



Office of Children and Family Services

KATHY HOCHUL
Governor

DAMIA HARRIS-MADDEN, Ed.D., MBA, M.S.
Commissioner

May 16, 2024

Dear Chief Executive Officer,

Thank you for submitting St. Lawrence County's Supervision and Treatment Services for Juveniles Program (STSJP) plan for Program Year (PY) 2023-2024. Your entire STSJP plan, including any amounts listed for PY 2023-2024 STSJP-RTA, has been **approved**.

The County is eligible to receive 62% State reimbursement for STSJP expenditures up to the capped STSJP allocation amount. Your municipality will continue to receive 49% State reimbursement for eligible detention services expenditures up to the capped allocation amount. If your municipality shifts a portion of its detention allocation into its STSJP plan, your municipality will receive 62% State reimbursement, up to the capped allocation, if such shifted funds are spent on STSJP eligible expenditures. A municipality may make a detention allocation shift at the time of the STSJP plan submission or up until June 30, 2024, unless otherwise approved by the Office of Children and Family Services.

If the County plans to shift its detention allocation for STSJP eligible expenses, please submit a request on official letterhead to Lynn Tubbs and email it to stsjp@ocfs.ny.gov outlining:

1. the amount that will be shifted and
2. the type of programming or services the re-purposed detention funds will be used for under STSJP.

Once the shift is approved, an amended STSJP plan will need to be submitted.

As a reminder, to access RTA reimbursement that a municipality may be eligible for, the expenditures must be specifically included in a locality's comprehensive RTA plan.

All STSJP claims, inclusive of STSJP-RTA, must be submitted electronically via the Juvenile Detention Automated System (JDAS) for the service period of October 1, 2023, to September 30, 2024. Questions on all aspects of the claiming process should be directed to the STSJP mailbox at stsjp@ocfs.ny.gov with the subject line: "STSJP Claiming Questions".

If you have any STSJP plan questions, please also email us at stsjp@ocfs.ny.gov and write "STSJP Plan Questions" in the subject line or reach out to Lynn Tubbs at (518) 473-9116.

Thank you for your continued partnership as we reform the juvenile justice practices in New York State by safely engaging youth and their families through innovative programming to reduce out of home placement and detention of youth.

Sincerely,



Nina Aledort, PhD
Deputy Commissioner

cc: Sharon Devine, OCFS Deputy Commissioner for Administration
Lynn Tubbs, Director of Cross-System Supports, YDAPS
OCFS Child Welfare and Community Services Regional Office Directors
Municipality STSJP Lead

NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
SUPERVISION AND TREATMENT SERVICES
FOR JUVENILES PROGRAM (STSJP) - WITH ROLLOVER
ANNUAL PLAN FOR PROGRAM YEAR OCTOBER 1, 2023 – SEPTEMBER 30, 2024

SUBMITTING MUNICIPALITY CONTACT INFORMATION

Name of applicant county, counties, or jurisdiction: St. Lawrence County

Lead agency for STSJP submission: Department of Social Services

Contact person's name: Heather Rand

Title: Director of Services

Phone: (315) 379-2706

Ext:

Email: Heather.Rand@dfa.state.ny.us

PLAN SUBMISSION INSTRUCTIONS

STSJP plans are due to the Office of Children and Family Services (OCFS) by 08 / 04 / 2023

1. Once you have opened this form on your computer, please use the "Save As" function to save a copy with the following file name: "STSJP 2023-2024 Annual Plan – [ex. Municipality Name]."
2. Work from the copy saved in Step 1 as you record your municipality information. Save your work as you complete each section.
3. Email the completed application to OCFS at stsjp@ocfs.ny.gov. Use the subject line "STSJP 2023-2024 Annual Plan – [Municipality Name]" to facilitate timely review of your plan.

Please direct any STSJP plan questions to the STSJP mailbox at: stsjp@ocfs.ny.gov, or you may contact Geneva Hilliard 518-486-1819 or Lynn Tubbs 518-473-9116.

NOTE: Cooperative Applications submitted jointly by two or more counties

Two or more eligible local jurisdictions (counties) may join together to establish, operate, and maintain STSJP programs, and may enter into agreements in connection therewith. Counties submitting such applications must provide additional information under **Part I - Municipality Level Details, Section C. Cooperative Application.**

PART I – MUNICIPALITY LEVEL DETAILS

A. Municipality Level Analysis

1. (a) Identify the communities or neighborhoods (ZIP codes) from which the highest number of Youthful Offenders (YO), Adolescent Offenders (AO), Juvenile Offenders (JO), Juvenile Delinquents (JD), and Persons in Need of Supervision (PINS) enter the youth justice system, are remanded to detention, and/or are residentially placed; and (b) Discuss what factors may be contributing to these high numbers:

Areas of St. Lawrence County from which youth enter the Juvenile Justice System are the towns of Massena (13662), Ogdensburg(13669), and Norwood (13668). The factors contributing to these issues include a lack of appropriate activities for the teen population, increasing access to drugs and alcohol, poor parental supervision, as well as opportunities to become involved in small scale drug trafficking through association with individuals coming to the area from urban areas with the purpose to distribute. Many of the youth entering the system have chosen this way of making money as other jobs available to them pay minimum wage and offer little incentive.

2. Resources available at the following link can help you answer these questions:

<https://www.ocfs.ny.gov/programs/youth/stsjp/planning.php>

- (a) In the charts below, please provide the municipality's distributions by race, ethnicity, and sex assigned at birth for the general population of youth younger than 18, and for the detained and placed population of youth. For the placement admissions data, please add together county data from Tables 1b-Total OCFS Facility Admissions by Sex, Race/Ethnicity and Age, 6b-JD Foster Care Admissions by Sex, Race/Ethnicity and Age and 7b-PINS Post-Dispositional Foster Care Admissions by Sex, Race/Ethnicity and Age from [Annual Out of Home Placement Admissions Data Packet](#)

Race/Ethnicity	2020 General Population <18 years		2022 Detention Admissions		2022 Placement Admissions	
	#	%	#	%	#	%
Black/African American	346	2	0	0	0	0
White	20021	94	3	100	4	100
Native American/Alaskan	248	1	0	0		
Asian/Pacific Islander	239	1	0	0		
Hispanic	542	3	0	0	0	0

Sex Assigned at Birth	2020 General Population <18 years		2022 Detention Admissions		2022 Placement Admissions	
	#	%	#	%	#	%
Male	11065	52	3	100	4	100
Female	10331	48	0	0	0	0

b) If you identified any disparities when comparing youth representation in the general population and their representation in detention and placement, explain how this plan will address those disparities. If you did not identify any disparities, please note such.

No disparity between youth representation in general population with regard to ethnicity and race. However, all placements were males. This plan will attempt to address this disparity by having programming focusing on the male population in the communities identified.

B. Local Collaboration

1. Legislation requires local collaboration. Please describe your municipality’s activities in developing this year’s STSJP plan in collaboration with local agencies responsible for probation, law enforcement, detention, diversion, social services, courts, service providers, schools, and youth development programs:

The St. Lawrence County Department of Social Services, Probation Department, and Youth Advocate Program collaborate to serve youth and families in the juvenile justice system. Youth Advocate Program works directly with the youth to provide one on one advocacy to assist them in remaining in their home setting and community, while assisting in ensuring they are attending all required appointments with other providers, court hearings, school, and complete community service or restorative justice projects. The youth's engagement in these activities are reported back to DSS and Probation to allow for proper reporting to the courts and further collaboration with area providers.

2. Is your municipality gathering participant youth and family feedback as part of your STSJP plan development?

Yes. (If yes, please describe how the plan incorporates that feedback at the system level, e.g., funding and service continuum decisions.)

No. (If no, please describe the barriers to implementation and the municipality's solutions to develop such feedback mechanism during PY 2023-2024.)

Feedback is gathered through interviews with participants and their families at the beginning and end of service involvement. Feedback is also requested from other providers working with the family during the time of service provision. The feedback is, and will continue to be, used for the further development of the program to meet specific needs of each family and in each municipality. Further, this information is used to collaborate with other providers to develop needed programming for these youth to assist them in having a future without legal system need for involvement.

3. Was community feedback in low opportunity ZIP codes sought as part of the STSJP plan development?
 Yes. (If yes, please describe how the plan incorporates that feedback at the system level, e.g., funding and service continuum decisions.)
 No. (If no, please describe the barriers to implementation and the municipality's solutions to develop such feedback mechanism during PY 2023-2024.)

Since completion of the last annual report, we have invited community partners, including Probation Department, Youth Advocate Program, the St. Lawrence County Youth Bureau, Boys and Girls Club of Ogdensburg, and area school districts to enhance collaboration and strengthen community cohesiveness in the area of Massena, Ogdensburg, Gouverneur, Waddington, Madrid, and Norwood-Norfolk, NY. In addition, we are working with these agencies to explore new programs to aid in the creation of engagement activities to support youth exhibiting juvenile delinquent type behaviors, antisocial behaviors, mental health concerns, and substance abuse. These partnerships will continue to be built throughout the 2023-2024 program year, and will continue to inform STSJP plan development in the future.

C. Cooperative Application *(Complete this section only if this is a joint application.)*

1. Describe the provisions for the proportionate cost to be borne by each county:

2. Describe how personnel will be compensated across and between counties in the cooperative:

3. Will a single fiscal officer be the custodian of the funds made available for STSJP?
 Yes. (If yes, please provide their contact details below.)
 No. (If no, skip to Q.4.)

Officer's Name:		Title:	
Phone: ()	Ext:	Email:	

4. Provide the name and email address of the person who will be responsible for collecting and submitting STSJP data for jointly funded programs, as well as the names and email addresses of the fiscal officers responsible for jointly funded programs:

PART II – PROGRAM LEVEL DETAILS

PROGRAM	1
A. Program 1 Contact Information	
Program 1 Name: Youth Empowerment Services	
Operating Agency: Youth Advocate Program	
Program Mailing Address: 3 Remington Ave.	
Address Line 2: Suite 4	
City: Canton	State: NY ZIP Code: 13617
Program Contact's Name: Teena Pelkey	Title: Director
Phone: (315) 379-0518	Ext: Email: tpelkey@yapinc.org
B. Program 1 Description and Target Population	
1. A Family Support Services (FSS) program may ONLY serve youth at risk of becoming, alleged to be, or adjudicated as PINS; or children under 12 years of age who do not meet the definition of a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the Family Court Act (FCA). This program meets the legal definition of an FSS program (Social Services Law Section 458-m) and will operate in this capacity for PY 2023-2024. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2023-2024:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Early Intervention (EI)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Alternative to Detention/Pre-Dispositional Placement (ATD/ATPDP)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Alternative to Placement (ATP)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Reentry/Aftercare (R/A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

***Note:** If you indicated this program will operate as an FSS, it cannot provide STSJP-RTA services under this program. Additionally, children under 12 years of age who do not meet the definition of either a PINS or a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the FCA, may only be served through the Prevention and Early Intervention service domains.

3. Please list the ZIP codes this program will target:
13617, 13642, 13662, 13668, 13669, 13676, 13697

4. Describe the program, including how it is family focused. If you answered "Yes" to Q.1. Family Support Services program, be sure to demonstrate how your program meets each requirement of the legislation. Also, please explain how each of the service types selected in Q.2. will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them. (Please refer to the *STSJP Annual Plan Development Guide* for additional guidance.)

This program will be utilized for non-RTA and RTA youth who are receiving diversion/adjustment services as an alternative to detention/pre-dispositional placement during the pendency of their case, or post-dispositionally as an alternative to placement or to support youth re-entering the community from placement. YAP will receive referrals from the St. Lawrence County Department of Social Services and Probation Department. The YAP trauma informed and strength based models are family and youth driven and focused. The program will provide services to this population by assessing needs, using a wrap-around approach (includes daily check-ins, school attendance support, transportation to court and other services, reminders and preparation for court, appointment services, school, referrals for services and support, intensive crisis planning for youth and families, reintegration planning for youth returning to the community from placement, and ensuring that the youth and family have safe housing and resources to support them.) The program also provides supportive employment and a community service program for the youth. YAP participates in bi-weekly permanency planning meetings to ensure that all stakeholders are moving toward permanency goals for youth who are receiving services through re-entry/aftercare. The Youth Advocate Program will use funds allotted to develop a tailored Independent Living Skills Program to be completed by all STSJP youth over the age of 14. This includes a multi-week, hands on program for youth directly working with an advocate to learn the skills identified in real world settings. The program is structured in a 12 domain model. Each youth in the program will have a core set of topics that are required, then are able to choose from several "elective" topics to total 12 domains. This allows for the individualized approach for each youth to learn the skills that are meaningful to them. Funds are used to purchase materials needed for each lesson and reimbursement of staff working with youth.

5. Is the program capable of being replicated across multiple locations? Yes No

C. Program 1 Performance History (Refer to your municipality's STSJP data files.)

1. What, if any, funding did this program receive in PY 2022-2023? If the program was approved in PY 2022-2023 but was not implemented or is anticipated to serve no youth, please choose None.

None (If none, skip to section D.) STSJP STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP	0	4	3	6	3	16
STSJP-RTA	0	0	0	0	1	1
Total	0	4	3	6	4	17

3. Based on the program’s record of youth served, do you anticipate this program serving more or less than its projected capacity on 9/30/2023? Please explain:

It is anticipated that the same number of youth will be served in the 2023-24 program year. The number of youth provided with services in the 2022-23 year is expected to be on target with the projected outcomes.

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type				
	P	EI	ATD/ATPDP	ATP	R/A
STSJP	0	140	428	0	365
STSJP-RTA	0	0	0	0	0

5. How does the average length of service compare to what you would expect for that service type? For ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and residential placements during the same time period.

Average length of stay for each service type is proportionate to the services available in the youths home communities. Many youth served have a period of several months while matters are pending in court, then placed on up to 12 months of court supervision or placement. There is a slight difference in length of stay for those placed in detention vs. being placed residentially which is most often due to the length of the orders of the court, conditions that are expected to be met by the referral authority with various service providers, and whether any further offense was committed.

6. Will this program’s outcomes meet the PY 2022-2023 projected goals by 9/30/2023?

Yes. (If yes, skip to section D.) Partially No

7. (a) What outcomes are on track to meet the goals set for PY 2022-2023?

(b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2022-2023?

(b) Please describe any contributing barriers:

9. What changes have been made to overcome the barriers identified in Q.8. so that the program can achieve its desired goals for PY 2023-2024?

D. Program 1 Service Projections for PY 2023-2024

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2023-2024. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP	0	3	2	8	6	19
STSJP-RTA	0	6	3	5	6	20
Total	0	9	5	13	12	39

PROGRAM 2

A. Program 2 Contact Information

Program 2 Name: _____

Operating Agency: _____

Program Mailing Address: _____

Address Line 2: _____

City: _____ State: **NY** Zip Code: _____

Program Contact's Name: _____ Title: _____

Phone: () _____ Ext.: () _____ Email: _____

B. Program 2 Description and Target Population

1. A Family Support Services (FSS) program may ONLY serve youth at risk of becoming, alleged to be, or adjudicated as PINS; or children under 12 years of age who do not meet the definition of a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the Family Court Act (FCA). This program meets the legal definition of an FSS program (Social Services Law Section 458-m) and will operate in this capacity for PY 2023-2024.

Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2023-2024:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention/Pre-Dispositional Placement (ATD/ATPDP)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry/Aftercare (R/A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

***Note:** If you indicated this program will operate as an FSS, it cannot provide STSJP-RTA services under this program. Additionally, children under 12 years of age who do not meet the definition of either a PINS or a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the FCA, may only be served through the Prevention and Early Intervention service domains.

3. Please list the ZIP codes this program will target: _____

4. Describe the program, including how it is family focused. If you answered "Yes" to Q.1. Family Support Services program, be sure to demonstrate how your program meets each requirement of the legislation. Also, please explain how each of the service types selected in Q.2. will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them. (Please refer to the *STSJP Annual Plan Development Guide* for additional guidance.)

5. Is the program capable of being replicated across multiple locations? Yes No

C. Program 2 Performance History (Refer to your municipality's STSJP data files.)

1. What, if any, funding did this program receive in PY 2022-2023? If the program was approved in PY 2022-2023 but was not implemented or is anticipated to serve no youth, please choose None.
 None (If none, skip to section D.) STSJJP STSJJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJJP						
STSJJP-RTA						
Total						

3. Based on the program's record of youth served, do you anticipate this program serving more or less than its projected capacity on 9/30/2023? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type				
	P	EI	ATD/ATPDP	ATP	R/A
STSJJP					
STSJJP-RTA					

5. How does the average length of service compare to what you would expect for that service type? For ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and residential placements during the same time period.

6. Will this program's outcomes meet the PY 2022-2023 projected goals by 9/30/2023?
 Yes. (If yes, skip to section D.) Partially No

7. (a) What outcomes are on track to meet the goals set for PY 2022-2023?
 (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2022-2023?
 (b) Please describe any contributing barriers:

9. What changes have been made to overcome the barriers identified in Q.8. so that the program can achieve its desired goals for PY 2023-2024?

Program 2 Service Projections for PY 2023-2024

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2023-2024. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJJP						
STSJJP-RTA						
Total						

PROGRAM	3
----------------	----------

A. Program 3 Contact Information

Program 3 Name:		
Operating Agency:		
Program Mailing Address:		
Address Line 2:		
City:	State: NY	ZIP Code:
Program Contact's Name:		Title:
Phone: ()	Ext:	Email:

B. Program 3 Description and Target Population

1. A Family Support Services (FSS) program may ONLY serve youth at risk of becoming, alleged to be, or adjudicated as PINS; or children under 12 years of age who do not meet the definition of a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the Family Court Act (FCA). This program meets the legal definition of an FSS program (Social Services Law Section 458-m) and will operate in this capacity for PY 2023-2024.

Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2023-2024:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention/Pre-Dispositional Placement (ATD/ATPDP)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry/Aftercare (R/A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

***Note:** If you indicated this program will operate as an FSS, it cannot provide STSJP-RTA services under this program. Additionally, children under 12 years of age who do not meet the definition of either a PINS or a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the FCA, may only be served through the Prevention and Early Intervention service domains.

3. Please list the ZIP codes this program will target:

4. Describe the program, including how it is family focused. If you answered "Yes" to Q.1. Family Support Services program, be sure to demonstrate how your program meets each requirement of the legislation. Also, please explain how each of the service types selected in Q.2. will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them. (Please refer to the *STSJP Annual Plan Development Guide* for additional guidance.)

5. Is the program capable of being replicated across multiple locations? Yes No

C. Program 3 Performance History (Refer to your municipality's STSJP data files.)

1. What, if any, funding did this program receive in PY 2022-2023? If the program was approved in PY 2022-2023 but was not implemented or is anticipated to serve no youth, please choose None.

None (If none, skip to section D.) STSJP STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

3. Based on the program’s record of youth served, do you anticipate this program serving more or less than its projected capacity on 9/30/2023? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type				
	P	EI	ATD/ATPDP	ATP	R/A
STSJP					
STSJP-RTA					

5. How does the average length of service compare to what you would expect for that service type? For ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and residential placements during the same time period.

6. Will this program’s outcomes meet the PY 2022-2023 projected goals by 9/30/2023?

Yes. (If yes, skip to section D.) Partially No

7. (a) What outcomes are on track to meet the goals set for PY 2022-2023?

(b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2022-2023?

(b) Please describe any contributing barriers:

9. What changes have been made to overcome the barriers identified in Q.8. so that the program can achieve its desired goals for PY 2023-2024?

D. Program 3 Service Projections for PY 2023-2024

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2023-2024. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

PROGRAM	4																					
A. Program 4 Contact Information																						
Program 4 Name:																						
Operating Agency:																						
Program Mailing Address:																						
Address Line 2:																						
City:	State: NY Zip Code:																					
Program Contact's Name:																						
Title:																						
Phone: ()	Ext.: () Email:																					
B. Program 4 Description and Target Population																						
<p>1. A Family Support Services (FSS) program may ONLY serve youth at risk of becoming, alleged to be, or adjudicated as PINS; or children under 12 years of age who do not meet the definition of a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the Family Court Act (FCA). This program meets the legal definition of an FSS program (Social Services Law Section 458-m) and will operate in this capacity for PY 2023-2024.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>																						
<p>2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2023-2024:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #d9d9e9;"> <th style="width: 10%;">STSJP</th> <th style="width: 10%;">STSJP-RTA</th> <th style="width: 80%;"></th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Prevention (P)</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Early Intervention (EI)</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Alternative to Detention/Pre-Dispositional Placement (ATD/ATPDP)</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Alternative to Placement (ATP)</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Reentry/Aftercare (R/A)</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Indirect Services</td> </tr> </tbody> </table> <p>*Note: If you indicated this program will operate as an FSS, it cannot provide STSJP-RTA services under this program. Additionally, children under 12 years of age who do not meet the definition of either a PINS or a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the FCA, may only be served through the Prevention and Early Intervention service domains.</p>		STSJP	STSJP-RTA		<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)	<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)	<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention/Pre-Dispositional Placement (ATD/ATPDP)	<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)	<input type="checkbox"/>	<input type="checkbox"/>	Reentry/Aftercare (R/A)	<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services
STSJP	STSJP-RTA																					
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)																				
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)																				
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention/Pre-Dispositional Placement (ATD/ATPDP)																				
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)																				
<input type="checkbox"/>	<input type="checkbox"/>	Reentry/Aftercare (R/A)																				
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services																				
<p>3. Please list the ZIP codes this program will target:</p>																						
<p>4. Describe the program, including how it is family focused. If you answered "Yes" to Q.1. Family Support Services program, be sure to demonstrate how your program meets each requirement of the legislation. Also, please explain how each of the service types selected in Q.2. will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them. (Please refer to the <i>STSJP Annual Plan Development Guide</i> for additional guidance.)</p>																						
<p>5. Is the program capable of being replicated across multiple locations? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>																						
C. Program 4 Performance History (Refer to your municipality's STSJP data files.)																						
<p>1. What, if any, funding did this program receive in PY 2022-2023? If the program was approved in PY 2022-2023 but was not implemented or is anticipated to serve no youth, please choose None.</p> <p><input type="checkbox"/> None (If none, skip to section D.) <input type="checkbox"/> STSJP <input type="checkbox"/> STSJP-RTA</p>																						

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

3. Based on the program’s record of youth served, do you anticipate this program serving more or less than its projected capacity on 9/30/2023? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type				
	P	EI	ATD/ATPDP	ATP	R/A
STSJP					
STSJP-RTA					

5. How does the average length of service compare to what you would expect for that service type? For ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and residential placements during the same time period.

6. Will this program’s outcomes meet the PY 2022-2023 projected goals by 9/30/2023?

Yes. (If yes, skip to section D.) Partially No

7. (a) What outcomes are on track to meet the goals set for PY 2022-2023?

(b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2022-2023?

(b) Please describe any contributing barriers:

9. What changes have been made to overcome the barriers identified in Q.8. so that the program can achieve its desired goals for PY 2023-2024?

D. Program 4 Service Projections for PY 2023-2024

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2023-2024. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

PROGRAM 5

A. Program 5 Contact Information

Program 5 Name: _____

Operating Agency: _____

Program Mailing Address: _____

Address Line 2: _____

City: _____	State: NY	Zip Code: _____
Program Contact's Name: _____		Title: _____
Phone: () _____	Ext.: () _____	Email: _____

B. Program 5 Description and Target Population

1. A Family Support Services (FSS) program may ONLY serve youth at risk of becoming, alleged to be, or adjudicated as PINS; or children under 12 years of age who do not meet the definition of a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the Family Court Act (FCA). This program meets the legal definition of an FSS program (Social Services Law Section 458-m) and will operate in this capacity for PY 2023-2024.

Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2023-2024:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention/Pre-Dispositional Placement (ATD/ATPDP)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry/Aftercare (R/A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

***Note:** If you indicated this program will operate as an FSS, it cannot provide STSJP-RTA services under this program. Additionally, children under 12 years of age who do not meet the definition of either a PINS or a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the FCA, may only be served through the Prevention and Early Intervention service domains.

3. Please list the ZIP codes this program will target: _____

4. Describe the program, including how it is family focused. If you answered "Yes" to Q.1. Family Support Services program, be sure to demonstrate how your program meets each requirement of the legislation. Also, please explain how each of the service types selected in Q.2. will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them. (Please refer to the *STSJP Annual Plan Development Guide* for additional guidance.)

5. Is the program capable of being replicated across multiple locations? Yes No

C. Program 5 Performance History (Refer to your municipality's STSJP data files.)

1. What, if any, funding did this program receive in PY 2022-2023? If the program was approved in PY 2022-2023 but was not implemented or is anticipated to serve no youth, please choose None.

None (If none, skip to section D.) STSJP STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

3. Based on the program's record of youth served, do you anticipate this program serving more or less than its projected capacity on 9/30/2023? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type				
	P	EI	ATD/ATPDP	ATP	R/A
STSJP					
STSJP-RTA					

5. How does the average length of service compare to what you would expect for that service type? For ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and residential placements during the same time period.

6. Will this program's outcomes meet the PY 2022-2023 projected goals by 9/30/2023?

Yes. (If yes, skip to section D.) Partially No

7. (a) What outcomes are on track to meet the goals set for PY 2022-2023?

(b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2022-2023?

(b) Please describe any contributing barriers:

9. What changes have been made to overcome the barriers identified in Q.8. so that the program can achieve its desired goals for PY 2023-2024?

D. Program 5 Service Projections for PY 2023-2024

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2023-2024. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

PROGRAM	6
----------------	----------

A. Program 6 Contact Information

Program 6 Name:		
Operating Agency:		
Program Mailing Address:		
Address Line 2:		
City:	State: NY	Zip Code:
Program Contact's Name:		Title:
Phone: ()	Ext.: ()	Email:

B. Program 6 Description and Target Population

1. A Family Support Services (FSS) program may ONLY serve youth at risk of becoming, alleged to be, or adjudicated as PINS; or children under 12 years of age who do not meet the definition of a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the Family Court Act (FCA). This program meets the legal definition of an FSS program (Social Services Law Section 458-m) and will operate in this capacity for PY 2023-2024.
 Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2023-2024:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention/Pre-Dispositional Placement (ATD/ATPDP)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry/Aftercare (R/A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

***Note:** If you indicated this program will operate as an FSS, it cannot provide STSJP-RTA services under this program. Additionally, children under 12 years of age who do not meet the definition of either a PINS or a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the FCA, may only be served through the Prevention and Early Intervention service domains.

3. Please list the ZIP codes this program will target:

4. Describe the program, including how it is family focused. If you answered "Yes" to Q.1. Family Support Services program, be sure to demonstrate how your program meets each requirement of the legislation. Also, please explain how each of the service types selected in Q.2. will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them. (Please refer to the *STSJP Annual Plan Development Guide* for additional guidance.)

5. Is the program capable of being replicated across multiple locations? Yes No

C. Program 6 Performance History (Refer to your municipality's STSJP data files.)

1. What, if any, funding did this program receive in PY 2022-2023? If the program was approved in PY 2022-2023 but was not implemented or is anticipated to serve no youth, please choose None.
 None (If none, skip to section D.) STSJP STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

3. Based on the program’s record of youth served, do you anticipate this program serving more or less than its projected capacity on 9/30/2023? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type				
	P	EI	ATD/ATPDP	ATP	R/A
STSJP					
STSJP-RTA					

5. How does the average length of service compare to what you would expect for that service type? For ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and residential placements during the same time period.

6. Will this program’s outcomes meet the PY 2022-2023 projected goals by 9/30/2023?
 Yes. (If yes, skip to section D.) Partially No

7. (a) What outcomes are on track to meet the goals set for PY 2022-2023?
 (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2022-2023?
 (b) Please describe any contributing barriers:

9. What changes have been made to overcome the barriers identified in Q.8. so that the program can achieve its desired goals for PY 2023-2024?

D. Program 6 Service Projections for PY 2023-2024

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2023-2024. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

PROGRAM 7

A. Program 7 Contact Information

Program 7 Name: _____

Operating Agency: _____

Program Mailing Address: _____

Address Line 2: _____

City: _____ State: **NY** Zip Code: _____

Program Contact's Name: _____ Title: _____

Phone: () _____ Ext.: () _____ Email: _____

B. Program 7 Description and Target Population

1. A Family Support Services (FSS) program may ONLY serve youth at risk of becoming, alleged to be, or adjudicated as PINS; or children under 12 years of age who do not meet the definition of a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the Family Court Act (FCA). This program meets the legal definition of an FSS program (Social Services Law Section 458-m) and will operate in this capacity for PY 2023-2024.

Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2023-2024:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention/Pre-Dispositional Placement (ATD/ATPDP)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry/Aftercare (R/A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

***Note:** If you indicated this program will operate as an FSS, it cannot provide STSJP-RTA services under this program. Additionally, children under 12 years of age who do not meet the definition of either a PINS or a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the FCA, may only be served through the Prevention and Early Intervention service domains.

3. Please list the ZIP codes this program will target: _____

4. Describe the program, including how it is family focused. If you answered "Yes" to Q.1. Family Support Services program, be sure to demonstrate how your program meets each requirement of the legislation. Also, please explain how each of the service types selected in Q.2. will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them. (Please refer to the *STSJP Annual Plan Development Guide* for additional guidance.)

5. Is the program capable of being replicated across multiple locations? Yes No

C. Program 7 Performance History (Refer to your municipality's STSJP data files.)

1. What, if any, funding did this program receive in PY 2022-2023? If the program was approved in PY 2022-2023 but was not implemented or is anticipated to serve no youth, please choose None.

None (If none, skip to section D.) STSJP STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

3. Based on the program's record of youth served, do you anticipate this program serving more or less than its projected capacity on 9/30/2023? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type				
	P	EI	ATD/ATPDP	ATP	R/A
STSJP					
STSJP-RTA					

5. How does the average length of service compare to what you would expect for that service type? For ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and residential placements during the same time period.

6. Will this program's outcomes meet the PY 2022-2023 projected goals by 9/30/2023?
 Yes. (If yes, skip to section D.) Partially No

7. (a) What outcomes are on track to meet the goals set for PY 2022-2023?
 (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2022-2023?
 (b) Please describe any contributing barriers:

9. What changes have been made to overcome the barriers identified in Q.8. so that the program can achieve its desired goals for PY 2023-2024?

D. Program 7 Service Projections for PY 2023-2024

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2023-2024. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

PROGRAM 8

A. Program 8 Contact Information

Program 8 Name: _____

Operating Agency: _____

Program Mailing Address: _____

Address Line 2: _____

City: _____ State: **NY** Zip Code: _____

Program Contact's Name: _____ Title: _____

Phone: () _____ Ext.: () _____ Email: _____

B. Program 8 Description and Target Population

1. A Family Support Services (FSS) program may ONLY serve youth at risk of becoming, alleged to be, or adjudicated as PINS; or children under 12 years of age who do not meet the definition of a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the Family Court Act (FCA). This program meets the legal definition of an FSS program (Social Services Law Section 458-m) and will operate in this capacity for PY 2023-2024.

Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2023-2024:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention/Pre-Dispositional Placement (ATD/ATPDP)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry/Aftercare (R/A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

***Note:** If you indicated this program will operate as an FSS, it cannot provide STSJP-RTA services under this program. Additionally, children under 12 years of age who do not meet the definition of either a PINS or a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the FCA, may only be served through the Prevention and Early Intervention service domains.

3. Please list the ZIP codes this program will target: _____

4. Describe the program, including how it is family focused. If you answered "Yes" to Q.1. Family Support Services program, be sure to demonstrate how your program meets each requirement of the legislation. Also, please explain how each of the service types selected in Q.2. will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them. (Please refer to the *STSJP Annual Plan Development Guide* for additional guidance.)

5. Is the program capable of being replicated across multiple locations? Yes No

C. Program 8 Performance History (Refer to your municipality's STSJP data files.)

1. What, if any, funding did this program receive in PY 2022-2023? If the program was approved in PY 2022-2023 but was not implemented or is anticipated to serve no youth, please choose None.

None (If none, skip to section D.) STSJP STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

3. Based on the program's record of youth served, do you anticipate this program serving more or less than its projected capacity on 9/30/2023? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type				
	P	EI	ATD/ATPDP	ATP	R/A
STSJP					
STSJP-RTA					

5. How does the average length of service compare to what you would expect for that service type? For ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and residential placements during the same time period.

6. Will this program's outcomes meet the PY 2022-2023 projected goals by 9/30/2023?
 Yes. (If yes, skip to section D.) Partially No

7. (a) What outcomes are on track to meet the goals set for PY 2022-2023?
 (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2022-2023?
 (b) Please describe any contributing barriers:

9. What changes have been made to overcome the barriers identified in Q.8. so that the program can achieve its desired goals for PY 2023-2024?

D. Program 8 Service Projections for PY 2023-2024

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2023-2024. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

PROGRAM 9

A. Program 9 Contact Information

Program 9 Name: _____

Operating Agency: _____

Program Mailing Address: _____

Address Line 2: _____

City: _____ State: **NY** Zip Code: _____

Program Contact's Name: _____ Title: _____

Phone: () _____ Ext.: () _____ Email: _____

Program 9 Description and Target Population

1. A Family Support Services (FSS) program may ONLY serve youth at risk of becoming, alleged to be, or adjudicated as PINS; or children under 12 years of age who do not meet the definition of a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the Family Court Act (FCA). This program meets the legal definition of an FSS program (Social Services Law Section 458-m) and will operate in this capacity for PY 2023-2024.

Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2023-2024:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention/Pre-Dispositional Placement (ATD/ATPDP)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry/Aftercare (R/A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

***Note:** If you indicated this program will operate as an FSS, it cannot provide STSJP-RTA services under this program. Additionally, children under 12 years of age who do not meet the definition of either a PINS or a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the FCA, may only be served through the Prevention and Early Intervention service domains.

3. Please list the ZIP codes this program will target: _____

4. Describe the program, including how it is family focused. If you answered "Yes" to Q.1. Family Support Services program, be sure to demonstrate how your program meets each requirement of the legislation. Also, please explain how each of the service types selected in Q.2. will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them. (Please refer to the *STSJP Annual Plan Development Guide* for additional guidance.)

5. Is the program capable of being replicated across multiple locations? Yes No

Program 9 Performance History (Refer to your municipality's STSJP data files.)

1. What, if any, funding did this program receive in PY 2022-2023? If the program was approved in PY 2022-2023 but was not implemented or is anticipated to serve no youth, please choose None.

None (If none, skip to section D.) STSJP STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

3. Based on the program’s record of youth served, do you anticipate this program serving more or less than its projected capacity on 9/30/2023? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type				
	P	EI	ATD/ATPDP	ATP	R/A
STSJP					
STSJP-RTA					

5. How does the average length of service compare to what you would expect for that service type? For ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and residential placements during the same time period.

6. Will this program’s outcomes meet the PY 2022-2023 projected goals by 9/30/2023?
 Yes. (If yes, skip to section D.) Partially No

7. (a) What outcomes are on track to meet the goals set for PY 2022-2023?
 (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2022-2023?
 (b) Please describe any contributing barriers:

9. What changes have been made to overcome the barriers identified in Q.8. so that the program can achieve its desired goals for PY 2023-2024?

Program 9 Service Projections for PY 2023-2024

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2023-2024. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

PROGRAM 10

A. Program 10 Contact Information

Program 10 Name:

Operating Agency:

Program Mailing Address:

Address Line 2:

City: State: **NY** Zip Code:

Program Contact's Name: Title:

Phone: () Ext.: () Email:

Program 10 Description and Target Population

1. A Family Support Services (FSS) program may ONLY serve youth at risk of becoming, alleged to be, or adjudicated as PINS; or children under 12 years of age who do not meet the definition of a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the Family Court Act (FCA). This program meets the legal definition of an FSS program (Social Services Law Section 458-m) and will operate in this capacity for PY 2023-2024.

Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2023-2024:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention/Pre-Dispositional Placement (ATD/ATPDP)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry/Aftercare (R/A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

***Note:** If you indicated this program will operate as an FSS, it cannot provide STSJP-RTA services under this program. Additionally, children under 12 years of age who do not meet the definition of either a PINS or a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the FCA, may only be served through the Prevention and Early Intervention service domains.

3. Please list the ZIP codes this program will target:

4. Describe the program, including how it is family focused. If you answered "Yes" to Q.1. Family Support Services program, be sure to demonstrate how your program meets each requirement of the legislation. Also, please explain how each of the service types selected in Q.2. will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them. (Please refer to the *STSJP Annual Plan Development Guide* for additional guidance.)

5. Is the program capable of being replicated across multiple locations? Yes No

Program 10 Performance History (Refer to your municipality's STSJP data files.)

1. What, if any, funding did this program receive in PY 2022-2023? If the program was approved in PY 2022-2023 but was not implemented or is anticipated to serve no youth, please choose None.

None (If none, skip to section D.) STSJP STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

3. Based on the program’s record of youth served, do you anticipate this program serving more or less than its projected capacity on 9/30/2023? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type				
	P	EI	ATD/ATPDP	ATP	R/A
STSJP					
STSJP-RTA					

5. How does the average length of service compare to what you would expect for that service type? For ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and residential placements during the same time period.

6. Will this program’s outcomes meet the PY 2022-2023 projected goals by 9/30/2023?
 Yes. (If yes, skip to section D.) Partially No

7. (a) What outcomes are on track to meet the goals set for PY 2022-2023?
 (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2022-2023?
 (b) Please describe any contributing barriers:

9. What changes have been made to overcome the barriers identified in Q.8. so that the program can achieve its desired goals for PY 2023-2024?

Program 10 Service Projections for PY 2023-2024

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2023-2024. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

PROGRAM 11

A. Program 11 Contact Information

Program 11 Name:

Operating Agency:

Program Mailing Address:

Address Line 2:

City:	State: NY	Zip Code:
Program Contact's Name:	Title:	
Phone: ()	Ext.: ()	Email:

Program 11 Description and Target Population

1. A Family Support Services (FSS) program may ONLY serve youth at risk of becoming, alleged to be, or adjudicated as PINS; or children under 12 years of age who do not meet the definition of a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the Family Court Act (FCA). This program meets the legal definition of an FSS program (Social Services Law Section 458-m) and will operate in this capacity for PY 2023-2024.

Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2023-2024:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention/Pre-Dispositional Placement (ATD/ATPDP)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry/Aftercare (R/A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

***Note:** If you indicated this program will operate as an FSS, it cannot provide STSJP-RTA services under this program. Additionally, children under 12 years of age who do not meet the definition of either a PINS or a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the FCA, may only be served through the Prevention and Early Intervention service domains.

3. Please list the ZIP codes this program will target:

4. Describe the program, including how it is family focused. If you answered "Yes" to Q.1. Family Support Services program, be sure to demonstrate how your program meets each requirement of the legislation. Also, please explain how each of the service types selected in Q.2. will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them. (Please refer to the *STSJP Annual Plan Development Guide* for additional guidance.)

5. Is the program capable of being replicated across multiple locations? Yes No

Program 11 Performance History (Refer to your municipality's STSJP data files.)

1. What, if any, funding did this program receive in PY 2022-2023? If the program was approved in PY 2022-2023 but was not implemented or is anticipated to serve no youth, please choose None.

None (If none, skip to section D.) STSJP STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

3. Based on the program’s record of youth served, do you anticipate this program serving more or less than its projected capacity on 9/30/2023? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type				
	P	EI	ATD/ATPDP	ATP	R/A
STSJP					
STSJP-RTA					

5. How does the average length of service compare to what you would expect for that service type? For ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and residential placements during the same time period.

6. Will this program’s outcomes meet the PY 2022-2023 projected goals by 9/30/2023?

- Yes. (If yes, skip to section D.) Partially No

7. (a) What outcomes are on track to meet the goals set for PY 2022-2023?
 (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2022-2023?
 (b) Please describe any contributing barriers:

9. What changes have been made to overcome the barriers identified in Q.8. so that the program can achieve its desired goals for PY 2023-2024?

Program 11 Service Projections for PY 2023-2024

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2023-2024. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

PROGRAM 12

A. Program 12 Contact Information

Program 12 Name:

Operating Agency:

Program Mailing Address:

Address Line 2:

City: State: **NY** Zip Code:

Program Contact's Name: Title:

Phone: () Ext.: () Email:

Program 12 Description and Target Population

1. A Family Support Services (FSS) program may ONLY serve youth at risk of becoming, alleged to be, or adjudicated as PINS; or children under 12 years of age who do not meet the definition of a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the Family Court Act (FCA). This program meets the legal definition of an FSS program (Social Services Law Section 458-m) and will operate in this capacity for PY 2023-2024.
 Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2023-2024:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention/Pre-Dispositional Placement (ATD/ATPDP)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry/Aftercare (R/A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

***Note:** If you indicated this program will operate as an FSS, it cannot provide STSJP-RTA services under this program. Additionally, children under 12 years of age who do not meet the definition of either a PINS or a JD and whose behavior, but for their age, would bring them within the jurisdiction of the family court under Article 3 of the FCA, may only be served through the Prevention and Early Intervention service domains.

3. Please list the ZIP codes this program will target:

4. Describe the program, including how it is family focused. If you answered "Yes" to Q.1. Family Support Services program, be sure to demonstrate how your program meets each requirement of the legislation. Also, please explain how each of the service types selected in Q.2. will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them. (Please refer to the *STSJP Annual Plan Development Guide* for additional guidance.)

5. Is the program capable of being replicated across multiple locations? Yes No

Program 12 Performance History (Refer to your municipality's STSJP data files.)

1. What, if any, funding did this program receive in PY 2022-2023? If the program was approved in PY 2022-2023 but was not implemented or is anticipated to serve no youth, please choose None.
 None (If none, skip to section D.) STSJP STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

3. Based on the program’s record of youth served, do you anticipate this program serving more or less than its projected capacity on 9/30/2023? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2022 and 3/31/2023. Enter zero (0) if not applicable.

Approved Funding	Program Type				
	P	EI	ATD/ATPDP	ATP	R/A
STSJP					
STSJP-RTA					

5. How does the average length of service compare to what you would expect for that service type? For ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and residential placements during the same time period.

6. Will this program’s outcomes meet the PY 2022-2023 projected goals by 9/30/2023?

- Yes. (If yes, skip to section D.) Partially No

7. (a) What outcomes are on track to meet the goals set for PY 2022-2023?
 (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2022-2023?
 (b) Please describe any contributing barriers:

9. What changes have been made to overcome the barriers identified in Q.8. so that the program can achieve its desired goals for PY 2023-2024?

Program 12 Service Projections for PY 2023-2024

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2023-2024. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP						
STSJP-RTA						
Total						

PART III – Goals for PY 2023-2024

Please set the municipality’s goals for its programs to achieve in PY 2023-2024. State-required outcomes have been included with space for you to identify which programs in **Part II-Program Level Details** will serve youth within each service domain. Goals are focused by service type and should reflect the percentage of youth expected to achieve the outcome described. **Note:** Outcomes are only recorded for youth once they have left the program; this may represent a subset of all the youth served during the period. Goals should reflect high, yet realistic, expectations for the programs.

Prevention

(Programs 1 2 3 4 5 6 7 8 9 10 11 12 N/A)

STSJP	STSJP RTA	Outcomes
%	%	of youth will have no PINS referrals during service engagement
%	%	of youth will have no trancies during service engagement
%	%	of youth will have no school suspensions during service engagement
%	%	of youth will have no arrests or probation intakes during service engagement
%	%	of youth will be able to identify at least one accessible, positive adult connection
%	%	of youth will be engaged in at least one positive community activity
%	%	of youth will comply with program rules
%	%	of youth will attend at least 90% of programming

If goal is set below 70% for any outcome please explain:

Early Intervention

(Programs 1 2 3 4 5 6 7 8 9 10 11 12 N/A)

STSJP	STSJP RTA	Outcomes
80 %	80 %	of youth will have no PINS referrals during service engagement
80 %	80 %	of youth will have no trancies during service engagement
80 %	80 %	of youth will have no school suspensions during service engagement
80 %	80 %	of youth will have no arrests or probation intakes during service engagement
80 %	80 %	of youth will have their cases successfully adjusted/diverted during service engagement
100 %	100 %	of youth will be able to identify at least one accessible, positive adult connection
100 %	100 %	of youth will be engaged in at least one positive community activity
80 %	80 %	of youth will comply with program rules
80 %	80 %	of youth will attend at least 90% of programming

If goal is set below 70% for any outcome please explain:

Alternative to Detention/Pre-Dispositional Placement

(Programs 1 2 3 4 5 6 7 8 9 10 11 12 N/A)

STSJP	STSJP RTA	Outcomes
100 %	100 %	of youth will have no missed court appearances during service engagement
80 %	80 %	of youth will have no warrants issued during service engagement
80 %	80 %	of youth will have no arrests or probation intakes during service engagement
80 %	80 %	of youth will have no detention or jail admissions during service engagement
80 %		of PINS will have no pre-dispositional placements during service engagement
100 %	100 %	of youth will be able to identify at least one accessible, positive adult connection
100 %	100 %	of youth will be engaged in at least one positive community activity
80 %	80 %	of youth will comply with program rules
80 %	80 %	of youth will attend at least 90% of programming

If goal is set below 70% for any outcome please explain:

Alternative to Placement		
(Programs <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> N/A)		
STSJP	STSJP RTA	Outcomes
80 %	80 %	of youth will have no warrants issued during service engagement
80 %	80 %	of youth will have no arrests or probation intakes during service engagement
80 %	80 %	of youth will have no detention or jail admissions during service engagement
80 %	████████ %	of PINS will have no pre-dispositional placements during service engagement
80 %	80 %	of youth will have no violations of probation filed during service engagement
80 %	80 %	of youth will have no new placements during service engagement
100 %	100 %	of youth will be able to identify at least one accessible, positive adult connection
100 %	100 %	of youth will be engaged in at least one positive community activity
80 %	80 %	of youth will comply with program rules
80 %	80 %	of youth will attend at least 90% of programming

If goal is set below 70% for any outcome please explain:

Reentry/Aftercare		
(Programs <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> N/A)		
STSJP	STSJP RTA	Outcomes
80 %	80 %	of youth will have no warrants issued during service engagement
80 %	80 %	of youth will have no arrests or probation intakes during service engagement
80 %	80 %	of youth will have no detention or jail admissions during service engagement
80 %	████████ %	of PINS will have no pre-dispositional placements during service engagement
80 %	80 %	of youth will have no new placements during service engagement
80 %	80 %	of youth will have no returns to their previous placements during service engagement
100 %	100 %	of youth will be able to identify at least one accessible, positive adult connection
100 %	100 %	of youth will be engaged in at least one positive community activity
80 %	80 %	of youth will comply with program rules
80 %	80 %	of youth will attend at least 90% of programming

If goal is set below 70% for any outcome please explain:

PART IV – FUNDING							
A. Anticipated Program Expenses and Funding Distribution							
Program Name and Service Types	STSJP						STSJP-RTA
	Detention Allocation Shifted	Approved Rollover	PY23-24 STSJP Allocation	Total Expenses (100%)	Local Share (38%)	State Share (62%)	State Share (100%)
1			\$39,999.94	\$64,516.03	\$24,516.09	\$39,999.94	\$433,084.00
Prevention			\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Early Intervention			\$6,315.78	\$10,186.74	\$3,870.96	\$6,315.78	\$129,925.20
ATD/ATPDP			\$4,210.52	\$6,791.16	\$2,580.64	\$4,210.52	\$64,962.60
ATP			\$16,842.08	\$27,164.65	\$10,322.57	\$16,842.08	\$108,271.00
Reentry/Aftercare			\$12,631.56	\$20,373.48	\$7,741.92	\$12,631.56	\$129,925.20
Indirect			\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2							
Prevention							
Early Intervention							
ATD/ATPDP							
ATP							
Reentry/Aftercare							
Indirect							
3							
Prevention							
Early Intervention							
ATD/ATPDP							
ATP							
Reentry/Aftercare							
Indirect							
4							
Prevention							
Early Intervention							
ATD/ATPDP							
ATP							
Reentry/Aftercare							
Indirect							
5							
Prevention							
Early Intervention							
ATD/ATPDP							
ATP							
Reentry/Aftercare							
Indirect							

Program Name and Service Types	STSJP						STSJP-RTA
	Detention Allocation Shifted	Approved Rollover	PY23-24 STSJP Allocation	Total Expenses (100%)	Local Share (38%)	State Share (62%)	State Share (100%)
6							
Prevention							
Early Intervention							
ATD/ATPDP							
ATP							
Reentry/Aftercare							
Indirect							
7							
Prevention							
Early Intervention							
ATD/ATPDP							
ATP							
Reentry/Aftercare							
Indirect							
8							
Prevention							
Early Intervention							
ATD/ATPDP							
ATP							
Reentry/Aftercare							
Indirect							
9							
Prevention							
Early Intervention							
ATD/ATPDP							
ATP							
Reentry/Aftercare							
Indirect							
10							
Prevention							
Early Intervention							
ATD/ATPDP							
ATP							
Reentry/Aftercare							
Indirect							

Program Name and Service Types	STSJP						STSJP-RTA
	Detention Allocation Shifted	Approved Rollover	PY23-24 STSJP Allocation	Total Expenses (100%)	Local Share (38%)	State Share (62%)	State Share (100%)
11							
Prevention							
Early Intervention							
ATD/ATPDP							
ATP							
Reentry/Aftercare							
Indirect							
12							
Prevention							
Early Intervention							
ATD/ATPDP							
ATP							
Reentry/Aftercare							
Indirect							
► Sum of Program Totals:			\$39,999.94	\$64,516.03	\$24,516.09	\$39,999.94	\$433,084.00

B. STSJP Reimbursement Summary	
STSJP Allocation Amount	\$40,000.00
Locally Approved Amount of PY 2023-2024 STSJP Allocation	\$39,999.94
Approved Detention Allocation Shifted	\$0.00
Approved Rollover Amount	\$0.00
Total Approved for State Reimbursement	\$39,999.94
C. STSJP-RTA Reimbursement Summary	
STSJP-RTA Approved Plan Amount	\$433,084.00
Total Approved for State Reimbursement	\$433,084.00

PART V – PLAN APPROVAL		
A. Municipality Level Approval – Chief Executive/Administrative Official		
As STSJP Lead for St. Lawrence County, I certify that the Chief Executive/Administrative Official, [Name and Title] Ruth Doyle, County Administrator, has reviewed and approved the 2023-2024 STSJP Plan.		
User ID: 40b202	Print Name: Ruth Doyle	Date: 8/16/2023
B. State Level Approval – OCFS Program Reviewer		
As OCFS STSJP reviewer, I certify that I approve of this STSJP plan for Choose an item. for 2023-2024.		
User ID: it4541	Print Name: Keegan Burke	Date: 8/16/2023