a) The factors to be considered in determining which reports will be addressed through the family assessment and services track and the size of population to be the subject of the differential response program:

The criteria by which we will assign reports to the family assessment and services track:

The Family Assessment Response (FAR) will be provided when court ordered intervention and evidence collection is not going to be necessary and child safety will not be compromised. Supervisors will screen SCR Reports upon receipt.

The following are the types of reports which may be screened in to be handled by the FAR team.

1. Inadequate guardianship
2. Lack of supervision
3. Corporal punishment including minor bruises and marks
4. Lack of food, shelter and clothing
5. Lack of medical care
6. Educational neglect
7. Parent child conflict
8. Child behavioral issues
9. Custody disputes that are not court ordered

See attached Screening Tool; please note that all reports will be considered on a case-by-case basis.

The anticipated percentage of reports that we project will be handled through the family assessment and services track in the first 12 months of implementation:

Rockland anticipates handling 40% of reports to be handled through FAR in the first 12 months of implementation. Based on annual data from the past two years, we expect to receive approximately 1,600 reports and handle 640 of them through FAR. During a “pilot period,” from February 1, 2011 until full implementation, we intend to screen all reports using our screening tool to get a more accurate percentage of reports which will be assigned to FAR.

The particular units and/or workers who will be involved:

We plan to have two units providing Family Assessment Response, and have already reconfigured our Child Welfare staff to support them. If necessary, the number of staff assigned to these two units will be adjusted before implementation based on the results of the piloting of our screening tool and process.
The FAR Units were established with experienced and skilled staff comprised of:

**CPS FAR UNIT:**
- Grade B Supervisor
- Senior Caseworker
- Senior Caseworker, Spanish-Speaking
- Caseworker
- Caseworker, Spanish-Speaking
- Clerical Worker

**PREVENTIVE FAR UNIT:**
- Grade B Supervisor
- Senior Caseworker
- Senior Caseworker
- Caseworker
- Caseworker, Spanish-Speaking
- Caseworker, Spanish-Speaking
- Caseworker, Fr.-Creole Speaking

The FAR units represent 2 of a total of 13 Child Welfare Units, and 13 casework staff. The FAR workers represent 15% of the Agency’s total Child Welfare casework staff (89), and 3% of the Agency’s total work force (402).

Supervisors and after hours on-call Caseworkers will be trained on the screening tool and process for assignment of cases. If it is determined that the situation is safe, we intend for the initial contact of FAR track cases to be through FAR.

In December 2011, we will assess the progress of our implementation and make adjustments as necessary.

**Phase in or roll out plans**

In anticipation of approval to join the program, a workgroup comprised of two proposed FAR teams meets bi-weekly or as needed to discuss process, and to identify and discuss concerns and issues. We have already developed our screening tool. Workers in the two proposed teams have demonstrated an exceptional ability to engage families and maintain professional relationships with families. Workgroup meetings are open to all Preventive and Child Protective Services staff. Our focus is to reinforce our strength-based collaboration between CPS and Preventive units, and to build upon staff’s capabilities and our commitment to solution-focused and family centered casework practices.

Upon approval of Rockland’s application, all Child Welfare staff will attend formal information session(s) and trainings regarding FAR, and formal meetings will be conducted with community stakeholders for their information and input. Meetings will be held with our Family Court judges and local school districts regarding the FAR model.

Program protocols and procedures, including after hours protocols, will be finalized later. The assessment tool and process will be finalized by September 2011. We have already identified two units for FAR comprised of workers who are capable and willing to shift their practice to be even more strength based and solution focused. The teams also have significant expertise in assessment and engagement skills. A community FAR event will occur in September 2011. As we expect the transition into utilizing FAR to have a ripple effect on many of our stakeholders, our current Child Welfare Advisory Board will be expanded to include more participants, including Family Courts, schools, parents that have been through our system, and foster parents.
b) The assessment process regarding child safety and risk as well as the types of services and interventions to be provided to families included in the family assessment and services track and a description of how the services will be offered:

Assessment process that we will use to assess safety, risk to children and family strengths and needs

Our primary focus is child safety, which will be assessed along with risk factors from the time we receive a report throughout our work, with family participation. We will utilize a family support approach, and immediately start working with the family to assess their strengths, needs, and risks. The FAR process will be explained to parents, and they will be engaged in the family assessment. Other community supports will be involved with permission from the parents, to assist families in meeting needs that may be identified through the assessment.

The formal safety assessment will be completed and approved in CONNECTIONS seven (7) days after receipt of the report, and we will notify the SCR about the FAR track. We will utilize the Family Lead Assessment Guide (FLAG) on every case designated as FAR. In partnership with the family, assessment of strengths and needs will be carried out in partnership with the family. A new process will be utilized, including specific dimensions of the capacity of caregivers as well as strengths and needs of the family and child. High priority will be given to the well being of the child. Family involvement in the process will be explained to the family and others in the assessment. Included in the process will also be personal interviews with all family members, their supports, and other stakeholders, and records review. Family Meetings, genograms, motivational interviewing, solution-focused approach, will be conducted. We will recognize the family's abilities to use their strengths and resources to meet their needs, with the goal of empowerment. In partnership with families, we will develop outcomes and objectives.

The plan for linking families with those goods and services that address their identified needs, including what services will be provided by county CPS or preventive services staff, what services will be provided by community service providers, and what relationship the county will have with TANF staff in assessing needs and providing services. How, if at all, will family assessment and services interact with other local models of service access including such things as SPOA, CCSI, etc.

Throughout the FAR process, services will be offered to the family. In collaboration with families and community resources, services to be provided by FAR workers include: assessment of strengths and needs, safety and risk assessment, development of goals and strategies, casework counseling, advocacy, referrals to community programs and services, and transportation. Other DSS services provided may include, day care subsidy, public assistance, food stamps, Medicaid, child support services, transportation, and emergency services. FAR and TANF staff will continue their close relationship in assessing needs and eligibility, and emergency assistance needs of eligible families will be prioritized. When needed, TANF staff may become part of the FAR team working with the family. Additional services such as basic needs (food, clothing, and shelter), mediation, respite, advocacy, early intervention services, substance abuse services, domestic violence services, home visiting, teen parenting
services, counseling, public health nurse services, WIC, health services, mental health services, parenting and/or anger management classes, aggression replacement training, parent support services, and support groups will be accessed through community service providers. FAR workers will provide families with linkages to needed goods and services, advocate for them, and will work with family supports to ensure the effectiveness of services. FAR staff will interact in partnership with other local models of services on behalf of families with the goal of child well being, which is a different role from the CPS worker, which often includes monitoring compliance with Article X (Child Abuse and Neglect) Court orders.

c. A description of the process to be followed for planning and monitoring the services provided under the family assessment and services track.

How the assessments and services provided directly by us and those provided by agencies who have contracts with us and those provided by other agencies will be developed and monitored for quality and adherence to negotiated principles and expectations.

Assessments and services provided directly by us will be developed with our staff, community stakeholders, other FAR districts, and OCFS. Services provided by our FAR staff will be reviewed by the Supervisors biweekly in supervision and review of case records, and through our regular Supervisory review and approval process. Weekly structured team review will provide additional support of staff and decision-making. Direct services will provided only by our Child Welfare staff; ancillary/indirect services will be provided by outside agencies who offer programs including but not limited to: counseling, parenting, substance abuse, and job readiness. Contract agencies' performance is monitored on an ongoing basis by the Department through development of performance target outcomes, required reporting on program outcomes, scheduled meetings, and communication from our staff. Effectiveness of services provided by other agencies will be monitored on an individual basis by families receiving the services, the FAR staff, and other team members working with the family will monitor and evaluate services provided by other agencies.

d. A description of how the principles of family involvement and support consistent with maintaining the safety of the children will be implemented in the family assessment and services track:

Our core practice principles upon which the Family Assessment Response is designed:

We will finalize core practice principles with staff and our Child Welfare Advisory Board members. The proposed core practice principles include:

Child safety is our first priority.
Child centered, family focused, strengths based approaches will be used
We will work with the family to identify assets and build on strengths to meet needs
We recognize the value of partnerships with families, their community, and stakeholders and their importance in protecting children
Multiple strategies for engagement will be employed
We acknowledge parents as the experts about their family
A positive relationship built on respect is important in effecting change
Multidisciplinary practice is fundamental to our work
A critically reflective approach will underpin our practice
Quality supervision will be provided and used
The safety of children is a responsibility of the community
We recognize and will be sensitive to the needs of culturally diverse families
Our goal is to empower families to sustain positive change

The approach we will take and the strategy behind such an approach, to more actively engage and empower families in (i) assessment of their strengths, (ii) assessing their needs, and (iii) in decision-making, while at the same time reassessing child safety.

Building a therapeutic alliance and working in partnership with the family and community will be emphasized throughout the FAR process, as well as respect, empathy and genuineness. The assessment process will involve the family, and full disclosure, and negotiation and mediation may be used during the process to attain mutual understanding and to strategize about meeting needs. Efficacy of the relationship with the family will continually be scrutinized with the family by the team and in supervision. Tools such as Family Meetings, genograms, solution-focused approach and multiple strategies for engagement will be utilized. Throughout the FAR process child safety will be continually addressed and assessed, with casework contact occurring as needed but at least every two weeks. Home visits and collateral contacts will occur with family supports, stakeholders, and the family.

e. A description of how the differential response program will enhance our ability to protect children, maintain the safety of children, and preserve families.

The non-adversarial approach of FAR and the absence of an investigation will result in better engagement of families and empowering more families for positive change, as well as enhancing the ability of families to meet future challenges. Safety will be our first priority and child safety will be assessed throughout the intervention, and through contacts with the family and others. Family assessment staff will focus on the child in need of protective services through the relationship with the family and collaborative partnerships with the family, their supports, and the community.

f. A description of how we will reduce the involvement of government agencies with families and maintain the safety of children through use of community resources.

How we will engage the family without increasing the involvement of government agencies without compromising safety of children:

Our first priority throughout the FAR process will be the safety of children. In some cases, we anticipate increasing government involvement for the short term if the family has a need for a service provided by a government agency. Examples would be Section 8 housing vouchers, temporary assistance, food stamps, etc). Over the long term, we expect to reduce the involvement of government agencies and Child Welfare services by linking families with community agencies, building skills, and effecting positive changes with families and in our community. We have also started a pilot child safety campaign in a village that has a history of high foster care placements. The campaign is meant to increase a sense of community and community responsibility for child safety, and encourages residents and local businesses to become involved in
keeping the village’s children’s safe. If successful, we plan to start this campaign in other high placement or high risk areas.

How traditional service providers, the family’s support network, and other community resources will provide assistance to families whose reports/cases will be handled by a differential response program:

We have a long history of strong collaborations with many service providers in the community. We also actively participate in community focused groups, including local collaboratives and cultural organizations. Our 2011 MEPA Plan includes conducting significant outreach with religious leaders. The FAR staff will engage the family, their support network, and other community resources in providing assistance to the family. Coordinated casework strategies will be used to engage families to identify strengths and needs and access resources.

g. Description of staff resources to be used in the family assessment and services track, including the proposed workloads and staff qualifications.

We have already identified Caseworkers who are interested in providing the Family Assessment Response. We will strive for workloads similar to the workload standards of 10 to 12 families. Initially, staff qualifications include:

- Two years casework experience
- Demonstrated successful experience in assessing safety and risk
- Skill in interviewing and engaging
- Ability to establish and maintain successful relationships including with family’s diverse communities
- Good powers of observation, analysis, and judgment
- Knowledge of principles underlying human behavior, growth and development

How we plan to assign or recruit DSS staff to respond to a CPS report through the family assessment and response track.

Staff members interested in working in the family assessment and response track have already been identified based on their interest, experience and strengths.

Whether staff will be involved in both the Family Assessment Response track and traditional CPS investigations.

Separate staff will provide the traditional CPS investigation and the Family Assessment Response.

Any and all specialized staff resources which will impact on implementation of family Assessment Response.

Our identified staff include: two Supervisors who are experienced in CPS investigation (one also in Family Preservation); five Senior Caseworkers with extensive experience in CPS investigation, PINS diversion program and Intensive Preventive Services; and six Caseworkers with multi-lingual abilities and multi-cultural competency and who are experienced in multiple Child Welfare Services. Further, all staff have extensive
experience with Rockland County Family Court cases including our Family Treatment programs. They are also trained in skills such as teiming, conflict resolution, leadership skills, family engagement, and other strength-based work with families.

All FAR staff who have not already done so, will complete CPS response training.

**h. Description of the training which will be provided to district staff regarding the Family Assessment Response program.** A description of training to be provided to any non-district staff to be used in the differential response program. Both descriptions should include, but not be limited to, a description of the training involving maintaining the safety and well-being of children and any cross training planned for family assessment and investigative staff.

Upon approval of our application, we will schedule formal information sessions regarding FAR for all Child Welfare staff. All FAR staff will receive training in its principles, the model, the process, and the requirements of the approach.

Safety and risk training and CPS Core training has been provided to all FAR staff. Cross training for FAR and CPS investigation staff will be furnished as appropriate, including specific trainings in domestic violence and substance abuse dynamics and interventions. All CPS, FAR, on-call staff, and Child Welfare Supervisors will receive training in the FAR screening process. We will seek assistance from OCFS to provide our CPS and Family Assessment staff with training on topics such as critical thinking, safety and risk, motivational interviewing, solution focused interviewing, engagement skills, and identifying and building on family and community strengths to meet the goals of child safety and well being.

We will plan review training on use of topics such as Family Meetings and genograms. We will seek on-site coaches, training in the use of the assessment tool, relevant trainings and conferences to improve skills in the family development approach, differential response, and guidance on legal questions that may arise, from OCFS.

Trainings for mandated reporting agencies, including the court and school districts, will be provided starting with acceptance into the pilot.

All FAR staff will participate in the FAR training series and in coaching sessions with the American Humane Association.

**Description of community resources proposed to be used in the family assessment and services track**

Community resources will be accessed as needed, including mental health/health services, mediation, family support services, domestic violence services, substance abuse services, housing, support groups, children’s groups, and counseling. We consider our Child Welfare Advisory Board to be a resource to be used for guidance and support in getting the information out to the community. In addition, we will be working with our pilot child safety campaign in a village that has a history of high foster care placements. The campaign is meant to increase a sense of community and community responsibility for child safety, and encourages residents and local businesses to become involved in keeping the village’s children’s safe.
j. Description of additional funding (beyond regular child welfare finance mechanisms) which may be utilized to enhance the program.

Upon approval of our application, we may apply for and utilize local grant funding. Our Parent Aid Fund, which is a not-for-profit developed by staff to assist clients, may be utilized to help with some lower cost needs of the families not provided by government programs or community resources.

k. Description of protocol to be followed for handling cases in the family assessment track when domestic violence is suspected or confirmed. The protocol must address the need to maintain the safety of the child(ren).

If you plan to collaborate with the local domestic violence service provider, please describe such collaboration.

We plan to provide a FAR Response to domestic violence reports where CPS safety interventions and neglect/abuse petitions are not necessary. We will collaborate with our local domestic violence services provider, Rockland Family Shelter, and domestic violence court. A domestic violence liaison from the Rockland Family Shelter already works with CPS and other caseworkers as needed, and will also be available to assist on FAR cases. We are also building a stronger collaboration with the Rockland Family Shelter by planning to co-locate with them at the new Rockland County Special Victims Unit, which will contain our CAC, expected to occur in 2011.

Upon approval of our application, we will develop specific protocols with our staff, the Rockland Family Shelter, and the Court, preferably in the same fashion as the agreement we have with CPS investigation cases. The Family Assessment Response to these reports will be provided in a way that ensures the victim and the child are safe, supports the adult who has been harmed, and holds the person responsible for the harm, not the person being harmed, accountable. Initial contact and engagement will occur separately with the victim, and safety planning will take place. Engagement with the person responsible for the violence will also be conducted, and crisis and safety plans will be developed with this person. In addition, services such as domestic violence services, advocacy and support, financial services, emergency services, housing, victim support groups, probation, domestic violence treatment, anger management groups, and parenting groups will be provided as needed.

l. Description of your plan to involve community agencies, schools, Family Court, other key stakeholders in your county and the community as a whole in planning for and implementing a Family Assessment Response

We have already introduced the FAR model to our Child Welfare Advisory Board, and to the areas of mental health, eligibility services, many private service providers, the community collaborative in the Village of Haverstraw, and County Legislators, all of whom are supportive of the concept of FAR. Plans are being made to meet individually and/or in community forums with school districts, Family Court, Family Treatment Team, CASA, and other key stakeholders including agencies, the faith community, parent advocates, and parents when we receive notice that we have been accepted into the pilot, to receive their ideas, inputs, or concerns. We will have a community event during September 2011.
m. Projected timeline for implementation.

Units were formed and co-located in November 2010. Specialized skill building began for these units in December 2010. All projected FAR Supervisors and Caseworkers were trained in facilitation skills in December 2010. In January and February 2011, they are being trained in Family Meetings. Upon approval of our application, we plan to be available to begin FAR Training in April 2011 and providing FAR Services starting in May 2011 or sooner if offered by OCFS.

Trainings for mandated reporting agencies, including the court and school districts, will also be provided starting with acceptance into the pilot.
ROCKLAND COUNTY

Screening Tool for Differential Response

Initial determination for Differential Response handling.
If any of the following are checked – case deemed *ineligible*.

1. Role of any child listed as abused
2. Allegations/concerns of sexual abuse
3. Fatality
4. Foster Home Involvement
5. Ongoing police investigation
6. Court Ordered Investigation
7. Day Care Provider/Facility
8. Child alleged to be abandoned
9. Previous TPR
10. Allegations of Domestic Violence
11. Current Article 10 placements or petitions
12. Allegations of drug use
13. Two (2) Indicated reports in the past 12 months
14. Open FSS Case
15. Cross County Involvement
16. Serious/ excessive bruises or injuries
17. Other (Please explain briefly)_______________________________________

DETERMINATION FAR CPS INVESTIGATION

Eligibility determined by:________________________ Date:__________________

**| Case ID | Case Name | Date |
---|----------|----------|------|
1. | Role of any child listed as abused | ☐ | |
2. | Allegations/concerns of sexual abuse | ☐ | |
3. | Fatality | ☐ | |
4. | Foster Home Involvement | ☐ | |
5. | Ongoing police investigation | ☐ | |
6. | Court Ordered Investigation | ☐ | |
7. | Day Care Provider/Facility | ☐ | |
8. | Child alleged to be abandoned | ☐ | |
9. | Previous TPR | ☐ | |
10. | Allegations of Domestic Violence | ☐ | |
11. | Current Article 10 placements or petitions | ☐ | |
12. | Allegations of drug use | ☐ | |
13. | Two (2) Indicated reports in the past 12 months | ☐ | |
14. | Open FSS Case | ☐ | |
15. | Cross County Involvement | ☐ | |
16. | Serious/ excessive bruises or injuries | ☐ | |
17. | Other (Please explain briefly)_______________________________________ | | |