the temporary relocation of childcare programs allowing children and families to receive child care services with minimal interruption while issues were remediated. DCCS was able to use geo-coding technology to plot child care programs to identify those centers in impacted locations. At this time, DCCS continues to chair a Child Care Task Force which

brings together state, local and voluntary partners to coordinate resources and services for the child care community impacted by the storm.

In the agency's role as the Lead for Disaster Recovery Centers (DRC), under the NYS Disaster Preparedness Commission's Human Services Branch, the agency directed the overall state operations of DRC's across all 13 declared counties. A total of 65 DRC's were opened with a total cumulative number of visitors at 172,130 and counting. At this date, 9 DRC's remain active. The first DRC opened on November 1, 2012 and the projected closure date for the remaining centers is April 30, 2013, unless a federal extension is granted.

Adoptive Incentive Payments (Not Applicable)

New York State did not receive Adoption Incentive funding in 2012-2013