



Office of Children and Family Services

KATHY HOCHUL
Governor

SHEILA J. POOLE
Commissioner

August 26, 2022

Dear Chief Executive Officer,

Thank you for submitting Tioga County's Supervision and Treatment Services for Juveniles Program (STSJP) plan for Program Year (PY) 2022-2023. Your entire STSJP plan, including any amounts listed for PY 2022-2023 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, 2023, 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, 2022 to September 30, 2023. 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 Geneva Hilliard at (518) 486-1819 or 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: Bryan Bagstad, Budget Director
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, 2022 – SEPTEMBER 30, 2023

SUBMITTING MUNICIPALITY CONTACT INFORMATION

Name of applicant county, counties or jurisdiction: Tioga		
Lead agency for STSJP submission: Tioga County Probation		
Contact person's name: Chad Post	Title: Probation Supervisor	
Phone: (607) 687-8535	Ext: 8533	Email: postc@tiogacountyny.gov

PLAN SUBMISSION INSTRUCTIONS

STSJP plans are due to the Office of Children and Family Services (OCFS) by 08 / 05 / 2022

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 2022-2023 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 2022-2023 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:

The highest number of Persons in Need of Supervision (PINS), Juvenile Delinquents (JD), Juvenile Offenders (JO), Adolescent Offenders (AO), and Youthful Offenders (YO) entering the youth juvenile system in Tioga County originated from primarily one community, Owego (13827). Owego accounted 12 of the 26 of the JD intakes from October 1, 2021 to September of 2022. This is logical as Owego is the most urban and largest population center in Tioga County. Given the dense population of youth in this area and a historical lack of pro social activities, one would reason that this area would produce the majority of youth exhibiting inappropriate behaviors. Other factors that contribute to the above numbers are a lack of effective services, and a non-existent public transportation system which hinders the community's access to the few services available.
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 younger than 18. (**Note:** Every July, the National Center for Health Statistics releases population data for the previous year. The population data you are being asked to report on was the latest available at the time OCFS updated the contents of this plan. For the Placement Admissions data, please add together county data from Tables 1b, 6b, and 7b of the Annual Out of Home Placement Admissions Data Packet.)

Race/Ethnicity	2020 General Population <18 years		2021 Detention Admissions <18 years		2021 Placement Admissions <18 years	
	#	%	#	%	#	%
Black/African American	179	2	0	0	0	0
White	9,146	93	6	100	4	100
Native American/Alaskan	24	0	0	0		
Asian/Pacific Islander	86	1	0	0		
Hispanic	366	4	0	0	0	0

Sex Assigned at Birth	2020 General Population <18 years		2021 Detention Admissions <18 years		2021 Placement Admissions <18 years	
	#	%	#	%	#	%
Male	5,038	51	5	83	4	100
Female	4,763	49	1	17	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.

There are no disparities of note. The White population makes up 93% of the County and 100% of detention and placements were caucasian.

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:

Collaboration is utilized in Tioga County in the form of a Youth Assessment Team which is facilitated by supervisory level staff from the Tioga County Probation Department and the Tioga County Department of Social Services. The Youth Assessment Team is comprised of representatives from Probation, the Tioga County Department of Social Services, Tioga County Alcohol and Drug Services, the Tioga County Department of Mental Hygiene, SPOA (Single Point of Accessibility) Coordinator, Multisystemic Therapy, Glove House, A New Hope Center (domestic violence advocacy center), County Attorney, as well as law enforcement, attorney for the child, and schools when available.

2. How is your municipality gathering participant youth and family feedback as part of your STSJP plan development?
Tioga developed a survey which is completed by a parent as well as the youth who received STSJP services during the 2022-2023 program year.

Describe how the plan incorporates that feedback; if you have not yet received youth and family feedback, please describe the barriers to implementation and the municipality's solutions to develop such feedback mechanisms during PY 2022-2023.

A limited number of surveys have been collected as it was implemented several months ago. The surveys will be reviewed every three months. The feedback will be considered and adjustments made to future STSJP plans as needed.

3. Was community feedback in high-need ZIP codes (A.1.) sought as part of the STSJP plan development?

Yes. (If yes, please describe how the plan incorporates that feedback);

No. (If no, please describe the barriers to implementation and the municipality's solutions to develop such feedback mechanism during PY 2022-2023).

The plan incorporates the feedback through a shift of resources to Early Intervention in an attempt to mitigate more serious JD behaviors before they develop in the youth. This is in the form of a monthly Youth Assessment Team (YAT) meeting with many area agencies including DSS, schools, law enforcement, County Attorney, and others. Tioga also developed a formal survey for youth and families served by the programs to gain more reliable data regarding service provision.

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 joint-funded programs, as well as the names and email addresses of the fiscal officers responsible for joint-funded programs:

PART II – PROGRAM LEVEL DETAILS

PROGRAM	1
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A. Program 1 Contact Information

Program 1 Name: Reminder Call Program/Electronic Monitoring/Enhanced Intake & Diversion Services

Operating Agency: Tioga County Probation

Program Mailing Address: 20 Court Street, Suite 1

Address Line 2:

City: Owego	State: NY	ZIP Code: 13827
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Program Contact's Name: Chad Post		Title: Probation Supervisor
Phone: (607) 687-8535	Ext: 8533	Email: postc@tiogacountyny.gov

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, as of December 29, 2022, 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 2022-2023.
 Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2022-2023:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention/Pre-Dispositional Placement (ATD/ATPDP)

<input checked="" 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, as of December 29, 2022, 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:
13827, 14892, 13811, 13732, 14883, 13845, 13743, 13812, 13734

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.)

Program 1 contains three components. First, the Reminder Call Program, which is designed to contact youth who have a petition pending in Family Court and a scheduled court appearance. Probation contacts the youth on a weekly basis to remind them of their appearance and therefore reducing the risk of the youth not appearing and a warrant being issued. This is not only an Early Intervention service, but also a Pre-Dispositional Alternative to Detention. Second, Electronic Monitoring (EM). EM is used to more closely monitor the youth using the GPS capability of the device. The hope is this element will reduce or eliminate the youth visiting undesirable locations or if the youth does leave home without permission, allow parents or authorities to locate the youth before the youth commits further undesirable acts. EM is used both Pre-Disposition Alternative to Detention and Post Disposition Alternative to Placement. The goal is to keep the youth in the community and avoid either a detention placement or placement with the Department of Social Services. Third, Enhanced Intake and Diversion Services allows for youth issued Juvenile Delinquency Appearance Tickets to appear at Probation for intake the following business day. This option is an Early Intervention and Pre-Dispositional program designed to keep youth out of detention by offering a more timely intervention by the Juvenile Justice System therefore reducing the chance of the youth's removal from the home and the community due to escalating behaviors prior to intake.

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 2021-2022? If the program was approved in PY 2021-2022 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 10/1/2021 and 3/31/2022. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP			29			29
STSJP-RTA						
Total			29			29

3. Based on the program's record of youth served, do you anticipate this program serving more or less than its projected capacity on 9/30/2022? Please explain:
The number of Juvenile Delinquency Appearance Tickets filed over the past three years have been fairly consistent (mid 20s). This program year has seen an increase in the number of tickets. It is reasonable to project that in the next six months the number will be in the 30s.

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2021 and 3/31/2022. Enter zero (0) if not applicable.

Approved Funding	Program Type				
	P	EI	ATD/ATPDP	ATP	R/A
STSJP			71		
STSJP-RTA					
Total			71		

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.

The length of service is in the realm of what would be expected given the fact that it takes approximately two months (60 days) to cycle a juvenile delinquency matter through our Family Court.

6. Will this program's outcomes meet the PY 2021-2022 projected goals by 9/30/2022?

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

7. (a) What outcomes are on track to meet the goals set for PY 2021-2022?

(b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2021-2022?

(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 2022-2023?

D. Program 1 Service Projections for PY 2022-2023

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2022-2023. Enter zero (0) if not applicable.

Approved Funding	Program Type					Total
	P	EI	ATD/ATPDP	ATP	R/A	
STSJP			29			29
STSJP-RTA						
Total			29			29

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, as of December 29, 2022, 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 2022-2023.

Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2022-2023:

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, as of December 29, 2022, 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 2021-2022? If the program was approved in PY 2021-2022 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 10/1/2021 and 3/31/2022. 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 9/30/2022? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2021 and 3/31/2022. Enter zero (0) if not applicable.

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

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 2021-2022 projected goals by 9/30/2022?

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

7. (a) What outcomes are on track to meet the goals set for PY 2021-2022?
 (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2021-2022?
 (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 2022-2023?

D. Program 2 Service Projections for PY 2022-2023

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2022-2023. Enter zero (0) if not applicable.

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

PROGRAM	3
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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, as of December 29, 2022, 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 2022-2023. Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2022-2023:

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, as of December 29, 2022, 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 2021-2022? If the program was approved in PY 2021-2022 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 10/1/2021 and 3/31/2022. 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 9/30/2022? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2021 and 3/31/2022. Enter zero (0) if not applicable.

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

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 2021-2022 projected goals by 9/30/2022?

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

7. (a) What outcomes are on track to meet the goals set for PY 2021-2022?
 (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2021-2022?
 (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 2022-2023?

D. Program 3 Service Projections for PY 2022-2023

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2022-2023. 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																						
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<p>2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2022-2023:</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>		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
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<input type="checkbox"/>	<input type="checkbox"/>	Reentry/Aftercare (R/A)																				
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services																				
<p>*Note: If you indicated this program will operate as an FSS, it cannot provide STSJP-RTA services under this program. Additionally, as of December 29, 2022, 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>																						
<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 2021-2022? If the program was approved in PY 2021-2022 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 10/1/2021 and 3/31/2022. 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 9/30/2022? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2021 and 3/31/2022. Enter zero (0) if not applicable.

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

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 2021-2022 projected goals by 9/30/2022?

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

7. (a) What outcomes are on track to meet the goals set for PY 2021-2022?
 (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2021-2022?
 (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 2022-2023?

D. Program 4 Service Projections for PY 2022-2023

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2022-2023. 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																						
<p>1. A Family Support Services (FSS) program may ONLY serve youth at risk of becoming, alleged to be, or adjudicated as PINS; or, as of December 29, 2022, 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 2022-2023. <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 2022-2023:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #d9d9e9;"> <th style="width: 10%; padding: 5px;">STSJP</th> <th style="width: 10%; padding: 5px;">STSJP-RTA</th> <th style="width: 80%; padding: 5px;"></th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="padding: 5px;">Prevention (P)</td> </tr> <tr> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="padding: 5px;">Early Intervention (EI)</td> </tr> <tr> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="padding: 5px;">Alternative to Detention/Pre-Dispositional Placement (ATD/ATPDP)</td> </tr> <tr> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="padding: 5px;">Alternative to Placement (ATP)</td> </tr> <tr> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="padding: 5px;">Reentry/Aftercare (R/A)</td> </tr> <tr> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="padding: 5px;">Indirect Services</td> </tr> </tbody> </table>		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>*Note: If you indicated this program will operate as an FSS, it cannot provide STSJP-RTA services under this program. Additionally, as of December 29, 2022, 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>																						
<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 5 Performance History (Refer to your municipality's STSJP data files.)																						
<p>1. What, if any, funding did this program receive in PY 2021-2022? If the program was approved in PY 2021-2022 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 10/1/2021 and 3/31/2022. 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 9/30/2022? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2021 and 3/31/2022. Enter zero (0) if not applicable.

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

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 2021-2022 projected goals by 9/30/2022?

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

7. (a) What outcomes are on track to meet the goals set for PY 2021-2022?

(b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2021-2022?

(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 2022-2023?

D. Program 5 Service Projections for PY 2022-2023

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2022-2023. 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, as of December 29, 2022, 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 2022-2023.

Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2022-2023:

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, as of December 29, 2022, 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 2021-2022? If the program was approved in PY 2021-2022 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 10/1/2021 and 3/31/2022. 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 9/30/2022? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2021 and 3/31/2022. Enter zero (0) if not applicable.

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

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 2021-2022 projected goals by 9/30/2022?

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

7. (a) What outcomes are on track to meet the goals set for PY 2021-2022?
 (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2021-2022?
 (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 2022-2023?

D. Program 6 Service Projections for PY 2022-2023

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2022-2023. 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, as of December 29, 2022, 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 2022-2023.

Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2022-2023:

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, as of December 29, 2022, 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 2021-2022? If the program was approved in PY 2021-2022 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 10/1/2021 and 3/31/2022. 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 9/30/2022? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2021 and 3/31/2022. Enter zero (0) if not applicable.

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

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 2021-2022 projected goals by 9/30/2022?

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

7. (a) What outcomes are on track to meet the goals set for PY 2021-2022?
 (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2021-2022?
 (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 2022-2023?

D. Program 7 Service Projections for PY 2022-2023

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2022-2023. 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, as of December 29, 2022, 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 2022-2023.

Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2022-2023:

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, as of December 29, 2022, 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 2021-2022? If the program was approved in PY 2021-2022 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 10/1/2021 and 3/31/2022. 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 9/30/2022? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2021 and 3/31/2022. Enter zero (0) if not applicable.

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

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 2021-2022 projected goals by 9/30/2022?

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

7. (a) What outcomes are on track to meet the goals set for PY 2021-2022?

(b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2021-2022?

(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 2022-2023?

D. Program 8 Service Projections for PY 2022-2023

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2022-2023. 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:

B. 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, as of December 29, 2022, 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 2022-2023.

Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2022-2023:

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, as of December 29, 2022, 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 9 Performance History (Refer to your municipality's STSJP data files.)

1. What, if any, funding did this program receive in PY 2021-2022? If the program was approved in PY 2021-2022 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 10/1/2021 and 3/31/2022. 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 9/30/2022? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2021 and 3/31/2022. Enter zero (0) if not applicable.

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

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 2021-2022 projected goals by 9/30/2022?

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

7. (a) What outcomes are on track to meet the goals set for PY 2021-2022?
 (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2021-2022?
 (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 2022-2023?

D. Program 9 Service Projections for PY 2022-2023

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2022-2023. 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:

B. 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, as of December 29, 2022, 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 2022-2023.

Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2022-2023:

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, as of December 29, 2022, 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 10 Performance History (Refer to your municipality's STSJP data files.)

1. What, if any, funding did this program receive in PY 2021-2022? If the program was approved in PY 2021-2022 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 10/1/2021 and 3/31/2022. 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 9/30/2022? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2021 and 3/31/2022. Enter zero (0) if not applicable.

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

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 2021-2022 projected goals by 9/30/2022?

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

7. (a) What outcomes are on track to meet the goals set for PY 2021-2022?

(b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2021-2022?

(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 2022-2023?

D. Program 10 Service Projections for PY 2022-2023

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2022-2023. 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:

B. 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, as of December 29, 2022, 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 2022-2023.

Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2022-2023:

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, as of December 29, 2022, 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 11 Performance History (Refer to your municipality's STSJP data files.)

1. What, if any, funding did this program receive in PY 2021-2022? If the program was approved in PY 2021-2022 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 10/1/2021 and 3/31/2022. 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 9/30/2022? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2021 and 3/31/2022. Enter zero (0) if not applicable.

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

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 2021-2022 projected goals by 9/30/2022?

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

7. (a) What outcomes are on track to meet the goals set for PY 2021-2022?
 (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2021-2022?
 (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 2022-2023?

D. Program 11 Service Projections for PY 2022-2023

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2022-2023. 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:

B. 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, as of December 29, 2022, 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 2022-2023.

Yes No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2022-2023:

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, as of December 29, 2022, 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 12 Performance History (Refer to your municipality's STSJP data files.)

1. What, if any, funding did this program receive in PY 2021-2022? If the program was approved in PY 2021-2022 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 10/1/2021 and 3/31/2022. 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 9/30/2022? Please explain:

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2021 and 3/31/2022. Enter zero (0) if not applicable.

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

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 2021-2022 projected goals by 9/30/2022?

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

7. (a) What outcomes are on track to meet the goals set for PY 2021-2022?
 (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2021-2022?
 (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 2022-2023?

D. Program 12 Service Projections for PY 2022-2023

1. Please use the table to indicate the **projected number of youth to be served** by the program for PY 2022-2023. 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 2022-2023

Please set the municipality’s goals for its programs to achieve in PY 2022-2023. 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
100 %	%	of youth will have no PINS referrals during service engagement
100 %	%	of youth will have no trancies during service engagement
100 %	%	of youth will have no school suspensions during service engagement
100 %	%	of youth will have no arrests or probation intakes during service engagement
100 %	%	of youth will have their cases successfully adjusted/diverted during service engagement
100 %	%	of youth will be able to identify at least one accessible, positive adult connection
100 %	%	of youth will be engaged in at least one positive community activity
100 %	%	of youth will comply with program rules
100 %	%	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 %	%	of youth will have no missed court appearances during service engagement
100 %	%	of youth will have no warrants issued during service engagement
100 %	%	of youth will have no arrests or probation intakes during service engagement
100 %	%	of youth will have no detention or jail admissions during service engagement
100 %	%	of PINS will have no pre-dispositional placements during service engagement
100 %	%	of youth will be able to identify at least one accessible, positive adult connection
100 %	%	of youth will be engaged in at least one positive community activity
100 %	%	of youth will comply with program rules
100 %	%	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
90 %	%	of youth will have no warrants issued during service engagement
90 %	%	of youth will have no arrests or probation intakes during service engagement
90 %	%	of youth will have no detention or jail admissions during service engagement
100 %	%	of PINS will have no pre-dispositional placements during service engagement
80 %	%	of youth will have no violations of probation filed during service engagement
90 %	%	of youth will have no new placements during service engagement
100 %	%	of youth will be able to identify at least one accessible, positive adult connection
100 %	%	of youth will be engaged in at least one positive community activity
90 %	%	of youth will comply with program rules
90 %	%	of youth will attend at least 90% of programming

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

Reentry/Aftercare		
(Programs <input 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
%	%	of youth will have no warrants issued during service engagement
%	%	of youth will have no arrests or probation intakes during service engagement
%	%	of youth will have no detention or jail admissions during service engagement
%	%	of PINS will have no pre-dispositional placements during service engagement
%	%	of youth will have no new placements during service engagement
%	%	of youth will have no returns to their previous placements 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:

PART IV – FUNDING							
A. Anticipated Program Expenses and Funding Distribution							
Program Name and Service Types	STSJP						STSJP-RTA
	Detention Allocation Shifted	Approved Rollover	PY22-23 STSJP Allocation	Total Expenses (100%)	Local Share (38%)	State Share (62%)	State Share (100%)
1 Reminder Call Program/ Electronic Monitoring/Enhanced Intake & Diversion	\$0.00	\$0.00	\$9,693.08	\$15,634.00	\$5,940.92	\$9,693.08	\$0.00
Prevention							
Early Intervention	\$0.00	\$0.00	\$2,423.27	\$3,908.50	\$1,485.23	\$2,423.27	\$0.00
ATD/ATPDP	\$0.00	\$0.00	\$4,846.54	\$7,817.00	\$2,970.46	\$4,846.54	\$0.00
ATP	\$0.00	\$0.00	\$2,423.27	\$3,908.50	\$1,485.23	\$2,423.27	\$0.00
Reentry/Aftercare							
Indirect							
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						
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Program Name and Service Types	STSJP						STSJP-RTA
	Detention Allocation Shifted	Approved Rollover	PY22-23 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	PY22-23 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:	\$0.00	\$0.00	\$9,693.08	\$15,634.00	\$5,940.92	\$9,693.08	\$0.00

B. STSJP Reimbursement Summary	
STSJP Allocation Amount	\$40,000.00
Locally Approved Amount of PY 2022-2023 STSJP Allocation	\$9,693.08
Approved Detention Allocation Shifted	
Approved Rollover Amount	
Total Approved for State Reimbursement	\$9,693.08
C. STSJP-RTA Reimbursement Summary	
STSJP-RTA Approved Plan Amount	
Total Approved for State Reimbursement	

PART V – PLAN APPROVAL		
A. Municipality Level Approval – Chief Executive/Administrative Official		
As STSJP Lead for Tioga County, I certify that the Chief Executive/Administrative Official, [Name and Title] Martha Sauerbrey, has reviewed and approved the 2022-2023 STSJP Plan.		
User ID: Tioga28	Print Name: Chad A. Post	Date: 9/1/2022
B. State Level Approval – OCFS Program Reviewer		
As OCFS STSJP reviewer, I certify that I approve of this STSJP plan for Tioga County for 2022-2023.		
User ID: TY4555	Print Name: Eric Warner	Date: 8/19/2022