NEW YORK STATE
DEPARTMENT OF SOCIAL SERVICES
40 NORTH PEARL STREET, ALBANY, NEW YORK 12243-0001

MARY JO BANE
Commissioner

(518) 474-9475

LOCAL COMMISSIONERS MEMORANDUM

Transmittal No: 92 LCM-136

Date: August 31, 1992

Division: Adult Services
Family and Children Services

TO: **Local District Commissioners**

SUBJECT: 1993 Annual Implementation Report

ATTACHMENTS: Annual Implementation Report Guidelines, Instructions and Forms (Available on-line)
Survey on Consolidated Services Planning (Available on-line)

Attached are the guidelines for preparing the 1993 Annual Implementation Report (A.I.R.). The intent is to maximize the use of the A.I.R. as a supportive mechanism for districts engaged in ongoing planning and implementation while minimizing the emphasis on the development of a document.

The guidelines are based on the principle that the A.I.R. is an addendum and update to the full Consolidated Services Plan. Therefore, much of the descriptive and detailed information included in the CSP need not be included in the A.I.R.. Additionally, many components of the A.I.R. are structured to be completed only if significant changes have occurred or are proposed for 1993.

For the Annual Implementation Report, all districts must submit Program Priorities, Activities for 1993, the Annual Protective Services for Adults (PSA) Public Education and Outreach Plan, and Public Participation sections. Public participation requirements for the Annual Implementation Reports have not been streamlined as we were unable during this legislative session to obtain legislative relief from these detailed requirements.

Reinforcing the emphasis on outcome, the guidelines require descriptions of 1991 activities ONLY for those priorities where the impact statement measure for 1991 was not achieved. To further assist the districts in reporting succinctly on progress in the Priority Areas, optional standardized formats have been provided. Even if the district opts to use its own format, a review of the included forms will provide a sense of the acceptable scope and brevity the Department is seeking in the Annual Implementation Report.

Many of the Appendixes, the TASA Plan and Domestic Violence information need only be submitted in the 1993 A.I.R. if changes are proposed. Simplified procedures for such amendments are included in the guidelines. Additionally, for districts seeking approval for the purchase of preventive services from a public agency, simplified procedures have been integrated into the planning guidelines.

For districts seeking Child Protective Services enhanced reimbursement for pre- and/or post-determination services for the first time, instructions and requirements are included in the guidelines. Abbreviated requirements are provided for districts seeking the continuation of enhanced funding.

In addition, the following enclosures are **REQUIRED:**

- o Commissioner's Signature

- o An assurance that the district has reviewed the 1991-1993 Consolidated Services Plan and acknowledges that the information submitted effectively reflects all changes in the 1991-1993 Consolidated Services Plan and that all other information not resubmitted remains accurate and in force. (A sample signature page with an assurance statement included is provided for the districts' use and/ or review.)

- o Signature of the chief elected officer of the county or the chairperson of the legislative body in those districts without a chief elected officer.

- o Introduction page

- o Appendix F: Program Information

- o A checklist identifying what plan sections are being submitted and which sections the district is not resubmitting as the information in the 1991-1993 Consolidated Services Plan continues to be accurate.

Components/ information that need NOT be included in the A.I.R. include:

- o Child Day Care
- o Unmet need.

Please review the Overview and Outline section for further information. A copy of the LCM, the guidelines, and extra copies of the Appendixes will be forwarded to your planning coordinator under separate cover. For districts participating in the Office Automation initiative, all necessary instructions and forms are available on-line. Please consult the FCS file in the E-Form drawer of the Electronic Library.

The 1993 Annual Implementation Report is due on October 31, 1992. Questions concerning the content or process for completing the A.I.R. should be directed to the appropriate Regional Office of Family and Children Services or to the appropriate program representative for Adult Services.

As you are aware, the Department unsuccessfully sought to obtain mandate relief regarding the Consolidated Services Plan during this legislative session. However, even within the current legislative framework, it is our intent to continue efforts to streamline the local planning process. Therefore, an optional survey form is also included in the planning guidelines. This survey is intended to initiate a process to strengthen and clarify local planning. Your candid comments, as well as an indication of your interest in participating in future discussions related to local planning, will be greatly appreciated.

William Gould
Acting Deputy Commissioner
Division of Adult Services

Joseph Semidei
Deputy Commissioner
Division of Family and
Children Services

Guidelines and Instructions for Preparing the Annual Implementation Report of the Local Consolidated Services Plan 1993

The following material includes two major components. First, the **Overview** establishes a general framework for the planning process, including the timetable of events, criteria for approval, and how and where to submit the Report. The **Instructions**, then, detail the specific requirements related to the development and writing of the Report.

July 1992

GENERAL INTRODUCTION

The Consolidated Services Planning Process, including the Annual Implementation Report, reflects the Department's continued commitment to planning for the provision of services to Adults, Children and their Families in the most effective and efficient means available.

The purpose of the Annual Implementation Report (A.I.R.) is, first, to provide a vehicle for districts to assess and report on progress in implementing activities proposed in the full three year Consolidated Services Plan. Second, it provides the Department and the districts the opportunity to review available data to assess whether previous priorities should be maintained and/or whether additional priorities or strategies should be addressed. Finally, the A.I.R. presents specific activities to be undertaken in the coming year.

The following pages detail the specific requirements for development and submission that must be met in order for an annual implementation report to receive approval. A concerted effort has been made to simplify the Annual Implementation Report guidelines and requirements. The intent is to maximize the use of the A.I.R. as a supportive mechanism for districts engaged in ongoing planning and implementation while minimizing the emphasis on the development of a document.

The guidelines are based on the assumption that the 1993 A.I.R. is an addendum and update to the full Consolidated Services Plan and the 1992 A.I.R.. Therefore, much of the descriptive and detailed information included in the CSP need not be included in the 1993 A.I.R.. Additionally, many components of the A.I.R. are structured to be completed only if significant changes have occurred since the submission of the 1992 A.I.R. or are proposed for 1993.

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

Regional staff in the Division of Family and Children Services and the Division of Adult Services remain available to assist you. The names and phone numbers of staff assigned to each district are included in the attachments to these guidelines.

Overview and Outline

To the greatest extent possible, the 1993 Annual Implementation Report Guidelines mirror those issued to guide the development of the 1992 Annual Implementation Report.

For the Annual Information Report, only the following information is **REQUIRED OF ALL DISTRICTS:**

(a) Program Priorities
- (see pages 9-11 for specific reporting requirements.)
- Please note that this includes new requirements regarding outreach and public education for Adult Protective Services.

(b) Activities for 1992

(c) Estimate of Expenditures (Appendix C)

(d) Program Information Matrix (Appendix F)

(e) Public Participation

(f) Commissioner's Signature

(g) An assurance that the information submitted effectively reflects all changes from the 1992 A.I.R. and that all other information not resubmitted remains accurate and in force. (A signature page with this assurance statement is provided for districts' use/ review.)

(h) Signature of the chief elected officer of the county or the chairperson of the legislative body in those districts without a chief elected officer.

(i) Introduction page

(j) A checklist identifying what plan sections are being submitted and which sections the district is not resubmitting as the information in the 1991-1993 Consolidated Services Plan continues to be accurate (or in the case of Child Care, JOBS Plan has been submitted.)

The following sections are **REQUIRED ONLY IF THE DISTRICT IS PROPOSING CHANGES** from the 1992 A.I.R. or later plan amendment submissions:

(a) Organizational Chart

(b) Estimate of Persons To Be Served

(d) Purchase of Preventive Services from Public Agencies

(e) TASA

(f) Domestic Violence

In addition, **ASSESSMENT OF PROGRESS IN IMPLEMENTING ACTIVITIES IS ONLY REQUIRED IF THE IMPACT STATEMENT FOR THE PRIORITY HAS NOT BEEN ATTAINED.**

Also **REQUIRED ONLY FOR DISTRICTS WHICH ARE OR WHICH PLAN TO PARTICIPATE** are the sections pertaining to enhanced reimbursement for CPS pre- and post-determination services. For districts seeking Child Protective Services enhanced reimbursement for pre- and/or post-determination services for the first time, instructions and requirements are included in Section II. A. For districts seeking continuation enhanced funding, streamlined instructions are also included.

Annual Implementation Report will NOT include the following components:

o If the district has submitted its JOBS plan, the district SHOULD NOT resubmit the child care portion of the plan as part of this Annual Implementation Report. Nor should the district resubmit the information contained on **page 5 of Appendix F.** Department staff in the Divisions of Income Maintenance and Family and Children Services will collaboratively review the JOBS plan and accept this submission as meeting both sets of planning requirements.

o Information on local rates and rate setting for services for victims of domestic violence is not requested.

o A separate discussion of unmet need will not be required.

Districts may include additional information which they believe will further clarify the required information.

Criteria for Approval of the Annual Implementation Report:

The criteria for approval shall be that the Report:

1. is internally consistent (e.g. priorities and activities are related; client and expenditure estimates are consistent with priorities and activities).
2. addresses the State-identified issues confirmed during the negotiation process for the current year.
3. complies with requirements of the planning process, including those addressing public participation and submission dates.
4. contains all required information and required enclosures.

Submission of the Annual Implementation Report

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

The addresses are as follows:

Commissioner Mary Jo Bane
New York State Department of Social Services
40 North Pearl Street
Albany, New York 12243

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

Mr. Jack Klump, Director
Syracuse Regional Office
351 South Warren Street, 5th floor
Syracuse, New York 13202

Ms. Linda Kurtz, Director
Rochester Regional Office
NYS DSS Family and Children Services
259 Monroe Avenue
Rochester, New York 14607

Mr. John O'Connor, Director
Albany Regional Office
NYS DSS Family and Children Services
40 North Pearl Street
Albany, New York 12243

Ms. C. Linda Brown, Director
Buffalo Regional Office
NYS DSS Family and Children Services
838 Ellicott Square Building
Buffalo, New York 14203

As part of the Office Automation (OA) initiative, participating counties may automate their A.I.R. submission process. All of the forms and optional formats have been re-formatted on-line. All instructions and forms are contained in the FCS file of the E-Form drawer in the Electronic Library.

Other Information

Questions concerning the content or process for completing the Annual Implementation Report that are related to Family and Children Services should be directed to the appropriate Regional Office of the Division of Family and Children Services. Questions related to Adult Services should be directed to the appropriate program representative in the Division of Adult Services. A listing of contact names and phone numbers is included in the attachments. Requests for technical assistance should be directed to these individuals.

PLANNING CALENDAR

Following is a calendar of planning milestones. The effective dates of the plan apply to all districts. Any district whose local budget cycle is not aligned with these milestones will be allowed the option of submitting their plan on a timetable consistent with the local budget cycle. Since an adequate submission is contingent upon the Department completing certain activities, any district intending to choose a different submission date in order to align the plan and budget years should notify the Department as early as possible to enable the Department to assist in expediting the provision of necessary data and issues. Any district proposing to submit the document on October 31, as required, but which experiences delays, may

request an extension. The request for an extension must include a justification statement and a proposed alternate submission date and be directed to the Commissioner with a copy of the request to be submitted to the appropriate Regional Office. The Department will review and respond to each request individually.

June-July	Negotiation process for State-identified issues
August	Guidelines to districts
August 31	Notification by Department of State-identified issues
October 31	Last day for Report submission
January 1 - December 31	Effective dates of plan update contingent upon approval of the A.I.R.

Processes for the Identification of Issues

The process for the identification of issues to be addressed through the planning process continues to rely on a joint partnership of local districts and the Department. It reflects a shared commitment to establish an effective services delivery system in New York State and to be responsive over the three-year period to changing needs in program areas and the service delivery network at both the State and the local level. Since service delivery systems are locally operated, the majority of the Plan should be based on local initiatives rather than state mandated activities. To direct further development of an effective delivery system statewide, however, the planning process includes the capacity for the identification of State Agenda Issues and State-identified Issues.

State Agenda Issues consist of general issues that the Department wishes to emphasize on a Statewide basis and are not district-specific in nature. There are **NO State Agenda issues identified for the 1993 plan update year.**

State-identified Issues are targeted to potential deficient areas and will be identified on a district-specific basis. Issues identified by the Department in the first year of the multi-year plan established a general framework of issues for the three-year period. The need to adjust those issues is reviewed yearly affording both the Department and the local district the opportunity to discuss adjustments which respond to the particular service needs evident in the current environment. These issues are negotiable within the framework of the Family and Children Services or Adult Services processes set out below. There is, however, a basic assumption that there will be continuity from year to year within the three-year cycle.

A. Family and Children Services

For this update period, districts should assume that issues identified in the first year of the plan cycle continue to be in force. The following discussion only pertains if there are newly identified issues for the 1992 Annual Implementation Report.

The State-identified issues are developed from the Department's review of relevant data and of information gained through program and plan monitoring and other contacts with the district. The issues are then presented for discussion and negotiation with the district. The district may question the Department's data, dispute the relevance or significance of the issue as formulated by the Department, indicate an inability to address issues in that particular year, indicate that there are too many issues to initiate in that year of the cycle, indicate a lack of resources to adequately address the issue and suggest alternate issues for consideration. At the conclusion of the verbal negotiation process, the Department will reaffirm, in writing, the agreements reached regarding issues in each district. (Note, this letter will ONLY reference new issues, not those previously included in the 1991-1993 Consolidated Services Plan.)

If the district continues to question the relevance or significance of any issue cited by the Department, it may contact the Department in either written or verbal form to initiate a discussion of the concerns. The discussions can occur by telephone or in a meeting with Department staff. Districts should be prepared to support their position and we recommend that a brief written outline of the district data be available for purposes of facilitating the discussions.

If, following the negotiations process, the Department and the district do not agree and the Department continues to view the issue as requiring attention in the plan, the district must address the issue in the plan submission or subsequent Annual Implementation Report in order for the plan to be approved. In such cases, the Department will indicate, based on its own analysis as well as on the negotiations with the district, what will constitute an adequate response to the issue.

An adequate plan submission will require priorities and activities for each reaffirmed issue.

B. Adult Services

Districts are expected to continue to address the Protective Services for Adults and Other Adult Services State -Identified Issues contained in their 1991-93 CSP. If a district feels that a particular adult services State-Identified Issue is no longer relevant, the local commissioner must send a letter to Acting Deputy Commissioner William Gould requesting a waiver. This request must include:

- the reason(s) why a particular adult services State-Identified Issue is no longer relevant;
- the local issue that the district would like to address in lieu of the State-Identified Issue; and
- an explanation of the importance of the local issue in terms of improving service delivery to clients.

Within two weeks of receiving a request, the Division will respond to the district in writing whether or not the district's request is approved and the reasons for our decision.

The State-Identified Issues for Adult Services are restated below:

PROTECTIVE SERVICES FOR ADULTS (PSA)
ISSUE: Improving the Ability of the District to Identify and Serve Persons in Need of PSA.

In March of 1989, a Work Group of the Adult Services Subcommittee of the New York Public Welfare Association (NYPWA), which consisted of both state and local staff, submitted a report on the establishment of a model PSA service delivery system in New York State. This report was adopted by the Adult Services Subcommittee and subsequently approved by NYPWA's Executive Board. A basic premise of this report is that while continuing efforts must be made to improve access and service delivery to PSA clients, these efforts should not include the establishment of a Mandatory Reporting System and a State Central Registry. Since the conclusion and recommendations of this report are consistent with policy and programmatic initiatives being pursued by the Department, we have determined that an appropriate State-identified issue for the 1991-93 Consolidated Services Plan (CSP) cycle is improving the ability of the districts to identify and serve persons in need of PSA. In responding to this issue, each district must address at least one of the following areas in each year of the planning cycle. A district also is expected to address a different area for each year of the plan.

- improving the ability of the district to identify persons potentially in need of PSA by intensifying public education and outreach programs;

- strengthening the intake process to assure that PSA referrals, as defined by Section 457.1(c)(2) of the Department's regulations, are identified, responded to and assessed in accordance with appropriate timeframes;

- improving the capability of PSA staff to make PSA eligibility determinations in accordance with Section 457.1(b) of the Department's regulations; and

- other appropriate areas identified by the local district.

Please be advised that CSP activities which indicate that local staff will attend state training programs will not be sufficient to secure approval for a PSA priority.

OTHER ADULT SERVICES
ISSUE: Improving Residential Placement Services for Adults

During the last several years, the Department has intensified its efforts to expand and improve the Family-type Home for Adults Program and to assure that persons in need of residential care are assessed and appropriately placed. These efforts have included the issuance of an Administrative Directive (89 ADM-22) to clarify the responsibilities of the district with regard to the provision of Residential Placement Services for Adults; the development and implementation of a Family-type

Home Quality Assurance Procedure; and the provision of training to local district staff and family-type home operators. Because our efforts to strengthen the ability of the districts to inspect and supervise Family-type Homes for Adults and to provide the other components of Residential Placement Services for Adults will continue, it is appropriate for the districts to address this service as a State-identified issue in the 1991-93 CSP cycle. The specific areas which may be addressed by the local districts as part of this initiative include:

- increasing the number of certified Family-type Homes;
- improving the capability of local staff to conduct inspections and to supervise the Family-type Home program;
- strengthening intra and interagency cooperation with CASA, Medical Assistance Home Care staff and other appropriate agencies, to improve the capability of the district to identify eligible persons (other than PSA clients) in need of residential care and, assure that they are assessed and placed in an appropriate level of care;
- improving the ability of the districts to provide supportive services to eligible residents of Family-type Homes and eligible residents of other residential programs;
- strengthening the relationship between the district and the Division of Adult Services regarding enforcement actions against non-compliant certified Family-type Homes and illegal operations; and
- other appropriate initiatives to enhance the capability of the districts to deliver this service.

Districts must address at least one of these areas during each year of the 1991-93 CSP cycle. A district also is expected to address a different area for each year of the plan.

INSTRUCTIONS FOR COMPLETING THE ANNUAL IMPLEMENTATION REPORT (A.I.R.)

I. PROGRAM PRIORITIES AND ACTIVITIES

NOTE: An optional form has been designed to assist districts in providing all necessary information related to Program Priorities and Activities. The district is free to submit a completed form for each priority or use the instructions below to submit the required information in a format of the districts own choosing.

Priorities must be stated for Protective Services for Adults, Residential Placement Service for Adults, Protective Services for Children, Preventive Services for Children, Adoption and Foster Care Services for Children. Also, districts may be required to state additional priorities depending on circumstances related to the State-identified Issues process. Since priorities have been identified for three years in this multi-year process, generally only a restatement of the original priority is required. Please note the exception to this is the requirement for the inclusion of the annual PSA public education and outreach plan as an addendum to the Protective Services for Adults program section (See page 17 for detailed instructions).

A. Assessment of progress in meeting priorities and implementing activities stated in the 1991-1993 Consolidated Services Plan and/ or 1992 A.I.R.

As part of the 1991-1993 Consolidated Services Plan, each district articulated a series of priorities. While these statements were to have been structured as three year goal statements, in some instances, it may have been necessary to amend some of the priority statements in the 1992 A.I.R.. The most current version of all priority statements must be included in the Annual Implementation report along with the Impact Statement for that priority for the second year of the plan cycle. The district must:

- make a specific assessment of its progress in relationship to the Impact Statement.

  Where the impact statement gave a numerical standard (e.g. 22% increase in the number of siblings placed together) the district should assess its progress using this same measure.(e.g. there has been an 18% increase in siblings placed together)

  In instances where the impact measure was more process-related (e.g. meetings will be held with all school superintendents) the district should quantify its progress in fulfilling the activity (e.g. Meetings have been held with 12 of the 16 districts and 3 more are scheduled to be held before the end of the current year.)

- If the district has not reached the level set by the impact statement, a brief discussion of the progress in implementing the related activities is required. This discussion should address reasons for the district's inability to attain its proposed level of progress and alternative directions or strategies the district might employ. IF THE IMPACT STATEMENT HAS BEEN REACHED OR EXCEEDED, THIS DISCUSSION IS OPTIONAL.

B. Statement of Priorities and Activities for the 1993 plan year

1. Priorities:

As stated above, it is expected that in the greatest majority of cases, the priorities set in previous years of the plan cycle will remain the same for the third year. However, if a locally-identified priority is discontinued or modified or if a new priority is established, a brief, clearly-stated rationale for such action is required. Such instances should occur infrequently. Districts identifying new or modified priorities in the A.I.R. must:

- o propose a programmatic improvement or enhancement that will affect a client population.
- o identify the specific client population to be affected or identify the measurable element in priorities related to administrative issues.
- o discuss the intended impact/outcome the implementation of the priority will have at the end of the year for which the modification is proposed.

NOTE: An optional form is provided for districts to use in proposing new priorities.

In addition, the district's Protective Services for Adults activities <u>must</u> address at least two items which are indicated as "not current practice" in PSA program information part of the assurances as set forth in Appendix E of the district's approved 1991-93 CSP and not addressed in the 1992 A.I.R.. The "not current practice" items can be addressed separately from the formal program priorities.

2. Activities

For the Report year, activities must be specified for each priority and must:

- o clearly indicate which priority it will effect.
- o state clearly the relationship between completing the activity and achieving the priority.

In general, new and/or expanded activities should be developed each year. If an activity is to be repeated from the previous year, justification of the continued appropriateness of that activity must be provided.

Activities may pertain to:

- o the better utilization of existing resources of the local district and of the other agencies involved in the provision of services,
- o the reallocation of resources;

- the expansion of available resources (fiscal and other), and
- administrative actions which will enable a district to better meet the service needs of the community.

3. Impact Statement

When each priority was first stated (either in the 1991-1993 Consolidated Services Plan or in the 1992 A.I.R.) the district also provided a statement of the intended impact of the implementation of the priority by the end of 1993. This impact statement should be repeated in the 1993 A.I.R..

4. Monitoring and Evaluation

Monitoring and evaluation are essential components of planning. Therefore, the district must have a clear strategy to perform these functions and formally designate staff responsibility. Thus, for each priority, the district must identify by title and work unit the individual(s) who will monitor the completion of the activities and the achievement of priorities.

- If staff assignments for monitoring each priority have changed since the submission of the 1991-1993 Consolidated Services Plan, these changes must be specifically referenced in the plan.
- If the information remains the same, no reference is necessary.
- In addition, if the district has included an new priority in the update, monitoring and evaluation information must also be provided.

II. SPECIAL POPULATIONS/ AREAS

A. Chapter 707 CPS Enhanced Reimbursement (OPTIONAL)

Chapter 707 of the Laws of 1988 provides for 75 per cent reimbursement for expenditures above an established maintenance of effort for either or both pre-determination and post-determination child protective services. The following instructions outline the planning requirements for accessing these enhanced funds. Districts are free to seek enhanced funding for either pre-determination or post-determination services, or both. Of course, the district may also elect to seek neither source of enhanced funding.

The instructions are divided into two parts, pre-determination services and post-determination services. In addition, within each part, full instructions for districts seeking these funds for the first time are followed by more abbreviated instructions for districts seeking continuation funding.

1. Pre-Determination Services

Chapter 707 requires that a district requesting enhanced reimbursement for pre-determination child protective services must develop a plan, with a schedule for implementation, for complying with enhanced performance standards for timely investigative activities and other child protective services, as set forth in department regulations.

a. For districts seeking enhanced reimbursement for the first time:

The plan should contain the following information:

- current average caseloads (average number of cases per worker) for each CPS unit in your district;
- current highest caseload;
- current description of child protective worker-to-supervisor ratio for each CPS unit in your district (note how senior caseworkers or similarly designated staff are utilized, if applicable);

Note: current refers to a snapshot of the caseload calculated on a specific day as up-to-date as possible in relation to the date of submission of your Report.

- anticipated average caseloads, highest caseload, and child protective worker to supervisor ratio beginning on January 1, 1994 and
- specific activities being taken between the period of January 1, 1993 and December 31, 1993 to arrive at your anticipated targets for January 1, 1994, for compliance with the enhanced standards.

b. For districts seeking continuation of enhanced reimbursement for pre-determination funding:

- Review data submitted in the 1992 Annual Implementation Report and update caseload and worker/ supervisor ratios as appropriate to reflect current averages.
- State whether the district has achieved anticipated targets set forth in the consolidated services plan or A.I.R. to achieve compliance with the enhanced standards.
- If the district has not achieved compliance with enhanced standards, detail specific activities to be undertaken in 1993 to reach compliance. (NOTE: eligibility for enhanced predetermination funding will be suspended for the entire period of non-compliance.)

2. Post-determination

Chapter 707 requires that the district develop a Community Services Assessment and Plan for the purpose of assessing the quality, availability, and accessibility of both child protective services and preventive services in order to be eligible for enhanced funding. It also calls for the

coordination of the child protective services and the preventive services component according to recommendations from the community child welfare assessment and planning committee. The recommendations of the committee must also serve as the basis for the specific priorities and activities set forth in the Community Service Assessment and Plan.

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

In addition to the specific requirements set forth in this section, districts must continue to submit information about Protective Services for Children and Preventive Services for Children as required on the various appendixes.

In the following section, the required elements of the plan are described in detail. This description of the plan is followed by two sets of submission instructions. The first set of instructions details the requirements for a district seeking initial eligibility for enhanced reimbursement for post-determination funding. The second section provides instructions for those districts seeking continued eligibility for enhanced reimbursement.

(a) Community Child Protective Services Assessment and Planning Committee

NOTE: Districts are not required to establish a new committee for protective and preventive planning if a functioning committee exists which meets the requirements for membership and can be approved for appointment by the county executive (the mayor in New York City). Agendas and minutes of the meetings should clearly reflect their role as a community child protective services assessment and planning committee.

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

The committee must consist of the following.

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

(b) **Assessment**

Districts are required to establish specific criteria for conducting the assessment of services quality, availability, and accessibility for child protective and preventive clients. The services areas to be included are noted below.

The selection of the criteria of need will be left to the discretion of the local district in consultation with the community child protective services assessment and planning committee to assure their applicability to a particular district's community.

The services areas which must be assessed include:

(1) assessment, diagnosis and treatment for alcoholism and substance abuse;

(2) mental health assessment, diagnosis and treatment; and

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

The assessment must identify issues of availability and accessibility and include a discussion of the mechanism for interagency referrals. In addition, each district's committee must identify some measures of quality which will receive support across agency lines.

(c) **Program Priorities and Activities**

The priorities established for the Protective Services for Children and Preventive Services for Children components must be directly related to and supported by the needs discussion and the recommendations developed by the Community Child Protective Services Assessment and Planning Committee.

(d) **Monitoring and Evaluation**

The district must establish a plan for monitoring and evaluating the performance of the child protective services unit in achieving the priorities for the delivery of CPS as set forth in the Community Services Assessment and Plan portion of the Protective Services for Children and Preventive Services for Children components.

a. For districts seeking initial Enhanced Reimbursement for post-determination services the plan must include the following information:

Community Child Protective Services Assessment and Planning Committee

- agency membership list by agency and title;
- committee chair by agency and title; and

- a discussion of the issues raised, the impact on the development of the Community Services and Assessment Plan, and a general statement of the recommendations put forth by the committee including timelines for ensuring the availability of and assistance to families in obtaining services in the services areas noted in the following section.

Assessment

- criteria established for conducting the assessment;
- a discussion of each of the three specific areas in terms of quality, availability and accessibility; and
- data, for each service area, including but not limited to: numbers of clients currently in receipt of services; numbers of clients identified as requiring a service which is currently not available; numbers of clients projected to need the service for the coming calendar year.

Priorities and Related Activities

- Priorities and related activities are to be formulated and stated in the same manner as for all other program areas. Please refer to pages 9-10 for specific standards for the development of Program priorities and activities.

Monitoring and Evaluation

- the title and work unit of the individual responsible for monitoring completion of each activity related to each priority.;
- the proposed method of monitoring each activity briefly stated including the periodicity of the monitoring activities and the feedback mechanism to the CPS unit; and a brief description of other proposed outside evaluations of the performance of the CPS unit, if applicable.

b. For districts seeking continued enhanced reimbursement for post-determination services the plan submission must contain the following:

Community Child Protective Services Assessment and Planning Committee

- listing of any changes in the membership, structure or committee chair.
- summary of any newly identified issues emerging from the committee's deliberations.

NOTE: While every effort has been made to minimize the extent of documentation of the planning process related to enhanced post-determination funding, it is expected that the district's Community Child Protective Assessment and Planning Committee will continue to function as a vital and active component of the local planning process.

Assessment

- Any revisions to the district's criteria for conducting the assessment.
- Updated data for each services area as described above.

Priorities and Related Activities

- Discussion of program priorities and activities should be handled in the same manner as in all other program areas. The district may opt to use the Program Priorities and Activity Form included with these guidelines.

Monitoring and Evaluation

- detailed description of any revisions to the monitoring and evaluation strategy that was previously submitted.

B. Purchase of Preventive Services from Public Agencies

During 1992, simplified procedures were implemented for obtaining Department approval for the purchase of preventive services from a public agency as required under 18NYCRR 432.2. These procedures, outlined in 92-LCM-33 and repeated below, integrate the submission and approval process into the overall Consolidated Services Planning and Update process. A request for approval must be included in the A.I.R. submission for any new public purchase contract(s) or changes in existing public purchase contracts proposed for 1993. Previous approvals for public purchase of preventive service contracts are valid for the remainder of the three-year cycle as long as there are no substantive changes to the agreement.

A district requesting approval of a public purchase agreement is encouraged to integrate the request into its Preventive Services Program Priority and Activities. However, all information necessary to review the request must be clearly detailed in the submission. Depending on local circumstances, the request may be referenced in an existing priority or a new/amended priority. In either instance, the discussion of activities for the coming year must include the following information:

- The public agency with which the district proposes to contract.
- Whether the conract will be for mandated or optional preventive services.
- What specific service(s) will be provided by the public agency and whether the case planning function as defined in 18 NYCRR 423.2(b)(2) will be the responsibility of the public agency.
- The specific target population of the preventive service and the estimated number of families to be served during the year.

In addition to this planning information, an addendum to the program assurances submitted as part of the 1991-1993 Consolidated Services Plan must be signed and included in the 1993 A.I.R.. The additional assurances are provided in an attachment to these guidelines.

Finally, a brief worksheet designed to expedite the Department review and approval is also included as part of these guidelines. While we ask that this worksheet be submitted along with the district's A.I.R. submission if an approval for public purchase of preventive services is being requested, the worksheet will not be viewed as a component of the A.I.R. document. The information provided in this worksheet will NOT be included in the final published version of the A.I.R..

C. Amendment of the TASA Plan

Each district must review its currently approved Plan and determine if any amendments relating to client population and the administration of the TASA program are desired or required. The Department has prepared an optional form to report amendments in those aspects of the plan where changes are most likely to be required. The form can be found in the attachments section of these guidelines. The district is free, however, to submit its revisions in the originally prescribed format for the TASA plan.

D. Amendment to Services for Victims of Domestic Violence

Chapter 53 of the Laws of 1991 significantly revised local requirements for the design, delivery and reimbursement for services for victims of domestic violence. These changes include new requirements for the provision of non-residential services and the establishment of a state-level rate setting mechanism for residential services.

During 1992, all districts were required to submit plan amendments detailing their proposed strategy for meeting these new requirements. If a district is proposing a change from its in 1992 plan amendment, it should be included in the 1993 A.I.R. submission.

Changes concerning any of the following must be included in the 1993 A.I.R.:

- Whether you will provide non-residential services directly or by purchase of service;
- If you are purchasing non-residential services from a different organization(s) than in 1992, provide a COMPLETE revised list of the agencies you will be contracting with for the provision of non-residential services. Include both agency names and addresses.
- Provide a detailed description of the design of each newly added non-residential services program includes a description of:
  - each of the service components;
  - how frequently services are provided including the days and hours of service availability;
  - the location of the services as it relates to client safety and confidentiality; and
  - the staff responsible for the provision of non-residential services.
- For previously identified non-residential programs, provide a description of any changes affecting the aspects listed above.
- Similarly, if changes are proposed in the provision of residential services, these changes should also be outlined in the A.I.R..

Districts are reminded to **review all appendices** to ensure that these forms reflect the most current information related to these services. It may also prove helpful to check whether all appendices were amended to reflect any plan amendements submitted during the past year.

E. PSA Public Education and Outreach Plan (Required)

Section 457.7(f) of the Department's regulations,which became effective on October 10, 1990 requires social services districts to develop and implement annual PSA public education and outreach plans, subject to approval of the Department. This plan must be incorporated into the District's 1993 A.I.R. as an addendum to the Protective Services for Adults program section.

Studies have indicated that the most effective vehicle for identifying potential abuse/neglect situations is through the implementation of an effective public education campaign. Increasing the public's awareness of the problem of adult abuse and neglect will increase the likelihood that clients who were previously unserved and living at risk are identified and provided with appropriate services. Informing service providers of the purpose and scope of PSA will lead to more appropriate referrals and more effective coordination of services. To accomplish these goals of improved access and better service delivery, local districts public education and outreach plans should have a two-pronged approach: educating the general public as to what Protective Services for Adults are and how to obtain them; and educating service providers on the scope and limitations of the PSA program. Following are specific instructions for the completion of this plan.

As stated above, districts must submit, on an annual basis, a public education and outreach plan which describes the specific activities that will be undertaken by the district to educate the general public, service providers, advocacy groups, church councils and other agencies about the scope of the PSA program and how to obtain service. Information on the scope of PSA must include the PSA client characteristics and eligibility criteria discussed in 90-ADM-40.

The plan, submitted as part of the A.I.R. for 1993, must describe public education activities to be conducted during the time period of January-December 1993. Subsequent public education and outreach plans must be included in each year's CSP or A.I.R..

I. The plan must indicate the specific education and outreach activities to be undertaken with the general public and with service providers, advocacy groups and other appropriate agencies representing aging, health, mental health, legal and law enforcement. (The agencies are described in the PSA-Agency Consultation section of the Public Participation requirements for the A.I.R.). These agencies must be included as part of any general education activities such as mail-outs of informational materials. Other examples of public education and outreach activities include making informational presentations to the staff of other agencies, conducting workshops on PSA issues, establishing task forces or multi-disciplinary teams, developing formal linkages through written agreements or updating existing agreements to include the issue of access to services. Public education and outreach activities which have been previously listed to meet the priority of "Improving the Ability of the District to Identify and Serve Persons in Need of PSA" may be referenced here to avoid duplication of effort.

II. The plan must indicate how informational materials provided by the Department and any locally developed materials will be utilized.

III. The plan must describe the anticipated impact of the district's public education and outreach activities on PSA referrals and opened PSA cases during 1993 as compared to 1992. This should be indicated by either a projected percentage or actual number increase. In subsequent plans the impact of the previous years public education activities must be included.

IV. The plan must specifically address how the activities selected will be sufficient to ensure access to PSA to the general public and to other agencies.

V. The plan must include a brief status report on last year's education and outreach activities and include a statement on the impact of those activities on PSA referrals and the number of opened cases.

Districts may use the following model format when preparing the plan:

PSA Public Education and Outreach Plan

I. Describe below the public education and outreach activities planned for the period January 1 to December 31, 1992. Indicate specific activities such as informational mailings, presentations, media involvement, workshops etc. for the following:

A) General Public,
B) Service Providers, Advocacy groups other agencies. (Please indicate those activities which will apply to all agencies, and any agency specific activities which will be employed).

II. Describe how state distributed and any locally developed informational materials will be used.

III. Describe the anticipated impact on PSA referrals and cases during the coming year. Include current intake and open case information and estimated change.

IV. Describe how the activities planned will be sufficient to ensure access to PSA.

V. Briefly describe the status of last year's activities and the impact of those activities on PSA referrals and open cases.

III. Public Participation (Required)

Public participation is a critical of social services planning. Since there are many approaches to meaningful public participation, the Department does not prescribe specific process requirements, except where the Social Services Law imposes specific demands. Therefore, districts are encouraged to use methods which best meet local needs.

Districts must also be aware that there are specific statutory requirements which apply to Child Protective Services, Child Welfare Services and Protective Services for Adults components. These requirements, as well as the general requirements related to the remainder of the public who would be given an opportunity to participate, are discussed below.

A. **General Requirements**

The public participation component is to be written for ease of understanding by the local community and to encourage future participation as well as to document the local district's compliance with the planning requirements. In addition to the four major legal requirements outlined below, districts should discuss the role of consumers and other interested community individuals in the public participation process.

This section should describe briefly the methods used to achieve input in the development of the A.I.R., number of persons attending meetings and include a discussion of the issues raised and the impact on the service delivery system.

B. **Legal Requirements**

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

(1) **Public Hearing**

Section 34-a.3(a) of the Social Services Law requires at least one public hearing to be held at least 15 days prior to submission of the plan to the Department. Section 34-a.3(a) requires the district to advertise the public hearing at least 15 days in advance and the notice of such a hearing must specify the dates and times during the public hearing(s) when the Child Protective Services, Adult Services and Family and Children's Services components of the Consolidated Services Plan are to be considered. Public hearings may be accomplished utilizing innovative formats such as radio or T.V. talk shows or an agency open house. In addition, the local district may choose to conduct a joint public hearing with another agency. In those instances, the times reserved for consideration of issues relating to the district, and to the specific services components of the district or agency, must be stated in the hearing notice.

The local district must make available at the hearing(s) either copies of relevant material provided by the Department or copies of the completed draft plan, depending upon whether the hearing is being used in the development or review phase.

This section must include:

- the date(s) of such hearing(s);
- how the hearings were publicized (a copy of advertisements and fliers must be attached);
- the number of persons who attended;
- a listing of the organizations/agencies represented at the hearing; and
- a discussion of the issues raised and the impact on the service delivery system.

(2) **Protective Services for Adults - Agency Consultation**

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

In order for a district to meet these requirements, its plan must reflect the involvement of at least one agency from each of these five mandated services areas. In meeting these requirements, the districts are strongly encouraged to include at least public human services agencies, such as the Area Agency on Aging, the Health Department (where one exists) and the County Mental Health Department in the PSA planning process. The districts are also encouraged to involve additional aging, health and mental health providers, as well as more than one agency from both the legal and law enforcement areas in the PSA planning process. Some of these agencies and organizations from these mandated areas are listed below.

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

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

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

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

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

This section must include:

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

(3) **Child Protective Services (CPS)**

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

This section must include:

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

(4) **Child Welfare Services**

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

This section must include:

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

If there is a problem in establishing meetings with any one of the groups referenced in the public participation requirements, the Department is available to facilitate such contact. A request for such assistance can be made by contacting the appropriate Regional Office Director.

APPENDIXES

ATTACHMENT

ENCLOSURES

CHECKLIST FOR SUBMISSION

Please submit this form as part of the Annual Implementation Report

	SUBMITTED	NOT SUBMITTED (refer to 1991-93 CSP and/or 1992 A.I.R.)
Report on Priorities and Activities	_____	required
New and amended Priorities	_____	_____
PSA Public Education and Outreach Plan	_____	required
Public Participation	_____	required
Application for enhanced funding for CPS predetermination services	_____	not applicable
Community Services Assessment and Plan (for post-determination services)	_____	not applicable
New/ Amended Proposal for Purchase of Preventive Service from a Public Agency.	_____	not applicable
TASA amendment	_____	_____
Services to Victims of Domestic Violence	_____	_____
Organizational Chart	_____	_____
Estimate of Persons to be served	_____	_____
Estimate of Expenditures	_____	required
Matrix of Program Information	_____	_____
Commissioner's Signature	_____	required
Signature of chief elected officer	_____	required
Introduction page	_____	required
Child Care: Please check if a complete JOBs Plan has been submitted.	_____	

Consolidated Services Plan (CSP)
NYS DSS Contact People

7/91

County	Family & Children Services	Adult Services * Numbers listed below
Albany	Betsy Mannix**(518) 432-2758	Michael Monahan
Allegany	Paul Mann (716) 847-3144 or 3145	Michael Monahan
Broome	John McCann (518) 432-2775	Janet Morrissey
Cattaraugus	Paul Mann (716) 847-3144 or 3145	Michael Monahan
Cayuga	Michael Melara (315) 428-3235	Kathleen Crowe
Chautauqua	Lynne Vallone (716) 847-3144 or 3145	Michael Monahan
Chemung	Pat Heamon (716) 238-8201	Kathleen Crowe
Chenango	Michael Melara (315) 428-3235	Janet Morrissey
Clinton	Larry Gravett (518) 432-2756	Thomas Burton
Columbia	Andrea Smith (518) 432-2760	Thomas Burton
Cortland	John McCann (518) 432-2775	Janet Morrissey
Delaware	Nancy Griffin (518) 432-2781	Thomas Burton
Dutchess	Ellen Lally (212) 804-1195	Irv Abelman
Erie	Gwendolyn Bennett (716) 847-3144 or 3145	Michael Monahan
Essex	Wanda Austin (518) 432-2759	Thomas Burton
Franklin	Wanda Austin (518) 432-2759	Thomas Burton
Fulton	Marilyn Riley (518) 432-2752	Michael Monahan
Genesee	Paul Mann (716) 847-3144 or 3145	Michael Monahan
Greene	Bill Dorr (518) 432-2753	Janet Morrissey
Hamilton	Diane Ewashko (518) 432-2754	Michael Monahan
Herkimer	John McCann (518) 432-2775	Janet Morrissey
Jefferson	Michael Melara (315) 428-3235	Janet Morrissey
Lewis	John McCann (518) 432-2775	Janet Morrissey

County	Family & Children Services	Adult Services
Livingston	Pat Heamon (716) 238-8201	Kathleen Crowe
Madison	John McCann (518) 432-2775	Janet Morrissey
Monroe	Pat Heamon (716) 238-8201	Kathleen Crowe
Montgomery	Andrea Smith (518) 432-2760	Janet Morrissey
Nassau	Ellen Lally (212) 804-1195	Irv Abelman
Niagara	Lynne Vallone (716) 847-3144 or 3145	Michael Monahan
Oneida	John McCann (518) 432-2775	Janet Morrissey
Onondaga	Michael Melara (315) 428-3235	Kathleen Crowe
Ontario	Pat Heamon (716) 238-8201	Kathleen Crowe
Orange	Ellen Lally (212) 804-1195	Irv Abelman
Orleans	Paul Mann (716) 847-3144 or 3145	Michael Monahan
Oswego	Michael Melara (315) 428-3235	Janet Morrissey
Otsego	Betsy Mannix (518) 432-2758	Thomas Burton
Putnam	Ellen Lally (212) 804-1195	Irv Abelman
Rensselaer	Marilyn Riley (518) 432-2752	Michael Monahan
Rockland	Ellen Lally (212) 804-1195	Irv Abelman
St. Lawrence	John McCann (518) 432-2775	Janet Morrissey
Saratoga	Larry Gravett (518) 432-2756	Michael Monahan
Schenectady	Mary Fitzgerald (518) 432-2778	Janet Morrissey
Schoharie	Bill Dorr (518) 432-2753	Janet Morrissey
Schuyler	Pat Heamon (716) 238-8201	Kathleen Crowe
Seneca	Pat Heamon (716) 238-8201	Kathleen Crowe
Steuben	Pat Heamon (716) 238-8201	Kathleen Crowe
Suffolk	Ellen Lally (212) 804-1195	Irv Abelman
Sullivan	Ellen Lally (212) 804-1195	Irv Abelman
Tioga	Michael Melara (315) 428-3235	Janet Morrissey
Tompkins	Michael Melara (315) 428-3235	Janet Morrissey

County	Family & Children Services	Adult Services
Ulster	Ellen Lally (212) 804-1195	Irv Abelman
Warren	Nancy Griffin (518) 432-2781	Michael Monahan
Washington	Mary Fitzgerald (518) 432-2778	Michael Monahan
Wayne	Pat Heamon (716) 238-8201	Kathleen Crowe
Westchester	Ellen Lally (212) 804-1195	Irv Abelman
Wyoming	Lynne Vallone (716) 847-3144 or 3145	Michael Monahan
Yates	Pat Heamon (716) 238-8201	Kathleen Crowe
NYC	Ellen Lally (212) 804-1195	Irv Abelman

* Adult Services

Irv Abelman 1-800-342-3715 ext. 432-2980 or (212) 804-1247
Thomas Burton 1-800-342-3715 ext 432-2987 or (518) 432-2987
Kathleen Crowe 1-800-342-3715 ext. 432-2996 or (518) 432-2996
Michael Monahan 1-800-342-3715 ext. 432-2667 or (518) 432-2667
Janet Morrissey 1-800-342-3715 ext. 432-2997 or (518) 432-2997

** All 518 area code numbers may also be reached by dialing 1-800-342-3715 and requesting the 7-digit number.

The contact listed below is for all counties.

Bureau of Services Information Systems
Community Facilities Registry Project
Cynthia Sodher (518) 432-2941
For information related to the
Facilities Registry

PROGRAM PRIORITIES WORKSHEET
REPORT ON PROGRESS AND PLANS FOR THE COMING YEAR

PRIORITY:

MEASURABLE IMPACT STATEMENT FROM 1992 ANNUAL IMPLEMENTATION REPORT:

DISTRICT'S PROGRESS IN ATTAINING IMPACT MEASURE: (Please indicate level of attainment in terms of the impact statement):

SUMMARY OF PROGRESS IN IMPLEMENTING ACTIVITIES RELATED TO THIS PRIORITY (Optional if Impact Measure has been met or exceeded.)

PROGRAM PRIORITIES WORKSHEET
PAGE TWO

MEASURABLE IMPACT STATEMENT FOR 1993 AS STATED IN THE 1991-1993 CONSOLIDATED SERVICES PLAN OR 1992 A.I.R.:

ACTIVITIES PLANNED FOR 1993

MONITORING AND EVALUATION STRATEGY AND STAFF ASSIGNMENT (To be completed only if different from previous submission.)

NEW OR AMENDED PRIORITIES FOR 1993
WORKSHEET PAGE ONE

PROGRAM PRIORITY: (Priority should provide a clear statement of the client population to be affected and the programmatic improvement or enhancement desired.)

RATIONALE: (Briefly describe the need for the priority, referencing relevant data indicators as appropriate.)

MEASURABLE IMPACT STATEMENT FOR 1993:

NEW OR AMENDED PRIORITIES WORKSHEET
PAGE TWO

ACTIVITIES PLANNED FOR 1993:

MONITORING AND EVALUATION STRATEGY AND STAFF ASSIGNMENT:

Annual Implementation Report

January 1, 199__ - December 31, 199__

_____ County

This Annual Implementation Report is the update for the above noted program year to the 1991-1993 Consolidated Services Plan. The report contains the Program Priorities and activities to be undertaken by the District for Adoption, Foster Care Services for Children, Preventive Services for Children, Protective Services for Adults,, Protective Services fro Children, Other Adult Services, and Other Children and Family Services. In addition, the Report contains a description of public participation. As necessary, the Report contains updated information from the 1991-1993 Consolidated Services Plan for estimates of persons to be served, estimates of expenditures, and program information. Additional information may be found in the district's 1991-1993 Consolidated Services Plan. Anyone interested in participating in the plan process may do so by

.....

I hereby approve and submit the Annual Implementation Report for the _____ County Department of Social Services for the period of January 1, 1993 through December 31, 1993.

This report provides the status of Program Priorities and activities detailed in the 1991-1993 Consolidated Services Plan and outlines activities planned for 1993. Information is included in the Annual Implementation Report only as is necessary to update information provided in the Consolidated Services Plan. The district asserts that in all instances where the district has not specifically indicated the contrary, the information included in the 1991-1993 Consolidated Services Plan is accurate and continues to reflect the district's intentions.

_____ Date

_____ Commissioner

Enclosed is the Annual Implementation Report for the Consolidated Services Plan for _____ County. My signature below constitutes approval of this report.

_____
Date

_____
(Chief Elected Officer: or the Chairperson of the legislative body in those districts without a chief elected officer.

AMMENDMENT TO PROGRAM ASSURANCES
PUBLIC PURCHASE OF PREVENTIVE SERVICES

_____County

6. ASSURANCES:

1. Reimbursement for covered services is claimed under Preventive Services funding only after program and client eligibility for other federal and State funding for such services is considered and appropriately applied.

2. The contract for the purchase of preventive services from the public agency meets all contract requirements set forth in 18NYCRR Part 405 and 18NYCRR 423.4 (f).

3. In accordance with 18NYCRR 423.4 (f), if the public agency will be responsible for the case planning activities, the contract clearly designates that function as being the responsibility of the public agency. It also clearly states that the case management function, including the approval of eligibility, authorization of preventive services, and the review and approval of the case plans, including the Uniform Case Record, remains the responsibility of the social services district.

_____
Signature of Commissioner

Dated_____

PUBLIC PURCHASE OF PREVENTIVE SERVICES

_____County

ADDITIONAL INFORMATION:

1. Estimated Contract dollar amount:_____

2. Change is required to Appendix F of the Consolidated Services Plan and a copy is attached: _____(yes/no)

3. District Contact person:_____

   Telephone Number: (___)_____

TASA PLAN AMENDMENT FORMAT (OPTIONAL)

Complete ONLY those sections where a change is proposed from the previous submission.

I. PROGRAM CHARACTERISTICS

A. Method of Provision: Direct, Purchased or Combined (Circle One)

B. Client Population:

Cases will be OPENED for clients under the age of: _____

Cases will be CONTINUED for clients up to the age of: _____

The following "AT RISK" categories will be served:
(If the district intends to add or delete at-risk groups, please mark all groups that would constitute the districts new array of eligible categories, NOT JUST THE NEWLY ADDED CATEGORIES.)

[ ] 1. Receives PA in own right
[ ] 2. Homeless
[ ] 3. Past abortion/miscarriage
[ ] 4. Pregnancy test
[ ] 5. Sexually active
[ ] 6. Non custodial parent
[ ] 7. Sibling of teen parent
[ ] 8. Rape/incest victim
[ ] 9. School dropout
[ ] 10. School problems
[ ] 11. Client/representative request

II. TASA PROGRAM ADMINISTRATOR

The TASA Administrator is the local district employee who is responsible for the overall administration of the TASA Program in the county. Please provide any information on staffing changes.

NAME: _____ TITLE: _____

UNIT/DIVISION: _____

ADDRESS: _____
_____
_____
_____

PHONE NO.: (_____) _____ EXTENSION: _____

III. TASA AGENCY INFORMATION

(Provide this information for EACH agency providing TASA in your district if: (a) the agency is a new TASA provider or (b) the agency has experienced a change in personnel

A. TASA SUPERVISOR

The TASA supervisor is the local district or provider agency employee who is responsible for the day-to-day administration of the TASA program in this agency.

NAME: _____

TITLE: _____

AGENCY: _____

STREET: _____

_____

_____, NY _____-_____
CITY ZIP CODE

PHONE NO.: (_____) _____ EXTENSION: _____

TASA STAFFING

Number of FULL TIME TASA case managers: _____

Number of *PART TIME TASA case managers: _____

Number of TASA case aides: _____

*PART TIME case managers are those who are only employed part time under this agency's standards, or those who work part time on TASA and part time on other assigned duties.

APPENDIXES

The instructions contain copies of the appendixes and additional copies will be distributed for district utilization under separate cover.

Appendix A - Organizational Chart

(Submit only if changes have occurred since submission of the 1992 A.I.R.)

Both the Adult Services and the Family and Children's Services organizational units must be delineated, and the relationship of those units to the Commissioner and to other components of the district (e.g., income maintenance and medical assistance) must be identifiable. Location of the Post Institutional Services Planning Program (PISP) must be shown.

For Adult Services the District must indicate the units which provide PSA, PISP, and Other Adult Services. For Family and Children Services the units providing Child Protective Services, Preventive Services, Adoption, Foster Care and Other Family and Children Services must be indicated. Districts which have specialized units such as employment, homemaker, day care, intake, etc. should so indicate. Districts without specialized units should indicate in which unit these functions occur.

Appendix A represents the total number of staff involved in the provision of services and the full-time equivalent staff, expressed as an absolute number, for each service which was addressed in the Family and Children's Services and Adult Services program components.

Example 1

A district has 3 combined Foster Care/Adoption units with a a total of 25 caseworkers (CWs). Some CWs devote time to both services; others work on a half time basis. The information should be collected in a manner that facilitates completion of the chart. This format may prove useful for that purpose:

Service	# of CWs	X	% time assigned	Total FTE
Foster Care	10		1.0	10.0
	1**		.5	.5
	8 *		.75	6.0
Adoption	(8)*		.25	2.0
	5		1.0	5.0
	1**		.5	.

* same full time persons ** part time persons

To obtain the number of persons, each CW that devotes time to the service must be counted regardless of the amount of time If 8 CW spend .25 of the time in Adoption, the employees will still be counted as 8 persons. It is FTEs and not the number of persons which should reflect the actual allocation of human resources. In the case of the 8 employees working .25 time on Adoption, the FTE will be 8 X .25 = 2. While CWs working in both Adoption and Foster Care Services will be counted in two (or more) separate services, the duplication will not affect total FTE.

The information should be reflected in the Appendix A Chart a follows:

Service	Persons	Title	FTE
Foster Care	19	Caseworkers	16.5

Example 2

A smaller district has a multi-service unit which has 5 caseworkers. In such instances it is likely that all CWs are devoting time to Preventive, Foster Care, Adoption, and other F&CS. Thus, in calculating the FTEs, special attention should be given to organizing the information in a useful and meaningful way.

Service	# of CWs	X	% time assigned	Total FTE
Preventive	5		.20	1.00
Foster Care	(4)*		.50	2.00
Adoption	(4)*		.25	1.00
Other (F&CS)	(5)*		.20	1.00

* This represents the same 5 full-time persons

The information should be reflected in the chart as follows:

Service	Persons	Title	FTE
Preventive	5	Caseworkers	1.00
Foster Care	4	Caseworkers	2.00
Adoption	4	Caseworkers	1.00
Other F & CS	5	Caseworkers	1.00

Minimally, staffing information is required for the following services:

-Protective Services for Adults
-Preventive Services for Children
-Adoption
-Other Family and Children Services
-Other Adult Services
-Foster Care
-Protective Services for Children
-Day Care

Data on Other Adult and Other Family and Children Services is optional.

For each service there should be a corresponding list of position titles, the number of staff who will be occupying those positions, and FTE's. The computed FTE should represent the total of client interaction activity as well as the time expended on related administrative functions.

Appendix B - Estimate of Persons To Be Served **(Submit Only if Estimates Differ from Those Made for 1992)**

NOTE: Districts are encouraged to make revisions on the form submitted in 1992 and revisions in the margins.

Estimates must be shown for all child and family services and all adult services which meet Title XX definitions that local agency provides, regardless of funding (IV-A day care, XIX family planning, et al). All unshaded fields must be filled.

Entries are to represent all clients to be served by the local department of social services whether they are served directly by district staff or if they receive services from another agency through a purchase of services contract with the local district.

TOTAL: Total number of adults and children expected to receive services.
CHILDREN: Total number of children expected to receive services.
ADULTS: Total number of adults expected to receive services.

The following EXAMPLE illustrates how children and adults should be counted:

It is estimated that a total of 15 children and 12 adults will receive Day Care services. Total persons receiving services is 27 (the sum of the number of Children and Adults). It is recognized and noted that every person included in a local district's estimate will not necessarily be a primary recipient of services.

SERVICE TYPE	TOTAL	CHILDREN	ADULTS
DAY CARE	27	15	12

LINE INSTRUCTIONS FOR PSA AND CPS INVESTIGATIVE: In completing lines 8 (CPS) and 12 (PSA) on Appendix B, please include the total number of individuals projected to be receiving the investigative component of these services. This would include all individuals who are referred as possibly in need of the services regardless of whether or not a case is opened and authorized for either CPS or PSA. Therefore the number on lines 8 and 12 should be greater than the number on lines 7 and 11 respectively.

LINE INSTRUCTIONS FOR FOSTER CARE:

Lines 23-26 Level of Placement
Column 2 is the number of Non JD/PINS children. Identify JD/PINS in DFY programs (Start Centers, YDCs etc.) in column 4. Identify JD/PINS in the Commissioner's custody (UCR completed) in column 5. If you cannot separately identify these clients from the DFY JD/PINS, DO NOT list them here, but use column 4 for both and include a footnote stating that this is a combined number.

Column 1 "Total" is equal to the sum of all Columns.

Line 27 COH
State Education Department Committee on the Handicapped placement. This number should not be included in lines 23-26.

Unduplicated Count
This number should be your closest estimate concerning unduplicated counts of children in foster care who are expected to be in some level of care at some point during an annual period. If a child is expected to have multiple placements during the year in one or more facility types, that child is only counted once. In this entry, the number represents single clients and not instances of services provision.

Appendix C-Estimate of Expenditures **(Required)**

NOTE: Maintenance of effort levels for Protective Services for Children and Preventive Services for Children will be pre-printed for each county on Appendix C and forwarded under separate cover. The Maintenance of Effort for Preventive Services for Children will be calculated as 24 percent of your Title XX allocation, as called for in Chapter 51 of the Laws of 1991. In addition, the district's Federal Title XX allocation will be pre-printed on the last page of Appendix C.

Districts are required to submit an Appendix C showing estimated expenditures for the coming planning year. However, districts have the option of submitting a chart which would include only gross services dollar expenditures for publication in the Plan. Appendix C would remain on file with the Department and not be published. Please note that Appendix C encompasses services expenditures. The total dollar column is simply the sum total of the other columns. The dollar amounts submitted in each of the other columns should reflect total federal, state, and local dollars. In the case of Title XX, the district should include any local funds that will be used to match the federal allocation. On the last page of the appendix, the district should indicate on the line provided the amount of local funds reflected within the Title XX Total.

FUNDING SOURCE

	Percentages:		
	Federal	State	Local
Federal Title XX	Not applicable *		
Federal Title XIX	50	25	25
- Family Planning	90	5	5
Federal IVE	50	25	25
Federal IVA/EAF	50	25	25
** State Adoption Services and Mandated Child Preventive		75	25
** State Adult and Child Protective, Optional Child Preventive		50	50
** State FNP - IM/EAA, Child Welfare and Foster Care		50	50

* There is no State match for Title XX funds during 1992-93. The percentage allocation between Federal and local funds will be determined by the level of local funds made available by the district.

** After federal reimbursement is fully utilized.

Appendix F - Program Information (Required)

NOTE: This appendix has been slightly revised to more accurately reflect eligibility information that should be consistent across all districts. Therefore, all districts are requested to submit a new Appendix F.

Districts are required to submit Appendix F which reflects the program information regarding eligibility limits, goals, method of provision and category of clients served. The chart provides a complete itemization of the restrictions on and the availability of any Title XX service and it is used to update each district's WMS/SSRR matrix for WMS authorization.

The blank spaces in the chart under Goals, Methods and Eligibility Categories must be completed with either a "Y" = Yes or "N" = No. Where the chart contains a pre-printed "Y" or "N", that particular item is determined by State mandate. Where the "Y" is preprinted districts must maintain the ability to provide that service.

Since Appendix F is utilized in Services Systems to update your WMS/SSRR matrix for authorization of services, make sure that the following information is noted.

1. County Code. Complete with your 2 digit number (e.g. Albany = 01).

2. Method of Provision has preprinted Y's in the purchase private section of Adoption and Foster Care Children. This insures your ability to authorize adoption subsidies and service and maintenance payments.

When your district provides a component of a primary service (Protective Adults, Protective Children, and Child Preventive Services), a "Y" entry is required under the appropriate method of provision of the primary service.

For example, if your district is going to provide purchased day care, transportation, etc., as a component of mandated Preventive Children Services, a "Y" entry is required under the appropriate purchase categories on the line for mandated Preventive Services.

APPENDIX A

DSS-xxxxEL
(7/90)

CONSOLIDATED SERVICES PLAN
19 SERVICES STAFFING INFORMATION

COUNTY NAME:	COUNTY CODE:

SERVICE	PERSONS	TITLE	FTE*
Protective Services for Adults	___ ___ ___ ___ ___ ___	Supervisor Senior Caseworkers Caseworkers Case Aides _____ _____	___ ___ ___ ___ ___ ___
Other Adult Services	___ ___ ___ ___ ___ ___	Supervisor Senior Caseworkers Caseworkers Case Aides _____ _____	___ ___ ___ ___ ___ ___
Preventive Services for Children	___ ___ ___ ___ ___ ___	Supervisor Senior Caseworkers Caseworkers Case Aides _____ _____	___ ___ ___ ___ ___ ___
Foster Care Services for Children	___ ___ ___ ___ ___ ___	Supervisor Senior Caseworkers Caseworkers Case Aides _____ _____	___ ___ ___ ___ ___ ___
Adoption	___ ___ ___ ___ ___ ___	Supervisor Senior Caseworkers Caseworkers Case Aides _____ _____	___ ___ ___ ___ ___ ___
Protective Services for Children	___ ___ ___ ___ ___ ___	Supervisor Senior Caseworkers Caseworkers Case Aides _____ _____	___ ___ ___ ___ ___ ___

*Full Time Equivalent

APPENDIX A

DSS-xxxxEL
(7/90)

CONSOLIDATED SERVICES PLAN
19 SERVICES STAFFING INFORMATION

COUNTY NAME:	COUNTY CODE:

SERVICE	PERSONS	TITLE	FTE*
Day Care Services for Children	___ ___ ___ ___ ___ ___	Supervisor Senior Caseworkers Caseworkers Case Aides _____ _____	___ ___ ___ ___ ___ ___
Other Family and Children Services	___ ___ ___ ___ ___ ___	Supervisor Senior Caseworkers Caseworkers Case Aides _____ _____	___ ___ ___ ___ ___ ___
	___ ___ ___ ___ ___ ___	Supervisor Senior Caseworkers Caseworkers Case Aides _____ _____	___ ___ ___ ___ ___ ___
	___ ___ ___ ___ ___ ___	Supervisor Senior Caseworkers Caseworkers Case Aides _____ _____	___ ___ ___ ___ ___ ___
	___ ___ ___ ___ ___ ___	Supervisor Senior Caseworkers Caseworkers Case Aides _____ _____	___ ___ ___ ___ ___ ___
	___ ___ ___ ___ ___ ___	Supervisor Senior Caseworkers Caseworkers Case Aides _____ _____	___ ___ ___ ___ ___ ___

*Full Time Equivalent

APPENDIX A

DSS-xxxxEL
(7/90)

CONSOLIDATED SERVICES PLAN
19 SERVICES STAFFING INFORMATION

COUNTY NAME:	COUNTY CODE:

SERVICE	PERSONS	TITLE	FTE*
	___ ___ ___ ___ ___ ___	Supervisor Senior Caseworkers Caseworkers Case Aides _____ _____	___ ___ ___ ___ ___ ___
	___ ___ ___ ___ ___ ___	Supervisor Senior Caseworkers Caseworkers Case Aides _____ _____	___ ___ ___ ___ ___ ___
	___ ___ ___ ___ ___ ___	Supervisor Senior Caseworkers Caseworkers Case Aides _____ _____	___ ___ ___ ___ ___ ___
	___ ___ ___ ___ ___ ___	Supervisor Senior Caseworkers Caseworkers Case Aides _____ _____	___ ___ ___ ___ ___ ___
	___ ___ ___ ___ ___ ___	Supervisor Senior Caseworkers Caseworkers Case Aides _____ _____	___ ___ ___ ___ ___ ___
	___ ___ ___ ___ ___ ___	Supervisor Senior Caseworkers Caseworkers Case Aides _____ _____	___ ___ ___ ___ ___ ___

*Full Time Equivalent

APPENDIX B

DSS-3490EL
(7/90)

CONSOLIDATED SERVICES PLAN
19 ESTIMATES OF PERSONS TO BE SERVED

COUNTY NAME:	COUNTY CODE:

	TYPE OF CARE/SERVICE	TOTAL*	CHILDREN	ADULTS
1	Adoption			
2	Day Care			
3	Domestic Violence			
4	Family Planning			
5	Preventive Child Mandated			
6	Preventive Child Non-Man.			
7	Child Protective Services			
8	Child Protect Svs Investig			
9	Unmarried Parents			
10	Preventive - Adults			
11	Prot Svs Adults - Svs			
12	Prot Svs Adults - Investig			
13	Social Group Svs Sr Citiz			
14	Education			
15	Employment			
16	Health Related			
17	Home Management			
18	Homemaker			
19	Housekeeper/Chore			
20	Housing Improvement			
21	Information and Referral			
22	Transportation			

* Total Equals Children Plus Adults

APPENDIX B

DSS-3490EL
(7/90)

CONSOLIDATED SERVICES PLAN
19 ESTIMATES OF PERSONS TO BE SERVED

COUNTY NAME:	COUNTY CODE:

	TYPE OF CARE/SERVICE	TOTAL*	NON JD/PINS CHILD	ADULTS	DFY JD/PINS CHILD	DSS JD/PINS CHILD
	CHILD FOSTER CARE					
23	Institutions					
24	Group Homes/Residences					
25	Agency Oper Board Homes					
26	Family Foster Care					
27	Comm on the Handicapped					

	Unduplicated Count of All Children in Care					

	TYPE OF CARE/SERVICE	TOTAL*	CHILDREN	ADULTS
	ADULT			
28	Residential Placement Serv.			

* Total Equals Children Plus Adults

APPENDIX C

DSS-xxxxEL
(7/90)

CONSOLIDATED SERVICES PLAN
ESTIMATE OF EXPENDITURES FOR
19 YEAR OF PLAN BY FUNDING SOURCE

PAGE 1

COUNTY NAME:

COUNTY CODE:

	DOLLARS Total	TITLE XX (See lssd allocat.) Total	MANDATED PREVENT & ADOPTION 75/25 Total	PROTECT & OPTIONAL PREVENT 50/50 Total	FNP CW FSTR CARE 50/50 Total	IV-E[1] OR OTHER Total
1. ADOPTION Direct POS Subsidy						1
2. DAY CARE Direct POS						*
3. DOMESTIC VIOLENCE						
4. FAMILY PLANNING						
5. PREVENTIVE CHILD MANDATED Direct POS						
PREVENTIVE MOE						
6. PREVENTIVE CHILD NON-MANDATED Direct POS						
7&8 CHILD PROTECTIVE Direct POS				**		
MOE Pre-Det MOE Post-Det MOE						

**Include expenditures which may be eligible for enhanced reimbursement in accord with Chapter 707 of Laws of 1988

*Low Income

*Federal Transitional

APPENDIX C

DSS-xxxxEL
(7/90)

CONSOLIDATED SERVICES PLAN
ESTIMATE OF EXPENDITURES FOR
19 YEAR OF PLAN BY FUNDING SOURCE

COUNTY NAME:	COUNTY CODE:

	DOLLARS Total	TITLE XX (See lssd allocat.) Total	MANDATED PREVENT & ADOPTION 75/25 Total	PROTECT & OPTIONAL PREVENT 50/50 Total	FNP CW FSTR CARE 50/50 Total	IV-E[1] OR OTHER Total
9. UNMARRIED PARENT						
10. PREVENTIVE ADULT						
11/ 12 ADULT PROTECTVE Direct POS						
13. SOC GROUP SVS FOR SR CITIZENS						
14. EDUCATION						
15. EMPLOYMENT						
16. HEALTH RELATED						
17. HOME MANAGEMENT						
18. HOMEMAKER						
19. HOUSKEEPER CHORE						
20. HOUSING IMPROVMENT						
21. INFO AND REFERRAL						
22. TRANSPORT						

APPENDIX C

DSS-xxxxEL
(7/90)

CONSOLIDATED SERVICES PLAN
ESTIMATE OF EXPENDITURES FOR
19 YEAR OF PLAN BY FUNDING SOURCE

COUNTY NAME:	COUNTY CODE:

	DOLLARS Total	TITLE XX (See lssd allocat.) Total	MANDATED PREVENT & ADOPTION 75/25 Total	PROTECT & OPTIONAL PREVENT 50/50 Total	FNP CW FSTR CARE 50/50 Total	IV-E[1] OR OTHER Total
FOSTER CARE SERVCES/ADMIN						1
NON-JD/PINS MAINT COSTS 23. INSTITUTN						1
24. GRP HOMES GRP RESID						1
25. AGENCY OP BOARD HMS						1
26. FAM FOSTR CARE						1
27. MAINT FOR C.S.E. SED PLACE						
TUITION FOR INSITUTION PLACEMENTS						
MAINT FOR ALL JD/PINS PLACEMENTS						1
28. ADULT RESIDENTAL PLACEMENT SERVICES						
TRAINING						
OTHER (SPECIFY)						

APPENDIX C

DSS-xxxxEL
(7/90)

CONSOLIDATED SERVICES PLAN
ESTIMATE OF EXPENDITURES FOR
19 YEAR OF PLAN BY FUNDING SOURCE

COUNTY NAME:	COUNTY CODE:

	DOLLARS Total	TITLE XX (see lssd allocat.) Total	MANDATED PREVENT & ADOPTION 75/25 Total	PROTECT & OPTIONAL PREVENT 50/50 Total	FNP CW FSTR CARE 50/50 Total	IV-E[1] AND OTHER Total
TOTALS						
GROSS DOLLARS TOTAL	$					
TITLE XX TOTAL		$				
MANDATED PREVENT & ADOPTION TOTAL			$			
PROTECT & OPTIONAL PREVENTIVE TOTAL				$		
FNP IM/EAA HR CHILD WELFARE FOSTER CARE TOTAL					$	
IV-E[1] TOTAL						$
OTHER TOTAL						$

TITLE XX ALLOCATION FOR _____:

FEDERAL SHARE: _____

LOCAL SHARE : _____

TOTAL : _____
(Should equal Title XX Total above)

COUNTY NAME:	COUNTY CODE:

	01 ADOP-TION	04 EDUC-ATION	05 EMPY-MENT	06 FAMLY PLNG	MEDICL OPTION	07 RESID PLCMNT ADULT	08 FOSTER CARE CHILD	09 HEALTH RELATD	10 HOME MGMT.
GOALS: 1	N					N			
2						N			
3			N						
4		N	N						
5	N	N	N			N			N
METHOD: D					N				
U	N	N							
R	Y	N					Y		
ELIGIBILITY CATEGORIES									
01 ADC-WIN									
02 FCAA	Y					N	Y		
03 ADC	Y			Y		Y	Y		
04 EAF							Y		
05 AGED				Y		Y		Y	Y
06 BLIND	Y			Y		Y	Y	Y	Y
07 DISABLED	Y			Y		Y	Y	Y	Y
08 MA	Y					Y	Y		
09 URM *				Y			Y		
10 UEM **				Y			Y		
13 HR	Y			Y		Y	Y		
14 IE	Y					Y	Y		
WR	Y	N	N	Under 21		N	Y	N	N
INCOME ELIGI-BILITY STNDRDS									
STATE STNDRDS	WR	150%	150%	150%		150%	WR	150%	150%
LOCAL STNDRDS	WR					150%	WR		

* Unaccompanied Refugee Minor ** Unaccompanied Entrant Minor

Local standards not specified assumed to be established at State standards.

COUNTY NAME:	COUNTY CODE:

	11 HOMEMAKER COMPONENT			12 HOUSEKEPR /CHORE	13 HOUSING IMPROVMNT COMPONENT		14 INFO. & REFERRAL
GOALS: 1	A	B	C[1]		A[1]	B	
2						N	
3							
4							
5	N	N	N	N	N	N	
METHOD: D							
U							
R							
ELIGIBILITY CATEGORIES							
01 ADC-WIN							N
02 FCAA							N
03 ADC							N
04 EAF							N
05 AGED	Y			Y	Y		N
06 BLIND	Y			Y	Y		N
07 DISABLED	Y			Y	Y		N
08 MA							N
09 URM *							N
10 UEM **							N
13 HR							N
14 IE							N
WR	N			N	Component B		Y
INCOME ELIGI-BILITY STNDRDS							
STATE STNDRDS	150%			150%	150%		WR
LOCAL STNDRDS							WR

[1] This component is mandated for SSI individuals.
* Unaccompanied Refugee Minor ** Unaccompanied Entrant Minor
Local standards not specified assumed to be established at State standards.

COUNTY NAME:	COUNTY CODE:

	15 PREVENTIVE ADULTS COMPONENT					16 A&B PROT ADULTS	17 PROT CHILD	19 WIN COUNS	20 TRANSP	21 UNMARR PARENT
		A	B	C	D					
GOALS: 1						N	N			
2						N	N	N		
3						Y	Y	N		
4						N	N	N		
5			N	N	N	N	N	N		
METHOD: D										
U										N
R										
ELIGIBILITY CATEGORIES										
01 ADC-WIN										
02 FCAA								N		
03 ADC								N		Y
04 EAF							Y	N		
05 AGED								N		
06 BLIND								N		Y
07 DISABLED								N		Y
08 MA								N		Y
09 URM *								N		
10 UEM **								N		
13 HR								N		Y
14 IE								N		Y
WR		N				Y	Y	N	N	N
INCOME ELIGIBILITY STNDRDS										
STATE STNDRDS		190%				WR	WR		150%	150%
LOCAL STNDRDS						WR	WR			150%

* Unaccompanied Refugee Minor ** Unaccompanied Entrant Minor

Local standards not specified assumed to be established at State standards.

COUNTY NAME:	COUNTY CODE:

	22 PERSONAL CARE SERVICES	23 VICTIM DOMESTIC VIOLENCE	24 CHAP	25 PREVENTIV CHILD MANDATED	26 PREVENTIV CHILD OPTIONAL	38 DAY CARE ALL
GOALS: 1				N	N	
2				N	N	
3				Y		
4				N	N	
5	N	N	N	N	N	N
METHOD: D						
U						
R						
ELIGIBILITY CATEGORIES						
01 ADC-WIN			Y			
02 FCAA			Y			
03 ADC		Y	Y			Y
04 EAF		Y	Y			
05 AGED			Y			
06 BLIND			Y			
07 DISABLED			Y			
08 MA			Y			
09 URM *			Y			
10 UEM **			Y			
13 HR	N	Y	Y			
14 IE	N		N			
WR	N	Y	N	Y		
INCOME ELIGIBILITY STNDRDS						
STATE STNDRDS		WR		WR	WR	***
LOCAL STNDRDS		WR		WR		

* Unaccompanied Refugee Minor ** Unaccompanied Entrant Minor
*** Up to: 275% family of 2; 255% family of 3; 225% family of 4 or more
Local standards not specified assumed to be established at State standards.

COUNTY NAME:	COUNTY CODE:

Key to Goals	Maximum State Standards Title XX Day Care
1. Self-support	
2. Self-sufficiency	275% Family of 2
3. Protection	255% Family of 3
4. Community-based care	225% Family of 4 or more
5. Institutional Care	

PROGRAM LIMITATIONS

DAY CARE

TITLE XX	LOW INCOME	FEDERAL TRANSITIONAL	DAY CARE
_____% Family of 2	All Family Sizes	200%	Fee %_____
_____% Family of 3			
_____% Family of 4 or more	_____%		

OTHER PROGRAM LIMITATIONS:

ASSESSMENT OF THE CONSOLIDATED SERVICES PLANNING PROCESS

SUMMARY OF CURRENT PROVISIONS

The Consolidated Services Plan (CSP) was designed to better coordinate a variety of individual planning requirements. Through a single multi-year planning process, social services districts respond to a series of planning and reporting requirements derived from State and federal law. Currently, the approval of the CSP provides State approval for local strategies and related funding for each of the major components of the Child Welfare and Adult Services system and other services programs. These include:

- Adoption Services
- Child Protective Services
- Foster Care Services
- Preventive Services
- Residential Placement Services for Adults
- Protective Service for Adults
- Other Adult Services
- Domestic Violence Service
- Enhanced Reimbursement for CPS Pre- and Post-Determination Services
- TASA case management for pregnant and parenting adolescents
- Title IV-E Independent Living Services

In addition, the plan serves a number of technical, legal and budgetary functions. The plan also serves as the vehicle for the district to enter into WMS data necessary for computerized client-specific eligibility determinations and authorizations for service.

As a central source of information on the districts' commitments for meeting the service needs of their county, the Plan meets the diverse needs of Fair Hearings Officers and district public education efforts. The planning process is intended as an opportunity for joint state/local identification and resolution of issues and as a mechanism for the local district, with the input of the broader community, to assess changing needs and developing appropriate strategies.

IMPROVING THE PLANNING PROCESS

Much of the potential of the local planning process is eclipsed by the burden of creating a document. Thus, in recent years, the Division has attempted to better balance the plan's functions as both a local strategic mechanism for meeting the needs of families and documentation to the State on compliance, progress and proposed activities. The Annual Implementation Report has been restructured to focus excluisively on changes in function or structure from the three-year Plan. To eliminate duplicate efforts, the Division of Family and Children Services worked with the Division of Income Maintenance to develop a single set of child care planning requirements.

There is a strongly shared feeling at the State and local levels that significant additional improvements can be instituted. Prior to the next CSP Cycle, the Department is interested in changing the process to enhance its local utility. Over the next few months we will be convening discussions with local commissioners and others on improving State level support and guidance for local services planning.

To initiate that process, we are seeking your preliminary comments and suggestions. A questionnaire is appended. However, please feel free to expand upon these questions in whatever format you wish. We are confident that your thoughtful responses to these questions will provide an important basis for our dialog and action concerning local planning requirements.

Please return the attached questionnaire at your earliest convenience to:

Suzanne Sennett
Division of Family an Children Services
Section 11-A
40 North Pearl Street
Albany, New York 12243

(Office Link Number: AW1160)

SOCIAL SERVICES DISTRICT SURVEY

THE CONSOLIDATED SERVICES PLAN

DISTRICT _____ DATE: _____

NAME OF PERSON
COMPLETING SURVEY _____

TITLE: _____

1. What is your involvement in the Consolidated Services Planning Process?

2. For how many years have you been involved in the planning process? _____

3. What are the major purposes, as you see them, of the Consolidated Services Plan at the present time. Please focus on the utility the plan has from YOUR district's perspective.

3. What are the strengths of the current planning approach employed by your district?

4. Are there features of your local planning efforts that you see as unique and/ or have potential benefit for other districts? (Please describe)

SOCIAL SERVICES DISTRICT SURVEY

THE CONSOLIDATED SERVICES PLAN

5. To what extent do current State requirements and procedures facilitate or hinder your current efforts? Please elaborate

6. What are the purposes you ideally would like the planning process to serve?

7. What are the current barriers (if any) to the Consolidated Services Planning process to reaching the purposes you outlined in question 6?

8. If you could make three changes in current planning requirements or procedures (legal, regulatory format, review process, technical assistance) what would they be?

1._____

2._____

3._____

Are you interested in participating in future discussion/ work sessions concerning the refinement of local planning requirements?

Yes_____ No_____