

January 1, 2007 – December 31, 2009

## CHILD AND FAMILY SERVICES PLAN UPDATE

**12/15/2009 – 12/31/2010**

**Monroe County**  
**Department of Human Services**  
Submitted December 15, 2009

This Annual Plan Update (APU) to the Child and Family Services Plan including the Strategic Component, the Administrative Component-Local Department of Social Services, the Administrative Component-Youth Bureau, and the PINS Diversion Services Plan-Strategic Component covers the period of December 15, 2009 to December 31, 2010. The APU contains County Outcomes and Strategies to be undertaken that respond to community needs by the Youth Bureau for youth development and delinquency prevention services and by the District in the areas of Adoption, Foster Care Services for Children, Preventive Services for Children, Protective Services for Adults, Protective Services for Children, Other Adult Services, and Other Children and Family Services.

Kim Hare  
Contact Person

585-753-6444  
Phone

Juvenile Justice Services Planner  
Title

kim.hare@dfa.state.ny.us  
Email

## Table of Contents

I.	Outcome Framework/Mission/Vision	3
II.	Planning Process	3
III.	Needs Assessment	5
IV.	Outcomes	8
V.	Plan Monitoring	13
VI.	Resource Allocation/Financing Process	13
APPENDIX A – Plan Signature Page		14
APPENDIX B-1 to B-5 Lists of Required Interagency Consultations		15
APPENDIX C - List of Data Sources Used in Needs Assessment		16
APPENDIX D – Relationship between County Outcomes and Title IV-B Federal Goals		18
APPENDIX E – Summary Planning Process		19
APPENDIX F– Improvement Projects		23
APPENDIX G – CFSR Local Self Assessment		46
APPENDIX H - PINS Diversion Services Plan		57

## I. Outcome Framework/Mission/Vision

Monroe County Department of Human Services (DHS) continues to review its Mission Statement to ensure that it is inline with the County's Vision Statement and that it informs ALL activities/initiatives/efforts of DHS and its divisions.

## II. Planning Process

A.) Describe the county planning process that has taken place including meetings forums, hearings, collations and task forces. The description must include the level of involvement or consultation with the following: the public hearing, LDSS Advisory Board, County Youth Board, municipalities, youth, families, broad based community participation, and youth bureaus (county and municipal). Please include specific reference(s) on how the Youth Bureau and Local Department of Social Services have planned together.

Many of the planning processes and activities outlined in both the 2007-2009 CCP as well as in the 10/2008 Annual Update are ongoing. There are some new planning efforts that have just begun or are planned for 2010. Below outlines the continuing planning activities as well as new planning efforts. Please refer to Appendix E: County Summary Planning Process Activities. The planning activities are grouped under our core priorities: *Safety; Self-Sufficiency and Healthy Development; and Effective and Efficient Utilization of Limited Resources*. In many instance the activities under one core priority impact those of another priority.

### Safety

Planning efforts continuing in 2009 and 2010 (and outlined in the 2008 APU) include:

- Child & Family Services Internal Process Improvement Initiative (MCDHS)
- Continuum of Care for the Homeless Planning Team (R/MC Youth Bureau)
- Long Term Care Council (MCDHS APS & OFA)
- NYConnects (MCDHS OFA)
- Juvenile Justice Council (MCDHS & R/MCYB)

In addition to the continuing planning activities noted above, a new planning effort is underway as summarized below:

#### **Process for Alternate Funding Mechanism for Guardianship Services**

APS is currently working in conjunction with the DHS Law Department, the DHS Financial Assistance Path and Catholic Family Center. Currently, under APS regulations, the County Commissioner is named as the Guardian for any county individuals in the county who lack capacity and have no one else capable and/or willing to act as Guardian for them. The responsibility for such service then becomes the responsibility of the local DHS. APS currently has a contract with Catholic Family Services to act as Guardian in those situations.

For some individuals who receive Medicaid and Social Security benefits, other than SSI, administrative fees for Guardianship services may be paid for through their Social Security benefits and deducted from their Net Available Monthly Income. A process to facilitate this procedure is currently being developed in Monroe County so that Catholic Family Center Guardianship services can be paid for through this mechanism, rather than through Adult Protective funding. Many of the individuals for whom Catholic Family Services acts as Guardian reside in a long term facility and are not in need of ongoing APS services.

## **Self-Sufficiency and Healthy Development**

Planning efforts continuing in 2009 and 2010 (and outlined in the 2008 APU) include:

- ACCESS- Achieving Culturally Competent Effective Service and Supports (MCDHS)
- Partnership for Youth Project/APY (R/MCYB)
- Community School Partnership Network (CSPN) (R/MCYB)
- Greater Rochester After-School Alliance (GRASA) (R/MCYB)
- Youth Services Quality Council (YSQC) of Rochester and Monroe County (R/MCYB)
- Youth Risk Behavior Survey (R/MCYB)
- NYS Youth Development Team (R/MCYB)
- Ad Council Positive Youth Development Media Campaign (R/MCYB)
- Community Asset Partner Network (R/MCYB)

In addition to the planning efforts listed above, several new planning efforts are underway:

**Youth As Resources** of the Rochester-Monroe County Youth Bureau is currently building upon its program objectives through the integration of Service Learning into its mission. This experiential approach to community service emphasizes research, community engagement, and reflection; with the purpose of enriching the learning experience, teaching civic responsibility and strengthening our communities. YAR has been working towards these new goals through strengthening existing partnerships with Youth Voice One Vision – the City County Youth Council of the City of Rochester Dept. of Recreation and Youth Services and Nazareth College's Center for Service Learning. For ten weeks during the summer of 2009 YAR hosted a University of Rochester Urban Fellow who helped formulate YAR's approach to Service Learning. YAR is currently (2009/2010) hosting a Rochester Youth Year AmeriCorps VISTA member as well as a Rochester AmeriCorps member to assist the program through capacity building, volunteer recruitment, and strategic planning and implementation around the philosophies and approaches of service learning.

**RCAMP** is a community asset mapping project lead by the Rochester/Monroe County Youth Bureau. The project utilizes software database that the R/MCYB has brought to Monroe County through a partnership with Connecticut Assets. This asset mapping "data base" was first introduced at the 2007 Search Conference in Rochester. This data base is a "free" community data base that has the goal of listing all community assets. The R/MCYB is the lead in engaging all sectors of the community to become partners in this effort. R/MCYB is working with a broad array of community groups, businesses, school and other organizations to map community assets and to facilitate the community use of the R-Camp data base.

### **Municipal and Municipal Youth Bureau Involvement**

Three (3) municipal Youth Bureaus – Greece, Henrietta and Irondequoit and the City of Rochester and many Monroe County towns and villages have been and continue to be engaged in seeking "youth voice" and building developmental assets. The City of Rochester Bureau of Human Services and Recreation are partners in the NYS Department of Health ACT for Youth grant.

The municipal Youth Bureaus are actively involved in both the Youth Services Quality Council and the Community Asset Partner Network. Each Youth Bureau has incorporated asset building through positive youth development in their policies and practices in all program areas of recreation and youth services. The majority of the towns are active participants in the Community Asset Partner Network (CAPN). These communities actively participate in the CAPN annual events and regularly participate in their local school-community asset partnerships.

## **Effective and Efficient Utilization of Limited Resources**

Planning efforts continuing in 2009 and 2010 (and outlined in the 2008 APU) include:

- Alternatives to Detention (MCDHS)
- Capacity Building Project formerly Best Practices Project (R/MCYB)
- United Way Student Readiness and Success Investment Team (R/MCYB)
- Runaway and Homeless Youth Services Provider Group (R/MCYB)
- Citizens Advisory Council – Child & Family Services Committee (MCDHS)

In addition to the planning efforts listed above, a new planning effort is underway involving the Youth Bureau and United Way:

**United Way funding strategy “Blueprint for Change”** includes input from the Youth Bureau as key community experts. Youth Bureau staff participated in several of the community “input” sessions. Youth Bureau staff are participating in the School Age Youth and Crisis Services strategies “processes” and will continue to be active learners in the review of literature and in the in community system change. The Blueprint for Change process is designed to bring together key stakeholders in the community to review literature/research and data to assist United Way to set priority funding areas that will address local needs, utilize evidence based program models and establish impact benchmarks to measure success of long term funding strategies.

### **B.) List of Required Interagency Consultations**

NO CHANGE FROM PREVIOUS SUBMISSION

## **III. Needs Assessment**

### **A. Needs Assessment Strategies and Activities**

Monroe County Department of Human Services conducts ongoing data and needs assessment. The needs assessment supporting the 2007-2009 Child & Family Services Plan included a thorough review of existing needs assessments that included local, county-level and statewide data as well as reports with local data regarding children, adults and families in the Greater Rochester community. In addition, data was reviewed from the various programs and divisions of DHS on caseloads and service trends.

Monroe County Department of Human Services staff continually review data and reports/studies that relate to the work done by MCDHS as well as information on the Greater Rochester Area. As information comes to light that may impact current services or planning efforts, that information is “brought to the table” to inform decision making.

There are no changes from the previous submission

### **B. Needs Assessment Conclusions and Summary of data from the Monroe County Profile:**

Review of the data indicates the lack of significant changes in Monroe County which would affect

human services and citizen well being since the January 1, 2007 – December 31, 2009 plan was written.

In early 2009, Monroe County reviewed the local data packet from OCFS. While the information contained within it was not necessarily a surprise, it along with the request from OCFS to develop a local self assessment afforded DHS the opportunity to discuss with key stakeholders and staff the data as well as brainstorm possible action steps that could address issues raised by the data. Focus groups were scheduled with as many stakeholders as time would permit. Input centered most often on how to reduce the number of families who experience multiple indicated CPS reports in Monroe County, how to increase the number of children discharged from foster care within 2 years or less, and how to reduce the number of re-entries to foster care. Overall, most people had very positive comments to make about the impact of the recent increase in DHS staff/decrease in caseloads. Many expressed concern about whether the Risk Assessment Profile is being used to drive decision-making about where and at what intensity to target services. Some of the questions raised pointed to the need to devote staff resources to doing a retrospective case analysis to better discern the meaning of some of the most pertinent data around recurrence of maltreatment. It is clear, both from the feedback of staff and community stakeholders and from the data that our work over the next two years should prioritize 1) further in-depth analysis of the pertinent data at the level of case record reviews, 2) examination of current policies, 3) additional training and 4) practice initiatives which will contribute to continued improvement by reducing the rate of recurrence of maltreatment, and expediting permanency for children in foster care. (See Appendix G –CFSR Local Self Assessment)

### C. Needs Assessment Conclusion

There continues to be major areas of concern including the continual rise in Child Protective Services reports, the cost of foster care, a decrease in youth receiving preventive services, decrease in youth bureau funding that supports general youth development, increase in community violence, increasing unemployment and underemployment rates and the continuing decline in the local manufacturing base. All of this is compounded by the challenges in the economy at the national, state and local levels which further puts at risk families as well as the greater Rochester community. While at the same time concerns are increasing, MCDHS is taking steps to “stem the tide” of negative impacts on the youth and families it serves. The redesign of the PINS system, deliberate reduction in detention beds, Community Asset Initiative, expansion of DHS casework and examiner staff through Project SAVE, Alternatives to Detention Initiative, changes in internal policies and practice standards and other efforts are working together to assist families to become more independent of government intervention.

Monroe County DHS continues to hold the following as its core priorities:

- Safety- Protection and Support of Monroe County's most Vulnerable Children and Adults  
Safety and protection for Monroe County's children, youth and families is a critical value and priority. Children and youth who live in safe and healthy environments are more likely to thrive and less likely to be placed in an out-of-home setting.
- Self-sufficiency and Healthy Development  
Healthy communities are comprised of children, youth, adults and families at their highest level of self-sufficiency and development. MCDHS seeks to assist individuals and families in achieving and maximizing their capacities and potential through coordinated, comprehensive and results oriented services and supports.
- Effective and Efficient Utilization of Limited Resources  
A comprehensive approach to improving outcomes for children, youth and families includes recognizing, promoting and supporting healthy behaviors and beliefs while focusing resources on priority needs. Focused resources must be effective, evidence-based and if possible coordinated with a continuum of services to eliminate or reduce duplication and increase efficiency.

As identified in the CFSR Local Self Assessment, MCDHS will be focusing in 2009-2010 significant efforts on continuing to improve the skill and ability of staff to engage meaningfully with families from our first contacts with them in CPS investigation all the way through to the permanency work done in CPS management. Our recent work in beginning to implement child and family team process at DHS has validated our belief that families are indeed the experts about their own family, and that we need to provide strong leadership in changing the culture of social work practice – shifting our role from “expert” toward the role of “accountable ally”. (See Appendix G – CFSR Local Self Assessment).

**D. Data Sources – Please see Appendix C**

**E. Ongoing Needs Assessment**

In addition to needs assessment efforts identified in the Improvement Projects (Appendix F), Monroe County is engaged in several additional planning /needs assessment efforts that will inform the development of the 2011 - 2013 Child and Family Services Plan.

DMR

Monroe County has been selected by OCFS to work with the Case Family Programs on an analysis of our disproportionate minority representation (DMR) in children placed out of home and to develop strategies to reduce DMR in Monroe County. In addition to gaining an understanding of DMR in local decision making around placement decisions, Monroe County will be looking to developing policies, practices and contracted services that are more culturally responsive and that support the goal of reducing out of home placements for children of color. Effort will also be undertaken to look at national research and models that inform best practice in this area. Target start date is 2<sup>nd</sup> quarter 2010.

Community Status Report on Children

In October The Children’s Agenda issued its *2010 Community Action Plan for Greater Rochester’s Children*. The Plan offered challenges to the community, including three “Best Solutions” designed to significantly improve outcomes for children and youth in the Greater Rochester area. The three proposed Best Solutions are: (1) expanding the Nurse-Family Partnership Program to 1,000 families per year by 2015; (2) increase the number of children in quality child care and early learning settings by 20% by 2015; and (3) provide high-quality, effective after-school programming for 25% of Rochester children by 2015.” Each of these programs are currently in place in the Greater Rochester Community. However, in order for community planners, funders and policymakers to develop concrete action steps and sound investment strategies to address each of the proposed solutions, it is first necessary to quantify the existing baseline of what currently exists, the level of community need, and the gap between that baseline and the stated 2015 and shorter-term 2010 Best Solution goals. The Center for Governmental Research (CGR), in partnership with The Children’s Agenda (TCA) will work together on this project to quantify for each solution the existing baseline services and investments and the gaps in each, and to outline the assumptions and rationales underlying each proposed solution and its related goals. A full report with recommendations and next steps will be submitted to the Key Leaders Group which is comprised of leaders representing the City, County, Rochester City School District, United Way and the Community Foundation.

Safe School/Healthy Students

The Rochester City School District (RCSD), in partnership with Monroe County Human Services-Office of Mental Health, Monroe County Office of Probation and Community Corrections, and the Rochester Police Department, was recently awarded a 4-year *Safe Schools/Healthy Students (SSHS)* grant by the U.S. Department of Education. SSHS’s aim is to support schools and school districts to create safe learning

environments that promote healthy child development, prevent youth violence and drug use with the goal of supporting academic achievement and life success for all children and youth. One of the most important aspects of the federal SSHS initiative is its emphasis on changing service system processes, procedures and protocols among major youth serving systems (Education, Justice, Social Services and Mental Health) to assure collaborative support for youth and their families

Rochester’s SSHS partners selected youth transitioning from justice, mental health and suspension programs as a high priority for systems improvement under this grant; recognizing both the high risks these youth face and the potential for substantial youth, family and community gains by improving services and supports. Youth targeted for this initiative have been receiving services and education in other settings as their behavioral and/or social-emotional needs could not be safely and adequately met in regular community and school environments. As they exit from the intense supervision and high structure of residential treatment, detention, jail or suspension programs to mainstream education and less structured community life, these young people often face numerous personal, social and educational challenges. Several agencies and institutions share responsibility for transitioning youth from placement/alternative settings and assisting re-entry and many are already providing supports and services. Despite these efforts, transitioning youth and their families too often experience fragmented, delayed, or uneven supports from our multi-part education and service network. RCSD is convening groups of stakeholders to assist in identifying the needs of transitioning youth and identify opportunities to change the process to increase the success of these youth and their families.

#### IV. OUTCOMES AND CORE PRIORITIES

The 2007- 2009 Child and Family Services Plan included outcomes that were/are tracked for the entire department. Below are the outcomes as submitted. The outcomes have been updated to include 2008 data where available. Improvement Projects relating to each outcome can be found in Appendix G.

Core Priority	Outcomes
Safety- Protection and Support of Monroe County's most Vulnerable Children and Adults	1. Individuals and families are safe. 2. Abused, neglected or exploited adults will be identified. 3. Individuals and families experience permanency in their living situations. 4. Adults, older adults, and families are self-sufficient as dictated by age.
Self-sufficiency and Healthy Development	5. Individuals and families access needed support to obtain optimal development.
Effective and Efficient Utilization of Limited Resources	6. DHS operates at a maximum level of fiscal responsibility. 7. Employees of the Department will experience a high degree of satisfaction. 8. Customers of the Department will experience a high degree of satisfaction.

Outcome 1: Individuals and families are safe.

**Indicators:**

- 3 % Decrease in substantiated child abuse and neglect

**Strategies:** Improvement projects such as Rochester Safe Start and the Child Abuse Prevention Campaign are aimed at decreasing child abuse, its impacts, and increasing the number of “true positive” reports. The implementation of the Nurse Family Partnership program, Community Health Worker Program and other preventive collaborative initiatives (Building Healthy Children) are designed to prevent the incidence of child abuse.

**Responsible Division:** Child & Family Services

- 3 % Decrease in adult abuse and neglect

**Strategies:** Increase the number of family type home placements for adults and continue to support a multi-disciplinary team for community collaborators on adult protective services. Increase coordination of departmental services for adults between divisions and increase community knowledge of adult abuse through partnerships with Lifeline and Elder Source.

**Responsible Division:** Child & Family Services, Division of Administration & Purchased Service

Measure	2005	2006	2007	2008
Indication rate for CPS reports	28%	26%	28%	24.2%
% of CPS determinations that are overdue/total reports active (mean)	51%	52%	46%	37.5%
Number of CPS reports per month (mean)	548	561	579	621
Number of CPS reports per year	6574	6738	6948	7451
Number of diverted CPS reports per month	190	162	170	166
Number of 1034s per month	48	51	61	38
Total number of 1034s	573	615	731	455
Recurrence of maltreatment	11%	11%	11%	12.9% *
Number of children served by Preventive Services per year	4377	4562	4446	4301
Number of families served by Preventive Services per year	1819	1953	1982	1950

\* Of the children who were victims of a substantiated report during the six –month period ending 9/30/2008, the percentage that had substantiated report during the previous six months.

**Outcome 2: Abused, neglected or exploited impaired adults will be identified.**

**Indicators:**

- 5 % Decrease in the number of open Adult Services cases

**Strategies:** Continue to partner with local organizations to provide information on adult abuse and improve internal capacity to serve abused adults with most appropriate services to ensure they move from the caseload to permanency.

**Responsible Division:** Child & Family Services,

Measure	2005	2006	2007	2008
Number of new cases accepted for assessment	615	500	530	405
Number of prior cases still active	451	344	217	223
Number of referrals closed at intake	525	579	626	639
Number of utility referrals	31	20	55	46
Contract Guardianship (active as of 1/1)		15	64	64

**Outcome 3: Individuals and families experience permanency in their living situations.**

**Indicators:**

- 5% Decrease in the number of children placed out of the home

**Strategies:** Continue to support children and families in innovative ways to reduce out of home placement, current initiatives include Youth & Family Partnership, Families and Community Together, and support of MST and FFT.

Implement a Transition Manager program at the Monroe County Detention Center to focus on youth likely to recidivate or move on to OCFS placement and increase intra and interdepartmental coordination to support high risk youth in Detention.

**Responsible Division:** Child & Family Services, Division of Administration & Purchased Service (Detention Center)

- 5% Decrease in the length of time needed to achieve permanent placement, whether through family reunification or adoption

**Strategies:** Continue to focus efforts on increasing the number of foster and adoptive family homes, which could increase quality of foster care, increase adoptions and improve permanency. Establish clear policies for relative resource placements and increase access to stable living for Runaway and Homeless youth. Increase interdepartmental coordination in providing or purchasing services for high risk youth.

**Responsible Division:** Child & Family Services, Division of Administration & Purchased Service (Detention Center, Rochester Monroe County Youth Bureau)

Measure	2005	2006	2007	2008
Number of children who exited foster care within 90 days	150	140	100	102
Number of children who were discharged from foster care to the custody of a relative	177	147	89	39
Number of adoptions finalized per year	73	89	78	72
Youth and Family Partnerships (average # of children per month)	61	81	77	72
JD/PINS Care (average # of children in care per month)	160	194	158	157
IV-Eligibility (Amount IV-E claimed annually)	\$13,964,765	\$14,728,898	\$11,480,231	\$10,515,313
Foster Care IV-Eligible in purchased residential foster care (average # of kids in care per month)	203	123	124	97
Foster Care child welfare purchased agency (average # of kids in care per month)	193	203	148	138
Foster Care – IV-Eligible in family foster care homes (average # of kids in care per month)	350	341	305	262
Foster Care – child welfare family foster care homes (average # of kids in care per month)	259	257	224	200
Total youth in care at the end of the year	1024	950	805	682
Number of youth participating in runaway/homeless services	1,628	1,550	2,023	1,721

**Outcome 4: Adults, older adults, and families are self-sufficient as dictated by age.**

**Indicator:**

- 3% Increase in use of financial management services and other needed supports among older adult population

**Strategies:** The number of seniors accessing financial management programs decreased from 2003-2004. However, more thorough monitoring of the subcontracting agency is being employed to ensure that contract goals are met. The number of seniors receiving health information assistance continues to grow through community outreach. HIICAP has a presence at festivals and fairs, on the internet, and through the print media.

**Responsible Division:** Child & Family Services, Division of Administration & Purchased Service (Office for Aging), Financial Assistance Division

Measure	2005	2006	2007	2008
Number of referrals to Catholic Family Center (CFC), formerly Family Service of Rochester Financial Management Program from APS	65	73	76	65
Number of Adult Services cases closed at intake	525	579	625	639
Number of seniors receiving WRAP grants per year	425	90	9	431
Number of seniors receiving HEAP grants per year	3,012	3,184	2,714	3,042

Number of seniors accessing financial management programs	295	340	418	548
Number of seniors receiving information assistance from HIICAP program	8200	4000	4029	1519
Number of placements (slots) in subsidized Senior Employment Program	22	22	5	20

**Outcome 5: Youth and families access needed support to obtain optimal development.**

**Indicators:**

- 5% Increase in the number of youth reached by youth development programs
- 5% Increase in the number of families reached by developmental interventions

**Strategies:** Continue to support community optional preventive programs like EnCompass Resources for Learning and Hillside Work Scholarship Connection to build skills in youth and families that are at general risk of out of home placement. Further integrate these services into the Rochester City School District and ensure that these services are part of a continuum of services designed to enhance child, youth and family development. Continue to support Nurse Family Partnership and Community Health Worker Program as part of a larger strategy to improve strengths in children and families. Continue commitment to strengthening the Community Asset Partnership Network and expanding the voice of the Asset Approach through grant seeking and refinement of local Asset initiatives. Partner with Search Institute to bring annual conference to Monroe County. Seek funding beyond Youth Bureau allocation to expand and improve quality of youth development services. Continue projects which aim to increase best practices in services delivery.

**Responsible Division:** Division of Administration & Purchased Service (Detention Center, Rochester Monroe County Youth Bureau), Child & Family Service

Measure	2005	2006	2007	2008
Number of youth participating in youth development and prevention services	13,500	23,421	20,187	23,499
Number of youth receiving diversionary services	993	1,079	1,065	940
Number of municipalities & school districts participating in the Asset Partnership Network	18	18	18	18
Number of municipalities & school districts trained in youth development and the asset model/approach	18	18	18	18
Number of youth served through contracts for arts, cultural and recreation programs (Moved from Outcome 7)	13,824	17,003	14,540	14,649
Number of youth involved in civic engagement/community service through Youth As Resources (Moved from Outcome 7)	500	550	600	600

**Outcome 6: DHS operates at a maximum level of fiscal responsibility.**

**Indicators:**

- 2.5% Increase in appropriate opportunities for revenue
- Ensure that eligible consumers continue to be served in a cost effective manner

**Strategies:** Continue to analyze and improve reimbursements and access to grant funds where appropriate. In cooperation with the county Purchasing Office implement a new performance measurement initiative for all contracts (5 year timeline).

**Responsible Division:** All DHS

Measure	2005	2006	2007	2008
Reimbursement Revenue department-wide	\$227,346,202	\$220,738,765	\$202,088,018	\$213,291,726
New funding for core services	\$992,000	\$1,713,918	\$5,155,646	N/A
JD/PINS Care (Average local cost per child per month)	\$2,792/child	\$2,867/child	\$3,614/child	\$3,852/child
Foster Care IV-Eligible in purchased residential foster care (Average local cost per child per month)	\$2,416	\$3,468	\$3,080	\$4,514
Foster Care child welfare purchased agency (Average local cost per child per month)	\$5,199	\$6,923	\$7,236	\$7,540
Foster Care – IV-Eligible in family foster care homes (Average local cost per child per month)	\$491	\$431	\$396	\$390
Foster Care – child welfare family foster care homes (Average local cost per child per month)	\$460	\$735	\$947	\$850
Title XX Claimed (Amount claimed annually) [note: this is for preventive, protective, etc., but not foster care]	\$2,828,121	\$11,427,634	\$10,455,866	\$14,449,970
Number of eligible seniors served through OFA programs	35,968	23,841	23,841	19,285
Number of subcontracting OFA agencies meeting or exceeding number of persons to be served as stated in contract	99%	99%	99%	99%
Number of grant applications prepared by the Youth Bureau	2	3	3	3
Number of community grant applications participated in	1	1	1	2

**Outcome 7: Employees of the Department will experience a high degree of satisfaction.**

**Indicators:**

- Staff caseloads for all programs
- Employee satisfaction surveys

**Strategies:** Identify maximum effective caseloads, utilize mandated state standards and work management studies and develop strategies to come in line with maximum numbers. Review data obtained through employee satisfaction surveys to identify opportunities to improve employee satisfaction.

**Responsible Division:** All DHS

Measure	2005	2006	2007	2008
Average CPS Management caseload per worker	12	11	9	7.3
Average number of new CPS reports received per worker per month	9	8	9	6.9

**Outcome 8: Customers of the Department will experience a high degree of satisfaction.**

**Indicators:**

- 5% Reduction in the number of client complaints
- 5% Increase in client customer reports of satisfaction with DHS programs

**Strategies:** Establish a Customer Service Hotline to address client concerns effectively and efficiently. Track all client complaints and compliments in a database with regular review by administration and managers.

**Responsible Division:** All DHS

Measure	2005	2006	2007	2008
Number of Youth Bureau trainings provided to Best Practice Partners	22	20	20	20
Number of asset recognition efforts/activities	2	2	2	2
# of incidents in client waiting rooms/involving guards	972	1,000	1,350	890
# of new PNG clients	26	26	4	12
# of incident report filed with Safety & Security Committee	162	128	88	119

## V. PLAN MONITORING

The MCDHS Planning Unit will be responsible for the monitoring and implementation of the Child & Family Services Plan in collaboration the R/MCYB and MCDHS administration.

## VI. RESOURCE ALLOCATION/FINANCING PROCESS

In 2008, Monroe County implemented a new contract system county wide called Contract HQ. This new system is designed to track contractor performance on their outcome objectives as well as calculate per unit costs; results of in-house evaluation/tracking; program/service utilization; etc. Monroe County feels that this new contracting process will better enable the county to identify effective programs/services quicker. It will also be able to assist the county to identify those contractors who are not meeting expectations early enough to allow county staff to follow-up with the vendor and provide assistance to enable them to meet the contract expectations.

### A. DHS-Rochester Monroe County Youth Bureau:

The Rochester-Monroe County Youth Bureau's Funding Priority Guidelines (outlined in the 2007-2009 CCP) continue to direct the Youth Bureau's allocation of its funds by supporting three Monroe County community-wide outcomes (Children Succeeding in School, Youth Leading Healthy Lives, and Strengthening Families) through investment in key programs and strategic initiatives. Youth Bureau's continued commitment to supporting programs and services that further positive youth development is evident in its Funding Priority Guidelines as well as its allocation and monitoring functions. The DHS Rochester-Monroe County Youth Bureau recognizes that funds allocated to support a youth development program often make up a portion of the funds required to implement a program and that other funders are partners in this funding investment. Monroe County's Plan process promotes a collaborative approach with key stakeholders to impact youth and family outcomes and move to a results-based, coordinated, responsive and comprehensive *common sense* service system. The resource allocation process continues to reinforce the integrated county planning process by seeking opportunities to work closely with other funders and relevant parties to implement an investment approach whereby new funding decisions and requests for proposals are not conducted in isolation but as cooperative ventures.

### B. MCDHS Child & Family Services:

Many services in the Child & Family Services Division, such as foster care and adoption, are "demand driven" and criteria for service is mandated by need and regulation. Ancillary services including preventive services and community optional preventive services are developed and implemented based on need. Monroe County DHS is committed to utilizing outcome objectives and performance base contracting via the Contract HQ system to ensure that the services it currently purchases follow the core priority areas: Safety, Self-Sufficiency and Healthy Development, Effective and Efficient Utilization of Limited Resources and are achieving the desired outcomes. MCDHS can no longer afford to invest in programs that do not have proven measurable

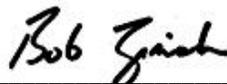
results. MCDHS will continue to implement the resource allocation/financing process as outlined in the 2007-2009 CCP and that is also consistent with County of Monroe policy and practices.

**APPENDIX A  
PLAN SIGNATURE PAGE  
CHILD AND FAMILY SERVICES PLAN  
ANNUAL PLAN UPDATE**

We hereby approve and submit the Annual Plan Update to the Child and Family Services Plan including the Strategic Component, the Administrative Component-Local Department of Social Services, the Administrative Component-Youth Bureau, and the PINS Diversion Services Plan-Strategic Component for the Monroe County Department of Human Services/LDSS and Youth Bureau for the period of October 15, 2009, through December 31, 2010.

  
\_\_\_\_\_  
Commissioner  
County Department of Human Services

12/11/2009  
Date

  
\_\_\_\_\_  
Executive Director  
County Youth Bureau

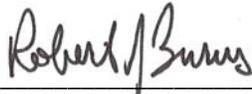
12/11/09  
Date

  
\_\_\_\_\_  
Chair  
County Youth Board

12/11/09  
Date

\*\*\*\*\*

I hereby approve and submit the PINS Diversion Services Plan-Strategic Component of the Child and Family Services Plan – Annual Plan Update for Monroe County Probation Department for the period of October 15, 2009 through December 31, 2010.

  
\_\_\_\_\_  
Administrator  
County Probation Department

12/7/09  
Date

\*\*\*\*\*

**WAIVER**

(Complete and sign the following section if a waiver is being sought concerning the submission of Appendix C – Administrative Component Local Department of Social Services – Estimate of Clients to be Served)

Monroe County requests a waiver to 18 NYCRR 407.5 (a) (3) which requests a numerical estimate of families, children and adults requiring each service listed in Section 407.4 of this same Part. Therefore, Appendix C, of the Administrative Component – Department of Social Services is not included in this Plan submission. I assert that the level of service need and utilization for the full array of services encompassed by the Child and Family Services Planning Process was taken into consideration as part of the Monroe County Child and Family Services Planning Process.

  
\_\_\_\_\_  
Commissioner  
County Department of Human Services (LDSS)

12/11/2009  
Date

\*\*\*\*\*

Enclosed is the Child and Family Services Plan – Annual Plan Update for Monroe County. My signature below constitutes approval of this report.

  
\_\_\_\_\_  
County Executive

12/11/2009  
Date

## **APPENDIX B-1 to B-5**

**B-1 List of Required Agency Agreements – Protective Services for Adults**

**B-2 List of Required Agency Agreements – Child Protective Services**

**B-3 List of Required Agency Agreements – Child Welfare Services**

**B-4 List of Required Agency Agreements – Day Care Services**

**B-5 List of Required Agency Agreements – Runaway/Homeless Youth**

Not submitted as there is no change from previous submission

## APPENDIX C LIST OF DATA SOURCES USED IN NEEDS ASSESSMENT

**INSTRUCTIONS:** The list below contains known common sources of data often used in county planning. Please check all that your county has used in the needs assessment performed for this plan. This list is not all inclusive, if you have other sources of data please indicated those as well.

<u>SOURCE</u>	<u>CHECK ALL USED</u>
1. NYS Touchstones Kids Count Data Book	<input checked="" type="checkbox"/>
2. Monitoring and Analysis Profiles	<input checked="" type="checkbox"/>
3. Child Care Review Service	<input checked="" type="checkbox"/>
4. US Census Data	<input checked="" type="checkbox"/>
5. OCFS Data Warehouse Reports & MAPS & Cognos	<input checked="" type="checkbox"/>
6. Child Trends Data Bank	<input checked="" type="checkbox"/>
7. Prevention Risk Indicator/Services Monitoring System- PRISMS (OASAS)	<input checked="" type="checkbox"/>
8. NYS Department of Health (such as Vital Statistics)	<input checked="" type="checkbox"/>
9. Surveys	<input checked="" type="checkbox"/>
a. Communities That Care Survey	<input type="checkbox"/>
b. Search Institute Survey	<input type="checkbox"/>
c. TAP Survey	<input type="checkbox"/>
d. United Way (Compass Survey or other)	<input checked="" type="checkbox"/>
e. 2007 Monroe County Youth Risk Behavior Survey (Monroe County Department of Public Health)	<input checked="" type="checkbox"/>
f. 2007 RCSD Youth Risk Behavior Survey (Monroe County Department of Public Health)	<input checked="" type="checkbox"/>
10. Monroe County Office of Probation	<input checked="" type="checkbox"/>
11. Vera Institute of Justice	<input checked="" type="checkbox"/>
12. Annual Reports	
a. 2008 Preventive Services Annual Report	<input checked="" type="checkbox"/>
b. Adult Protective 2006 Annual Report	<input checked="" type="checkbox"/>
12. Other Data Sources including archival data (please specify):	
a. Bureau of Labor Statistics	<input checked="" type="checkbox"/>
b. MCDHHS Housing/Homeless Services 2006 Report	<input checked="" type="checkbox"/>
c. Children's Defense Fund (data on child poverty)	<input checked="" type="checkbox"/>
d. 2008 Monroe County DHS Budget	<input checked="" type="checkbox"/>
e. Rochester-Monroe County Youth Bureau	<input checked="" type="checkbox"/>
f. Monroe County Office of Mental Health	<input checked="" type="checkbox"/>
j. <i>Close-Up on the NYS Economy</i> , Center for Governmental Research	<input checked="" type="checkbox"/>
k. <i>Benchmarking Regional Rochester</i> , Common Good Planning Center	<input checked="" type="checkbox"/>
l. <i>Measuring Sprawl and Its Impact</i> , Smart Growth America	<input checked="" type="checkbox"/>
m. <i>Report to the Monroe County Legislature</i> , Blue Ribbon Commission on Monroe County Finances	<input checked="" type="checkbox"/>
n. <i>Upstate NY's Population Plateau</i> , Brookings Institution 8/03	<input checked="" type="checkbox"/>
o. Catholic Family Center, Refugee Resettlement program data	<input checked="" type="checkbox"/>
p. <i>New York, the State of Learning: Statewide Profile of the Educational System</i> , NY State Department of Education	<input checked="" type="checkbox"/>

q. <i>Out of Reach</i> , National Low Income Housing Coalition	<input checked="" type="checkbox"/>
r. NYS Division of Criminal Justice Services, 1992 and 1995 reports on Disproportionate Minority Confinement	<input checked="" type="checkbox"/>
s. National Low Income Housing Coalition <i>Out Of Reach 2004</i>	<input checked="" type="checkbox"/>
t. National Association of Home Builders, Housing Opportunity Index 2001	<input checked="" type="checkbox"/>
u. Vera Institute of Justice <i>Widening the Lens: A Panoramic View of Juvenile Justice in New York State</i>	<input checked="" type="checkbox"/>
v. Monroe County Department of Probation-Community Corrections	<input checked="" type="checkbox"/>
w. <i>Children Who Witness Domestic Violence: A Study in Rochester, NY</i> , University of Rochester Department of Political Science	<input checked="" type="checkbox"/>
x. <i>2010 Community Action Plan for Greater Rochester</i> , The Children's Agenda	<input checked="" type="checkbox"/>
y. 2009 CFSR Local Self Assessment	<input checked="" type="checkbox"/>

## APPENDIX D

### Relationship between County Outcomes and Title IV-B Federal Goals

Directions: Please list each county outcome that supports or relates to achievement of the below identified Federal goals. If the information is included in the narrative, the Appendix does not have to be included.

<b>Title IV-B of the Social Security Act Subpart I</b>	
Goal 1: Families, including nuclear, extended and adoptive families will be strengthened and supported in raising and nurturing their children; in maintaining their children's connections to their heritage; and in planning for their children's future.	
Core Priority # 2	
Outcomes 1, 3, 5, 8	
Goal 2: Children who are removed from their birth families will be afforded stability, continuity and an environment that supports all aspects of their development.	
Core Priority # 1, # 2	
Outcomes 1, 2, 3, 5, 8	
Goal 3: Victims of family violence, both child and adult, will be afforded the safety and support necessary to achieve self-sufficiency (adult), and/or to promote their continued growth and development (child).	
Core Priority #1, 2	
Outcomes 1, 2, 3, 4, 5, 8	
Goal 4: Adolescents in foster care and pregnant, parenting and at-risk teens in receipt of public assistance will develop the social, educational and vocational skills necessary for self-sufficiency.	
Core Priority #1, #2	
Outcomes 3, 4, 5, 6, 8	
Goal 5: Native American families, including nuclear, extended and adoptive families will be strengthened and supported in raising and nurturing their children; in maintaining their children's connections to their tribal heritage; and in planning for their children's future.	
Core Priority #2	
Outcome 3, 4, 5	

**APPENDIX E  
CHILD FAMILY SERVICES PLAN**

**COUNTY SUMMARY PLANNING PROCESS ACTIVITIES**

Please feel free to adjust this form or make multiple copies in order to capture planning process.

<b>NAME OF AGENCY, TASK FORCE COMMITTEE, OR BOARD</b>	<b>MEMBERSHIP</b>	<b>MEETING FREQUENCY</b>	<b>MEETING TYPE AND BRIEF SUMMARY</b>
2009 CDC Youth Risk Behavior Survey	R/MCYB, Mon Co Health Dept., Monroe County School Districts & RCSD	1 <sup>st</sup> quarter of 2009 to agree on current survey questions ; results given in 10/09	Work group. Youth risk behavior survey admin. By Health Dept every 2 yrs. Community input modifies/revised to address current community needs. Asset questions (optional by district)) added in 2005; Homeless question added in 2007.
United Way Blueprint for Change : Success in School Age Youth	UW, Youth Bureau, Youth Service Providers; community stake holders	June 09 thru November 09	Individual and group input sessions. Youth Bureau staff Input given as community experts. Provider groups gave feedback to UW in order to address critical community needs/gaps
Greater Rochester After School Alliance (GRASA) Youth Program Quality Assessment ( YPQA) for after school programs	Youth Bureau staff, RCSD, RACF, City of Rochester Human Services, Children's Institute	Meets as required by tasks assigned and to report out to larger group	GRASA has contracted with Children's Institute to administer YPQA. Plans are to work to create TOT training program here in Rochester and expand YPQA assessment to youth development programs
United Way Blueprint for Change: Crisis Services	Youth Bureau RHY Coord., UW staff & Service Providers, community stakeholders	September thru December 09 Individual & group input sessions	Individual and group input sessions. RHY Coord. Input given as a community expert. Provider groups gave feedback to UW in order to address critical community needs/gaps
Runaway and Homeless Youth Services Provider group	Youth Bureau RHY Coord., RHY Service providers and other youth housing providers	Monthly	RHY providers meet monthly to connect services, link and learn, share resources and address mutual concerns, community needs
Youth Services Quality Council (YSQC)	Youth Bureau staff and 65 youth services organizations	Monthly	Youth services member organizations to provide shared leadership, training and technical assistance

Continuum of Care or the Homeless	Youth Bureau RHY Coord, City & county staff, OMH, DHS, Homeless Services Providers	Monthly & as work is required	City County planning for all homeless services; writes HUD COC plan to bring 4.3 million \$ to city-county continuum of services
Greater Rochester After School Alliance (GRASA)	RCSD, RACF, City Human Services, Service Providers	Bi-monthly ; as work is required	Alliance of stake holders promoting quality after school services
Community Asset Partner Network (CAPN)	Youth Bureau, City of Rochester, all 18 towns of Monroe County, UW	Monthly & work group committees	County-wide network of all the towns and the city of Rochester with the goal of promoting asset building thru positive youth development for all youth
Child & Family Services Internal Process Improvement Initiative	MCDHS; others as needed	Currently as needed	Established benchmarks and review MCDHS activity in light of benchmarks; develop strategies to move forward on implementing strategies identified in CFSR Local Assessment
NYConnects	OFA, APS, LifeSpan, Connects, Mon Co Long Term Care Council, other providers of services to aging population	Monthly	Workgroup looking at Care/Case Management to define the issue(s) and identify opportunities to make systemic changes that will impact this issue. OFA is pulling together community data that will identify what has been accomplished in the arenas of care/case management services and long term care, what models/services have worked, what has not worked as well and why, current challenges to addressing these issues and effective models used in other communities.
ACCESS (Achieving Culturally Competent Effective Services and Supports)	OMH, RMCYB, MCDHS, Probation, community agencies, CCSI, community at large	Meetings vary; sub-group work	SAMHSA grant funded initiative to transform the system of care for children (birth -21) with significant emotional disturbance and their families with special focus on children of color.
Alternatives to Detention Initiative	MCDHS, Probation, Family Court, ACCESS, RPD, Vera, MCLAC/Law Guardians, Presentment	Monthly; sub-committee work as identified	Meetings are co-facilitated by Probation and MCDHS. Purpose is to design and monitor an ATD system for PINS and JD youth and measure impact on local juvenile justice

	Agency, Administrative Judge		system
Safe Schools/Healthy Children Initiative	RCSD, MCDHS, OMH, OCFS, Probation, R/MCYB, Family Court, RPD, youth serving agencies, community	Sub-committee work; meetings as scheduled	SS/HS focus is on changing service system processes, procedures and protocols among major youth serving systems (Education, Justice, Social Services and Mental Health) to assure collaborative support for youth and their families. Rochester's SSHS partners selected youth transitioning from justice, mental health and suspension programs as a high priority for systems improvement under this grant.
Disproportionate Minority Representation (DMR)	MCDHS, OCFS, Case Family Programs, other stakeholders to be identified	Process to start 3/2010	Conduct an analysis of our disproportionate minority representation (DMR) in children placed out of home and to develop strategies to reduce DMR in Monroe County. In addition to gaining an understanding of DMR in local decision making around placement decisions, Monroe County will be looking to developing policies, practices and contracted services that are more culturally responsive and that support the goal of reducing out of home placements for children of color.
MCDHS Day Care Advisory Group	MCDHS, day care providers	Quarterly	Discuss service issues. Ways to maximize Child Care Block Grant funds, Identify gaps in services
Citizens Advisory Council – Child and Family Services Subcommittee	MCDHS, local human service agencies, concerned citizens, county legislature representative	Every other month	Provide input to Commissioner around the services provide by MCDHS – Child & Family Services Division; discuss emerging issues in the community and advocate for the needs of children and families in the Greater Rochester Community.
Juvenile Justice Council	MCDHS, Probation, County Executive's Office, Law Department, Family Court, RPD, LEC, Sheriff's Dept, R/MCYB,	Monthly	Oversight of the local juvenile justice system. Reviews data. Identifies emerging issues. Supports development of new programs and services to address unmet/identified needs

	MCLAC, Presentment Agency, Hillside Children's Ctr, St. Joseph's Villa, OMH, OCFS		
Alternative Funding Mechanism for Guardianship Services	County Law Department, APS, DHS Financial Care Path, Catholic Family Center	Varies	To develop a process for paying for administrative fees/cost for guardianship services provided by Catholic Family center through client's social security funds as appropriate.

**APPENDIX F  
 OUTCOMES & STRATEGIES**

**OUTCOME 1: Individuals and families are safe**

<b>Strategy to achieve desired outcome:</b>			
The implementation of the Nurse Family Partnership (NFP) program, Community Health Worker Program (PHVP) and other preventive collaborative initiatives ( <u>Building Healthy Children</u> ) are designed to prevent the incidence of child abuse.			
PRIORITY FOCUS AREA ADDRESSED: Youth Development, Family Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: 1 and 4	ADULT PROTECTIVE GOAL ADDRESSED: N/A
Lead Partnerships: MCDHS, Mt. Hope Family Center, Strong Memorial Hospital, Society for the Protection and Care of Children, Children's Institute, MC Department of Public Health			
<b>Strategies Completed as of October 14, 2008:</b>			
<u>For NFP:</u>			
<ul style="list-style-type: none"> <li>• Hired 12 nurses</li> <li>• Enrolled 210 families as of 6/1/08</li> <li>• 130 births</li> <li>• Outcome information on subsequent child abuse and neglect referrals is not yet available as program recently started, Nationally, NFP has demonstrated a 48% reduction in child abuse and neglect</li> </ul>			
<u>For PHVP:</u>			
<ul style="list-style-type: none"> <li>• 1/1/08-3/31/08 212 families referred and 100% of the children avoided foster care</li> <li>• 98.6% (209) families did not have substantiated CPS reports. 3 CPS referrals were made for families considered high risk and involved with multiple agencies</li> <li>• Waiting list of about 30 per month</li> </ul>			
<u>Building Healthy Children:</u>			
<ul style="list-style-type: none"> <li>• Negotiated roles/responsibilities among the collaborative partners that builds upon each partners expertise and resources</li> <li>• 106 participants have been enrolled as of 6/1/08 including 44 in an assessment and referral group and 62 in an intensive treatment group.</li> </ul>			
<b>Strategies completed October 15, 2008 – December 15, 2009:</b>			
<u>For NFP:</u>			
<ul style="list-style-type: none"> <li>• Hired 11 nurses</li> <li>• Enrolled 239 families as of 11/30/09</li> <li>• 170 births</li> <li>• Program continues to use quarterly reports supplied by the National Service Office for NFP, generated with program specific information to ensure quality and fidelity to the NFP program model</li> </ul>			
<u>For PHVP:</u>			
<ul style="list-style-type: none"> <li>• 1/1/09 -11/30/09, 328 families active and 99.7% (327) of the children avoided foster care</li> <li>• 99.1% of the families did not have a substantiated CPS reports</li> <li>• Waiting list of 33 clients (includes clients ineligible for NFP due to late pregnancy gestation)</li> </ul>			
<u>Building Healthy Children:</u>			

- Negotiated roles/responsibilities among the collaborative partners that builds upon each partners expertise and resources and experience in program implementation
- 217 participants have been enrolled as of 10/31/09 including 109 in an assessment and referral group and 108 in an intensive treatment group
- 95% avoidance of CPS reports and 99% avoidance of out of home placement among

**Strategies to complete December 15, 2009 – December 31, 2010:**

- NFP
- Program will compare program quarterly data for 2008 and 2009 (after 4<sup>th</sup> quarter data is collected) to plan for 2010
  - Increase the number of clients being served to 264 and explore resources to increase enrollment to 300
  - Coordinate efforts with MCDHS to identify instances of indicated reports of child abuse and neglect for NFP participants. Connect clients with appropriate community services to address issues affecting decision making and ability to parent effectively.
  - Develop strategies to address program attrition in the 15-17 year old age group
  - Continue to review appropriateness of referrals to the program and identify gaps in services/resources in the community for those referrals not appropriate for NFP.

- For PHVP:
- Continue to review appropriateness of referrals to the program and identify gaps in services/resources in the community for those referrals not appropriate for PHVP.
  - Identify evidence-based curricula that could be incorporated into PHVP
  - Review and monitor goals and objectives to ensure effective outcomes for the program even in the absence of randomized control trials.

- Building Health Children:
- Explore other pediatric practices to which BHC might be expanded.

Contact(s): NFP: Mike Dedee, Administrator, MC Dept of Public Health; Jobena Robinson, MC Dept of Public Health; RHVP: Pat White, MC Dept of Public Health; Building Healthy Children: Jody Todd Manly PhD, Mt. Hope Family Center

**Strategy to achieve desired outcome:  
 Increase the number of family type home placements for APS clients.**

PRIORITY FOCUS AREA ADDRESSED: Community Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: N/A	ADULT PROTECTIVE GOAL ADDRESSED: 1 and 2
---	-------------------------------------	---	---

Lead Partnerships:  
 Monroe County DHS- Adult Protective Services, MCDHS Financial Care Path; OCFS

- Strategies Completed as of October 14, 2008:**
- Certified two new family type homes (Total is 2 certified family type homes in Monroe County as of 7/31/08)
  - Sr. Caseworker assigned to take lead on development of family type homes and act as APS clearinghouse re inquires about family type homes
  - APS staff worked to ensure regulatory compliance for all family type homes by conducting site visits and monitoring for compliance

- Strategies completed October 15, 2008- December 2009:**
- APS staff worked to ensure regulatory compliance for all existing family type homes by conducting site visits and monitoring for compliance
  - APS did not identify clients with need for Family Type Homes. Any development of new homes will be on as needed basis.

- Strategies to complete December 15, 2009 - December 15, 2010**
- Any development of new Family Type Homes will be on as needed basis.
  - Identify and establish working relationships with those agencies who are establishing more Assisted Living units that can be paid through Medicaid
  - APS staff will continue to ensure regulatory compliance for all existing family type homes by conducting site visits and monitoring for compliance

Contact(s): Wendy Bolton, Administrator, MCDHS Child and Family Services Division			
<b>Strategy to achieve desired outcome:</b>			
Continue to support a multi-disciplinary approach for community collaborators on adult protective services issues/cases.			
PRIORITY FOCUS AREA ADDRESSED: Community Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: N/A	ADULT PROTECTIVE GOAL ADDRESSED: 1 and 2
Lead Partnerships: MCDHS Adult Protective Services; Mon Co Legal Department, OFA, OCFS			
<b>Strategies Completed as of October 14, 2008:</b>			
<ul style="list-style-type: none"> <li>Continue to staff the High Risk Committee to conference at-risk adults in a cross discipline form to identify the more appropriate case plan</li> <li>Meet monthly with County Legal re clients specific issues/cases</li> <li>Participate in the Long Term Care Committee</li> <li>APS Supervisors gave presentations to community groups and groups of providers on APS issues and the services that APS can provide</li> <li>Continue to work with area utility companies to identify potential disconnects for elderly or impaired individuals and provide follow-up or referral for case management, if necessary.</li> <li>Continue to work with area utility companies on services disconnects to the elderly and impaired individuals</li> </ul>			
<b>Strategies completed October 15, 2008- December 15, 2009:</b>			
<ul style="list-style-type: none"> <li>APS workers are now attending SPOA meetings to access services for clients eligible through SPOA.</li> <li>APS has representation on the Long Term Care Council.</li> <li>APS participates with the Fatality Review Committee</li> <li>APS participates on the NYS Coalition on Elder Abuse</li> <li>APS staff will be available to give presentations to organizations upon request</li> <li>APS Administrator and Supervisors were involved with several presentations to community agencies such as Agency for the Blind and Visually Impaired and the Mental Health Association. APS also led workshops at the annual NYS Adult Abuse Institute and did a joint presentation with Lifespan at the State Society on Aging conference</li> <li>Continued to work with area utility companies to identify potential disconnects for elderly or impaired individuals and provide follow-up or referral for case management, as necessary.</li> </ul>			
<b>Strategies to complete December 15, 2009- December 31, 2010:</b>			
<ul style="list-style-type: none"> <li>Identify and establish ties to existing community processes and committees that touch on or address issues that APS clients confront. These groups include Continuum Care for the Homeless and OFA Elder Council</li> <li>Continue to participate on local committees and boards such as Long Term care Council, Fatality Review Committee, etc.</li> <li>APS staff will be available to give presentations to organizations upon request</li> <li>Continue to work with area utility companies to identify potential disconnects for elderly or impaired individuals and provide follow-up or referral for case management, as necessary.</li> <li>Look at data on utility disconnect notices/cases involving the elderly or impaired adults to identify individuals with frequent notices of disconnects. Work with MCDHS Financial Care Path, HEAP, OFA and Lifespan to identify and address underlying problems to reduce the likelihood of continuing disconnect threats/notices.</li> <li>APS along with the other members of the High Risk Committee will evaluate the current status of the committee, , consider a restructuring of the committee which may include an expansion of membership and redefining its purpose and goals.</li> </ul>			
Contact(s): Wendy Bolton, Administrator, MCDHS Child and Family Services Division			

**Outcome 2: Abused, Neglected or Exploited adults will be identified.**

<p><b>Strategy to achieve desired outcome:</b>                  Continue to partner with local organizations to provide information on adult abuse and improve internal capacity to serve abused adults with the most appropriate services.</p>			
PRIORITY FOCUS AREA ADDRESSED: Family Development, Community Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: 1, 3	ADULT PROTECTIVE GOAL ADDRESSED: N/A
Lead Partnerships: Monroe County Adult Protective Service, OFA, Catholic Family Center, NY CONNECTS, Lifespan, Elder Source			
<p><b>Strategies Completed as of October 14, 2008:</b></p> <ul style="list-style-type: none"> <li>• Realigned staff within APS teams to create two points of intake to facilitate more timely assessment and response to high risk situations and vulnerable adults</li> <li>• APS supervisors met with community groups to educate them on APS and other community resources available to vulnerable adults</li> <li>• Provided testimony at NYS Legislature hearing on adult protective issues and needs of vulnerable adults</li> <li>• Effective June 2008, APS is located with CPSI teams at St. Paul St. offices to enable cross discipline coordination</li> <li>• APS supervisors and seniors attend Child and Family Services Division staff meetings</li> <li>• APS implemented a protocol for reviewing the death of any APS client. If need for further investigation is identified a fatality review board will be convened</li> <li>• Reviewed open cases to determine appropriateness of case for APS services and client’s continuing needs. Cases determined to be more appropriate for a community based service were referred. This case “clean up” resulted in over a 30% reduction of open cases with APS and brings caseloads to manageable levels.</li> </ul>			
<p><b>Strategies completed October 15, 2008- December 15, 2009:</b></p> <ul style="list-style-type: none"> <li>• CFC reports to APS data on guardianship cases referred to CFC to ensure fiscal accountability and consumer satisfaction.</li> <li>• APS supervisors and administrator review open APS cases on an on-going basis to ensure eligibility criteria are met and appropriate services are being provided.</li> <li>• Several in-service training were provided to APS staff including Legal Update Training, Financial Exploitation training provided by Lifespan, and a presentation by Interim Health Care.</li> <li>• APS caseworkers also attended trainings related to APS on an individual basis</li> </ul>			
<p><b>Strategies to complete December 15, 2009 – December 15, 2010:</b></p> <ul style="list-style-type: none"> <li>• APS will work with CFC to develop a client satisfaction survey for guardianship cases referred to CFC.</li> <li>• APS will track guardianship cases referred to CFC to ensure fiscal accountability and consumer satisfaction</li> <li>• APS supervisors and administrator will periodically review open cases to ensure that appropriateness and need for continued APS services.</li> <li>• APS will look for opportunities to provide in service training on existing or developing community resources that are relevant to APS work.</li> </ul>			
Contact(s): Wendy Bolton, Administrator, MCDHS Child and Family Services Division			

**Outcome 3: Individuals and families experience permanency in their living situations**

<p><b>Strategy to achieve desired outcome:</b>                  Continue to support children and families in innovative ways to reduce out of home placement, current initiatives include Youth &amp; Family Partnership and support of MST and FFT.</p>			
PRIORITY FOCUS AREA ADDRESSED: Youth Development, Family Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: 1, 3, 4	ADULT PROTECTIVE GOAL ADDRESSED: N/A
Lead Partnerships: Monroe County Department of Human Services, Monroe County Office of Probation-Community Corrections, CCSI, Inc., MCDHS-Office of Mental Health, Juvenile Justice Council, Cayuga Home for Children			
<p><b>Strategies Completed as of October 14, 2008:</b></p> <ul style="list-style-type: none"> <li>• Implemented a new design of the Youth and Family partnership program which separates out the Probation function from the care coordination function to enhance effective care coordination.</li> <li>• Implemented a new team leadership design to include YFP supervisor, DHS senior caseworker, YFP senior care coordinator and part-time Probation supervisor.</li> <li>• Continued coaching/mentoring support to increase the effectiveness of care coordination.</li> <li>• Continued use of MST and FFT for pre and post adjudicated PINS cases to prevent petitions and out of home placements for high risk youth.</li> </ul>			
<p><b>Strategies completed October 15, 2008- December 2009:</b></p> <ul style="list-style-type: none"> <li>• Completed Care Coordination training for all C/FS Division supervisors</li> <li>• Established a C/FS Division Child and Family Team Process coaching group</li> <li>• C/FS coaching group became part of the Monroe County coaching group for Care Coordination</li> <li>• Completed Train-the-Trainer Care Coordinator for county-wide Care Coordination training team</li> <li>• Increased use of CareManager tools to monitor functioning of care coordinators at YFP and increase effectiveness of the model</li> <li>• Continued use of MST and FFT for pre and post adjudicated PINS cases to prevent petitions and out of home placements for high risk youth.</li> </ul>			
<p><b>Strategies to complete December 15, 2009- December 31, 2010:</b></p> <ul style="list-style-type: none"> <li>• Continue coaching/mentoring support to increase the effectiveness of care coordination</li> <li>• Continue Care Coordination training for all C/FS management staff</li> <li>• Develop and complete System of Care (SOC) Values and Principles training for all C/FS staff</li> <li>• Develop and complete SOC Values and Principles training for all Family Services Division Probation staff</li> <li>• Increase use of CareManager tools to monitor functioning of care coordinators at YFP to continue to increase effectiveness of the model</li> <li>• Continue to use MST and FFT for pre and post adjudicated PINS cases to prevent petitions and out of home placements for high risk youth</li> </ul>			
Contact(s): Linda Oinen, Administrator, MCDHS Child and Family Services Division			
<p><b>Strategy to achieve desired outcome:</b>                  Continue to focus efforts on increasing the number of foster and adoptive family homes, which could increase quality of foster care, increase adoptions and improve permanency.</p>			
PRIORITY FOCUS AREA ADDRESSED: Youth Development,	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: 1,2,3,4,5	ADULT PROTECTIVE GOAL ADDRESSED: N/A

Family Development			
<b>Lead Partnerships:</b> Monroe County Department of Human Services; Metrix Marketing; Hillside Children's Center; CAP			
<b>Strategies Completed as of October 14, 2008:</b> <ul style="list-style-type: none"><li>• Contract w/ Metrix Marketing to maintain the foster parent recruitment/information kiosk. The kiosk is moved monthly to various sites in Monroe County.</li><li>• Metrix Marketing updated the foster parent recruitment PowerPoint presentation and included this in the kiosk</li><li>• Metrix Marketing developed and arranges for the display of the Highway Banner re foster parent recruitment</li><li>• Hold twice monthly information sessions for individuals interested in learning more about becoming a foster parent. MCDHS sponsors one and Metrix Marketing sponsors the other. Sessions are held at various sites throughout the county.</li><li>• Developed new recruitment campaign for foster parents for teens. Campaign includes a new brochure and PSA spots. Information is also available in kiosk.</li><li>• Continue PSAs targeted to prospective foster parents</li><li>• Metrix Marketing in consultation with MCDHS, is increasing outreach efforts to recruit foster parents by targeting area businesses, churches and post-secondary educational institutions via presentations and displays.</li><li>• Begun to collect data on reasons foster homes close to be used to tailor/refine foster home "retention efforts"</li><li>• Distribute a foster parent newsletter quarterly</li><li>• Hold two (2) foster parent recognition/appreciation events annually. In 2007, that included a dinner and zoo event.</li><li>• Formed several foster parent support groups</li><li>• Formed a Foster Parent Advisory Board. Foster Parent Advisory Board sponsored a foster parent and teen career night.</li><li>• National Adoption Day activities including finalization of 17 adoptions (2008)</li><li>• Displayed pictures of freed children in the Heart Gallery (11/07)</li><li>• Developed display boards with pictures of freed children in need of adoptive homes. Display boards are taken to foster care recruitment meetings and other events to assist in locating adoptive families.</li><li>• Worked with CAP and Hillside Children's Center through their Wendy's Wonderful Kids grant to do child specific recruitment of adoptive homes. Several youth have been matched to adoptive homes via this collaboration.</li><li>• Providing additional training for foster parents including trauma, behavioral management, crisis intervention, and Lifebooks and the role they play with foster children.</li></ul>			
<b>Strategies completed October 15, 2008 – December 15, 2009:</b> <ul style="list-style-type: none"><li>• Metrix Marketing in consultation with MCDHS increased outreach efforts to recruit foster parents by further targeting the Monroe County Women's Expo, area businesses, church, community groups and post-secondary educational institutions</li><li>• Continued contract w/ Metrix Marketing to maintain the foster parent recruitment/information kiosk. The kiosk is moved monthly to various sites in Monroe County. Utilized the kiosk in outreach efforts to new target audiences.</li><li>• Continued PSAs targeted to prospective foster parents</li><li>• Held twice monthly information sessions for individuals interested in learning more about becoming a foster parent. MCDHS sponsors on and Metrix Marketing sponsors the other. Sessions are held at various sites throughout the county. Targeted "mail drops" distributed flyers about the information sessions to households in specific geographic locations near the month's location prior to each info session.</li><li>• Analyzed data on reasons foster homes close. Developed/refined "retention efforts" strategies to increase support to valued foster families considering closing.</li><li>• Distributed a foster parent newsletter quarterly</li><li>• Held two (2) foster parent recognition/appreciation events annually. In 2009, included a foster parent recognition dinner and a foster family zoo</li></ul>			

event

- Implemented a Monroe County Foster Care Website that will include message board for foster parents to communicate with each other, recruitment information, foster parent forms, electronic newsletter, pictures gallery of children freed for adoption, Lifebook pages, news to use, training information, etc...
- Provided additional training for foster parents. Worked with the Foster Parent Advisory Board to identify issue/topics for future training and support. Surveyed foster parents to identify what they would like further training on.
- Provided support to the Foster Parent Advisory Board.
- Provided staff assistance (as requested) to the foster parent support group
- Trained additional MCDHS staff in adoption work to facilitate permanency for freed children and youth
- Updated display boards with pictures of freed children in need of adoptive homes. Display boards are taken to foster care recruitment meetings and other events to assist in locating adoptive families.
- Utilized display boards with pictures of freed children in need of adoptive homes. Display boards are taken to foster care recruitment meetings and other events to assist in locating adoptive families.
- Displayed pictures of freed children in CAP's Heart Gallery (11/09)
- Continued to work with CAP and Hillside Family of Agencies through their Wendy's Wonderful Kids Grant staff to identify and recruit child specific adoptive homes.
- Worked with Monroe County Family Court, CAP, Hillside Family of Agencies and OCFS to plan events for National Adoption day including finalization of 15 adoptions on 11/20/09. The event was covered by local news media.
- Began collaborating with OCFS, Hillside Family of Agencies, local district and others to enhance implementation of a new grant, "A parent for every Child."

**Strategies to complete December 15, 2009 - December 31, 2010:**

- Metrix Marketing in consultation with MCDHS, will continue increased outreach efforts to recruit foster parents by updating media advertisements/promotional flyers and further targeting area businesses, church, community groups and post-secondary educational institutions
- Continue contract w/ Metrix Marketing to maintain the foster parent recruitment/information kiosk. The kiosk is moved monthly to various sites in Monroe County. Utilized the kiosk in outreach efforts to new target audiences by displaying at new locations.
- Continue PSAs targeted to recruit prospective foster parents
- Hold twice monthly information sessions for individuals interested in learning more about becoming a foster parent. MCDHS sponsors on and Metrix Marketing sponsors the other. Sessions are held at various sites throughout the county. Targeted "mail drops" distributed flyers about the information sessions to households in specific geographic locations near the month's location prior to each info session.
- Distribute a foster parent newsletter quarterly
- Hold two (2) foster parent recognition/appreciation events.
- Enhance the Monroe County Foster Care Website that will include message board for foster parents to communicate with each other, recruitment information, foster parent forms, electronic newsletter, pictures gallery of children freed for adoption, Lifebook pages, news to use, training information, etc...
- Increase potential supports, resources, and placement options to children and families through training MCDHS staff in "Family Finding" training/Kevin Campbell.
- Train MCDHS Homefinding staff trainers in "Shared parenting" curriculum, provide info to MCDHS staff, birth and foster parents, begin training foster parents.
- Begin holding Shared parenting "Icebreaker" meetings for birth and foster parents with MCDHS staff when new foster care placements occur.
- Provide additional training for foster parents.
- Provided support to the Foster Parent Advisory Board.

- Provide staff assistance (as requested) to the foster parent support group.
- Continue to work with CAP and Hillside Family of Agencies through their Wendy's Wonderful Kids Grant staff to identify and recruit child specific adoptive homes.
- Worked with Monroe County Family Court, CAP, Hillside Family of Agencies and OCFS to plan events for National Adoption Day (2010)
- Work with "A Parent for Every Child" Advisory Board and grant staff to identify potential resources families for Monroe County freed youth in the OMRDD, OMH and DJJOY populations.

Contact(s): Sue Johnson, Administrator, MCDHS Child & Family Services Division

**Strategy to achieve desired outcome:**  
 Increase access to stable living for Runaway and Homeless Youth

PRIORITY FOCUS AREA ADDRESSED: Youth Development, Family Development, Community Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: 3,4	ADULT PROTECTIVE GOAL ADDRESSED: N/A
---	-------------------------------------	---	--------------------------------------

Lead Partnerships:  
 Rochester Monroe County Youth Bureau, Runaway/Homeless Youth Providers, Street Outreach Programs, Rochester City School District, Homeless Services Network Providers

- Strategies Completed as of October 14, 2008:**
- Continued to increase community awareness and communication of the existing community based services and advocate for runaway/homeless youth
  - Continued to enhance existing services of providers (technical assistance, access to training resources, shared resources across agency providers)
  - Documented gaps in services on an ongoing basis and address the gaps as a community through the Continuum of Care of the Homeless
  - In September '07 both Hillside AIY and Genesis House applied for Federal Health and Human Services Runaway/Homeless Youth TLP and SOP funds to maintain R-HY program services. Hillside was not awarded either SOP or TLP. The center did not receive their Street Outreach continuation, they did receive TLP funds

- Strategies completed October 15, 2008- December 2009:**
- Continued to increase community awareness and communication of the existing community based services and advocate for runaway/homeless youth
  - Continued to enhance existing services of providers (technical assistance, access to training resources, shared resources across agency providers)
  - Documented gaps in services on an ongoing basis and address the gaps as a community through the Continuum of Care of the Homeless
  - In September '09 both Hillside AIY and Genesis House applied for Federal Health and Human Services Runaway/Homeless Youth TLP and SOP funds to maintain R-HY program services. Hillside was awarded SOP and TLP. The Center for Youth Services received their Street Outreach continuation as well as TLP funds in 2009.

- Strategies to complete December 15, 2008- December 31, 2010:**
- Continue to maintain existing funding for runaway/homeless youth
  - Work with SA Genesis House to maintain existing shelter and case management services through technical assistance and advocacy efforts
  - Assess and plan for difficult to serve older runaway/homeless youth transitional housing needs
  - Work with Rochester city school District and other school districts to obtain and maintain McKinney Homeless education funds

Contact(s): Joan Bickweat, Runaway/Homeless Youth Coordinator, Rochester Monroe County Youth Bureau

**Strategies to achieve desired outcome:**  
 Maintain a system of diversion alternatives from pre-filing to post adjudication for PINS and JD youth that reduces the reliance on placement

PRIORITY FOCUS AREA ADDRESSED: Youth Development, Family Development, Community Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: 4	ADULT PROTECTIVE GOAL ADDRESSED: N/A
---	-------------------------------------	---	--------------------------------------

Lead Partnerships:  
 Monroe County Department of Human Services- Child & Family Services Division, Monroe County Office of Probation-Community Corrections, Monroe County Department of Human Services-Office of Mental Health, Monroe County Family Court, CCSI, Inc., Juvenile Justice Council, Vera Institute, Hillside Children's Center

**Strategies Completed as of October 14, 2008:**

- Implemented FACT(Family Access and Connection Team) (1/1/07)
- Implemented a redesign of the local PINS system including: establishing FACT as the front door for parents/guardians/schools concerned with PINS behavior; Medical Motors began providing transportation per Transportation RFP as of 6/07; Berkshire Farms began to provide PINS respite services as of 2/07 in response to RFP; Family Education Seminar started 6/07; front-end response to missing/runaway children by having Probation Officers look for the youth prior to a petition being filed; and established protocol for school truancy referrals; developed and implemented a Girls Group to support young women coming in as PINS and address issues around self-esteem
  - Co-located SPOA and FACT as a first phase of institutionalizing a single point of entry
  - Track data & prepare monthly/quarterly reports to FIT (FACT Implementation Team), Leadership Team, and Juvenile Justice Council
  - 1<sup>st</sup> Year End Report completed ( 6/08)
  - Community information sessions held (4/07).
  - Meetings held with schools, judges, community agencies, parents groups, etc. (Ongoing)
  - Developed policy/protocol on when cases should be referred from FACT to Probation/s Juvenile Intake Unit for intensive diversion services.
  - Alternative Program review committee continues to meet twice weekly to review all PINS and JD youth where placement is being considered
  - Secured a TA grant from OCFS to work with Vera Institute of Justice to develop alternatives to detention which will reduce placement numbers
  - Secured OCFS targeted TANF funds for alternatives to detention for PINS youth for 2007/2008.
  - Applied for 2008-2009 TANF funds for alternatives to detention for PINS and JD youth.
  - Developed a 8 ½ x 11 sheet of Pre and Post Adjudication Alternatives available to Family Court Judges rather than detaining/incarcerating a youth (2007)

**Strategies completed October 15, 2008- December 2009:**

- implementation of the Alternatives to Detention continuum including ATD Probation Officer at Family Court, TeleTask information system and SJV tracking and curfew checks for PINS and JD youth
- APR (Alternative Program Committee) continues to meet weekly to review any/all PINS youth where placement is being proposed a part of PDI or Supplemental Report to the court.
- Reduced the number of truancy complaints resulting in petition.
- Develop strategies to address local "placement culture"
- DHS provided training on care coordination with Residential Placement Unit caseworkers to reduce LOS
- Identified gaps in existing array of diversion services based on outcomes from FACT evaluation and annual report(s).
- Continued to meet with schools, judges, community agencies, parents groups, etc. to explain the new PIN system, discuss questions, hear concerns and strengthen the ongoing working relationship between FACT & Mon Co Probation's Juvenile Intake and key stakeholders in the community.

- CCSI, Inc. completed initial the evaluation of FACT (12/08) and is completed further evaluation of 2009 service year
- Worked with the 3 local residential providers to define the appropriate use of residential care in the continuum of care in Monroe County (Building Bridges)

**Strategies to complete December 15, 2009 – December 31, 2010:**

- Continue implementation of the Alternatives to Detention continuum including JJCC and ATD Probation Intake
- Co-Chair the ATD Steering Committee
- Develop and pilot a Truancy Prevention/Intervention program
- Pilot 5 care coordination slots from SJV focused on reducing the LOS of those youth in residential care
- Establish an evaluation model to gather and use data to inform decisions and viability/continuation of the existing diversion programs
- Develop and implement an individual services response for families (WIT – Whatever It Takes) to prevent youth from going into residential care and/or reduce the LOS
- Work with the 3 local residential providers to implement the transformation of residential care in the continuum of care in Monroe County (Building Bridges)
- Work with OCFS to address DMR in Monroe County.

Contact(s): Linda Oinen, Administrator, MCDHS Child and Family Services Division

**Strategy to achieve desired outcome:**

Increase casework contacts between children in foster care and their caseworker to meet federal and state requirements by October 1, 2011

PRIORITY FOCUS AREA ADDRESSED: Youth Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: 1, 2, 3, 4	ADULT PROTECTIVE GOAL ADDRESSED: N/A
--	-------------------------------------	--	---

Lead Partnerships:

MCDHS- Child & Family Services Division; OCFS Monroe Regional Office

**Strategies Completed as of October 14, 2008:**

- Child & Family Services Director and Administrators established casework contact expectations and supervisors expectations
- Developed a Supervisors Expectation Training (including PowerPoint presentation) and an accompanying manual to reinforce standards established and provide supervisors with tools and guidelines to assist them in implementing the supervisors expectations with casework staff
- Hired and trained additional casework staff
- Added additional CPSM and CPSI teams that aligned supervisor: staff ratios consistent with new expectations
- Provided training to staff on correctly coding casework contacts
- Established a training team to assist teams when they are down casework staff to ensure that case contacts are being made consistent with the established expectations
- Begun to work on identify benchmarks for measuring and reporting casework contacts

**Strategies completed October 15, 2008 – December 15, 2009:**

- Further develop training team protocols to provide uniform and standardized training of new child welfare staff
- By 12/08, caseloads of management caseworkers averaged no more than 7 families per worker
- Benchmarks were finalized and tools created for Supervisors and Administrators to track them
- Developed a checklist/casework grid for supervisors to use to cover/address casework contacts during individual casework supervisory conferences
- Starting 10/08, Supervisors reviewed cases per Supervisory Benchmarks Checklist to ensure that (1) 100% of the children in foster care will have at least one monthly face-to-face contact with their caseworker and (2) 100% of parents, caretakers, and foster parents will have at least one monthly

<p>face-to- face contact with their caseworker.</p> <ul style="list-style-type: none"> <li>• Casework staff were retrained in the use of Connections codes to support accurate data collection and casework practice by (1) reviewing and using codes fro tracking face-to-face contacts with children and parents, and (2) entering progress notes that record all meaningful casework contacts.</li> <li>• DHS Child &amp; Family Services Administration review Connections reports and statistics to ensure that Connections entries by staff are timely, complete and accurately reflect the substance of the casework contacts</li> <li>• Casework staff and Supervisors are afforded on-going in-service training to assist them in better utilizing Connections system and enhancing casework skills</li> </ul>
<p><b>Strategies to complete December 15, 2009 – December 31, 2010:</b></p> <ul style="list-style-type: none"> <li>• Maintain caseload size of 7 families or less to ensure quality contacts are made</li> <li>• Maintain the standard that all children, parents and caretakers must have at least a monthly face-to-face contact with their caseworker, and increase the contact requirements to twice per month</li> <li>• To support supervisory staff, install direct link icons to Data warehouse on their desktops to enable Connections monitoring for contract compliance and correct coding.</li> <li>• Train staff in Visit Coaching to improve the quality of visits between parent and child</li> <li>• Develop guidelines for what constitutes a quality contact</li> <li>• Continue to offer ongoing in-service training to assist staff in better using Connections.</li> </ul>
<p>Contact(s): Sue McLean, Administrator, MCDHS Child and Family Services Division</p>

**Outcome 4: Adults, older adults and families are self sufficient as dictated by age**

<p><b>Strategy to achieve desired outcome:</b>                  Maintain access to financial management services and health information to enable consumers to remain stable</p>			
<p>PRIORITY FOCUS AREA                  ADDRESSED:                  Community Development, Individual Development</p>	<p>NATIONAL STANDARD ADDRESSED:                  N/A</p>	<p>TITLE IV-B FEDERAL GOAL                  ADDRESSED: N/A</p>	<p>ADULT PROTECTIVE GOAL                  ADDRESSED: N/A</p>
<p>Lead Partnerships:                  OFA, APS, CFC, Lifespan, Elder Source, NY CONNECTS</p>			
<p><b>Strategies Completed as of October 14, 2008:</b></p> <ul style="list-style-type: none"> <li>• Monitoring of the subcontracting agency/CFC is being employed to ensure that contract goals are met. Approximately 190 individuals are served via contract with CFC for financial management services/assistance.</li> <li>• Contract expectations for clients receiving financial management services include household/individual budget, support/assistance in paying bills, identify if alternative income sources are needed/are possible (SSI) and make application, etc.</li> <li>• Continued assessment of financial management cases by APS and CFC to evaluate the client' continued need for financial management and case management services. If the client is ready to "move on", APS identifies appropriate community agency/program that is more appropriate to meet the clients needs and will facilitate the linkage to the new provider/community partner.</li> <li>• The number of seniors receiving health information assistance continues to grow through community outreach. HIICAP has a presence at festivals and fairs, in the Internet, and through the print media.</li> </ul>			
<p><b>Strategies completed October 15, 2008 – December 15, 2009:</b></p>			

<ul style="list-style-type: none"> <li>• Ongoing reassessment of the financial management services being provided through CFC</li> <li>• Outcomes/expectations were developed jointly between APS and CFC with an emphasis on clients maintaining their benefits on an ongoing basis without disruption and minimizing the number of moves (residences) for each client.</li> <li>• APS continued to explore, on a case to case basis, what community resources are available to provide financial management for APS clients. Clients were evaluated as to whether they can privately pay for rep-payee services or have their need for a representative payee be met through another agency with whom they are involved, such as mental health centers or other agencies that are providing case management services.</li> </ul>
<p><b>Strategies to complete December 15, 2009 - December 31, 2010:</b></p> <ul style="list-style-type: none"> <li>• Finalize a process with Catholic Family Center for them to provide Guardianship services through an alternative payment process available for some clients who receive social security benefits, thus decreasing the need for APS funded Guardianship services.</li> <li>• Support the use of the NYCONNECTS system and Eldersource by referring those individuals who are not eligible for APS services, and/or their support systems, to NYCONNECTS and Eldersource for information on long term care resources and other available health care programs.</li> <li>• Maximize the use of Lifespan's voluntary money management program in order to preserve individuals' independence in the community.</li> <li>• Provide additional training for APS workers in regards to Medicaid and Medicare programs, including eligibility criteria.</li> <li>• Strengthen the working relationship between APS and the DHS Home Support Unit so as to fully utilize available services which will assist in maintaining clients in the community for longer periods of time.</li> </ul>
<p>Contact(s): Wendy Bolton, Administrator, MCDHS Child and Family Services Division</p>

**Outcome 5: Individuals and families access need support to obtain optimal development**

<p><b>Strategy to achieve desired outcome:</b>                  Continue commitment to strengthening the Community Asset Partnership Network and expanding the voice of the Asset Approach through grant seeking and refinement of local Asset initiatives.</p>			
PRIORITY FOCUS AREA ADDRESSED: Youth Development, Community Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: N/A	ADULT PROTECTIVE GOAL ADDRESSED: N/A
Lead Partnerships: Rochester Monroe County Youth Bureau, Monroe County Department of Public Health, Community Asset Partnership Network, Youth Service Quality Council			
<p><b>Strategies Completed as of October 14, 2008:</b></p> <ul style="list-style-type: none"> <li>• Continued community wide asset building media campaign through positive youth development is being developed using social marketing strategies to influence positive community involvement in the lives of children and youth to build assets and increase asset building behaviors of community residents</li> <li>• Continued to provide asset building recognition opportunities for individuals, groups, and communities to nurture and support they efforts</li> <li>• Ongoing distribution of Healthy Communities/Healthy Youth, strength-based, positive youth development, research and updates of "Link and Learn" throughout the county and New York</li> <li>• Facilitated ongoing monthly networking opportunities for Monroe County community's initiatives</li> <li>• Continued to provide ongoing support and technical assistance to local initiatives</li> <li>• The 8<sup>th</sup> Family Celebration of Assets was held on 10/6/07 at the Seneca Park Zoo and 270 individual Community Asset Builders and 34 community groups were recognized. 501 individuals attended this event</li> </ul>			

- Search Institute held their national conference in Rochester. 2000 were in attendance. The local CAPN led 16 workshops, 11 local youth exceeded the event, CAPN members were involved in the program committee, development of all scripts and fund development. Over 100 individuals received scholarship to the conference as a result of our fundraising and sponsorship.
- Supported continuation of ACT for Youth local community grant.
- Youth Asset event planned and implemented 5/6/08. Youth from Monroe County participated in a youth asset leadership “FUN” event at Total Sports Experience. 175 individuals in attendance

**Strategies completed October 15, 2008 - December 15, 2009:**

- Continued community wide asset building media campaign through positive youth development is being developed using social marketing strategies to influence positive community involvement in the lives of children and youth to build assets and increase asset building behaviors of community residents
- Continued to provide asset building recognition opportunities for individuals, groups, and communities to nurture and support they efforts
- Ongoing distribution of Healthy Communities/Healthy Youth, strength-based, positive youth development, research and updates of “Link and Learn” throughout the county and New York
- Facilitated ongoing monthly networking opportunities for Monroe County community’s initiatives
- Continued to provide ongoing support and technical assistance to local initiatives
- The 10<sup>th</sup> Family Celebration of Assets was held on 10/3/09 at the Seneca Park Zoo and 270 individual Community Asset Builders and 34 community groups were recognized. 300 individuals attended this event
- Supported continuation of ACT for Youth local community grant through June 2009.
- Youth/Adult Community Asset event planned and implemented January 14, 2009. 175 individuals in attendance

**Strategies to complete December 15, 2009 - December 31, 2010:**

- Continue to increase partnerships to incorporate asset building language throughout the community; e.g. Monroe County Department of Human Services Early Childhood efforts, after school efforts, libraries, PAC-TAC teams, and the business community
- Explore asset based community development (ABCD) approach to increase natural supports for youth and families
- Family Celebration of Assets scheduled for 10/2010
- Presentation of Community Asset Partner Network/Monroe County Asset Initiative at the 2010 National Search Conference
- Continue to implement Asset Ambassadors from a variety of communities
- Create an Asset calendar to reflect and promote the CAPN mission, partnership and leadership with asset ambassadors and CAPN members.

Contact(s): Bob Zinck, Director, RMCYB; Joan Bickweat, R/HYC, RMCYB; Chris Dandino, RMCYB

**Strategy to achieve desired outcome:**

Increase the number of Youth Development Organizations with “like programs” sharing a common core of youth development outcomes and measurement tools.

PRIORITY FOCUS AREA ADDRESSED: Community Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: N/A	ADULT PROTECTIVE GOAL ADDRESSED: N/A
--	-------------------------------------	---	---

Lead Partnerships:

MCDHS, Rochester Monroe County Youth Bureau, United Way of Greater Rochester, Youth Services Quality Council, Children’s Institute, University of Rochester

**Strategies Completed as of October 14, 2008:**

- RMCYB continues to participate in the Steering Committee of the local pilot of the Youth Program Quality Assessment (YPQA) Tool developed by High Scope introduced by OCFS. Year 2 of local pilot administered through the Children’s Institute used with 45 after-school programs grades 4-6.

**Strategies Completed October 15, 2008 - December 15, 2009:**

- RMCYB continues to participate in the Steering Committee of the local pilot of the Youth Program Quality Assessment (YPQA) Tool developed by High Scope introduced by OCFS. Year 3 of local pilot administered through the Children’s Institute was used with 45 after-school programs grades 4-9..
- Explore/consult with University of Rochester Dr. Sherri Lauver and Children’s Institute Dr. Dirk Hightower on thriving indicators, tools for measurement, and research data that supports use of social-emotional indicators – report completed.

**Strategies to complete December 15, 2009 - December 31, 2010:**

- Continue to participate in YPQA steering team and analyze local results and implications for program improvements for Year 3 of the pilot.
- Explore with David Weikart Center for Program Quality a train the trainer Youth Works Methods series in Rochester to develop a cadre of trainers to provide training and support in implementing the 8 features of quality youth development programming.
- Assess and improve Youth Bureau’s monitoring system in partnership with community funders to focus on the 8 features of quality youth development programming.

Contact(s): Chris Dandino, Coordinator of Youth Projects, RMCYB; YSQC Executive Committee, Elizabeth Ramsey, United Way of Greater Rochester; Dr. John Klein, Strong Adolescent Medicine; Dirk Hightower, Children’s Institute; Dr. Sherri Lauver, University of Rochester

**Strategy to achieve desired outcome:**  
 Increase the number of research based effective models, strategies, or services implemented by youth development contract agencies and building the larger youth service system capacity

PRIORITY FOCUS AREA ADDRESSED: Community Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: N/A	ADULT PROTECTIVE GOAL ADDRESSED: N/A
---	-------------------------------------	--	--------------------------------------

Lead Partnerships:  
 RMCYB, MCDHS, MCDPH, University of Rochester, United Way of Greater Rochester, Rochester City School District

**Strategies Completed as of October 14, 2008:**

- Continued to monitor implementation of Bry Achievement Mentoring Model with three community based agencies and the Rochester City School District including fidelity to model, data collection, and results
- Provided full day seminar on Social and Emotional Learning (SEL) and presented evidence/research based programs that support SEL
- Enhanced RMCYB website with a “Linking Research to Practice” section including links to other sites that can be helpful
- City of Rochester, Bureau of Youth Services, provided support for parenting trainers in implementation of Effective Black Parenting curriculum

**Strategies completed October 15, 2008 - December 15, 2009:**

- Monitored implementation of Bry Achievement Mentoring Model with three community based agencies and the Rochester City School District including fidelity to model, data collection, and results.
- Continued to assess and support with youth and family serving agencies and schools, the possibility of implementing more research based programs and evidence based practice through the United Way Blueprint for Change process and selection of programs to implement
- Participated in the local United Way’s effort to develop Theories of Change that guide investments and influence impact in youth development initiatives and services.

**Strategies to complete December 15, 2009 - December 31, 2010:**

- Continue to support after school programs interested in pursuing NAA Accreditation
- Continue to monitor implementation of Bry Achievement Mentoring Model with three community based agencies and the Rochester City School District including fidelity to model, data collection, and results and provide TA for utilizing data for continuous improvement.

Contact(s): Chris Dandino, Coordinator of Youth Projects, RMCYB; MCDHS; Jody Todd Manly, Clinical Director, Mt. Hope Family Center; Carolyn Merenda,

Community Foundation; Jackie Campbell, City of Rochester Bureau of Youth Services; Stephanie Fitzgerald, United Way of Greater Rochester

**Strategy to achieve desired outcome:**  
 Children's Center (Secure Detention) will enhance its physical and programmatic design to ensure the safety of youth in care and that is based on recent research and juvenile justice best practices.

PRIORITY FOCUS AREA ADDRESSED: Youth Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: 2	ADULT PROTECTIVE GOAL ADDRESSED: N/A
--	-------------------------------------	---	---

Lead Partnerships:  
 Monroe County's Children's center Administration; Monroe County Sheriff's Department; Monroe County Executive Office; Monroe County Department of Human Services; Presentment Agency; Law Guardian's; Monroe County Office of Probation - Community Corrections; Monroe County Engineering Department; Monroe County Finance Department; Juvenile Justice Council

**Strategies Completed as of October 14, 2008:**

- Children's Center has formulated a scaled down renovation plan that will maintain the structure in anticipation of the construction of a new facility. The revised renovation plan addresses specific security and safety concerns including the addition of camera, suicide restraint bunks, and a secure "sallyport". The plan replaces staff radios, sleeping room doors and certain kitchen equipment. Also included are the repair of certain flooring and the painting of the sleeping rooms.
- OCFS has approved the County moving forward to secure consultants for the planning of a new facility.
- County has secured consultants to work on the design for a new facility
- The Juvenile Justice Initiative program components (workforce development, Tutoring, Arts Program) were implement in 2006 and ran through 2008. Program components met with varying degrees of success. The essential functions of each of the grant's components will continue within the facility to varying degree.

**Strategies Completed October 15, 2008 – December 15, 2009:**

- Work on the renovation of the current facility as described above is substantially complete, excluding the Sallyport and some flooring issues.
- Consultants have begun the process of looking at sites for the proposed facility and completing a fiscal assessment of renovation of the existing facility versus new construction. (Target completion 04/10)
- A very preliminary design by the consultant architect is in process and meetings have occurred to determine essential design elements. (Target completion: 04/10)
- Initial sites have been identified for review. (Completed 11/09)
- The facility has undertaken the design of a literacy program to address the deficits of many of the children presented for care. Elements such as a Literacy Council, a community collaboration designed to develop the strategies to be implemented are in the process of being created.
- Facility staff have attended training in restorative practices (Circle Training) with the plan that these strategies will be use with children and families to decrease aggression and address recidivism.
- A consult has been secured to assist the facility in the development and application of program elements that are consistent with current best practices in the field.

**Strategies to complete December 15, 2009 - December 31, 2010:**

- Sallyport and remaining items to be completed. (05/10)
- Consultant/Architect to complete preliminary design for submission to OCFS. (target 06/10)
- Funding for full design to be secured. (target 09/10)
- Literacy Council will be developed and implemented to increase reading levels of resident children.
- Reading pre-post tests to be implemented for all children remaining in program for the designated amount of time.

Contact(s): Mike Marinan, Director, Monroe County Children's Center			
<b>Strategy to achieve desired outcome:</b> Stabilize funding of and responsibility for the provision of the education program/services within the Children's Center.			
PRIORITY FOCUS AREA ADDRESSED: Youth Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: 2	ADULT PROTECTIVE GOAL ADDRESSED: N/A
Lead Partnerships: Monroe County's Children's center Administration; Monroe County Executive Office; Monroe County Department of Human Services; Monroe County Finance Department; Monroe County school Boards Association; RCSD; OCFS Regional Office			
<b>Strategies Completed as of October 14, 2008:</b>			
<ul style="list-style-type: none"> <li>The Children's Center has collaborated with RCSD, and other local educational resource providers to significantly enhance the education program at the facility.</li> <li>Added additional staffing resources to support the education programs/services have been added: developed the concept for and filled an Education Coordinator position; added a half time special education teacher and provide support teachers in the classrooms through contract with the Encompass Program.</li> <li>Encompass program is identifying and tracking individual youth's achievement, completing assessments and provided remediation assistance as needed.</li> <li>Mental Health Screens are being completed on all youth entering the facility to identify/determine if there are undiagnosed issues contributing to educational concerns/challenges. This information is shared with the Education Coordinator to assist in tailoring the educational program and support services for the individual youth</li> </ul>			
<b>Strategies completed October 15, 2008 - December 15, 2009:</b>			
<ul style="list-style-type: none"> <li>Resources were added to the Education Program including two (2) Teacher Assistants, and one (1) School Social Worker. Teacher Assistants replaced Encompass staff. The Special Education Teacher's allocated time was increased, and all IEP's are now available to teaching staff.</li> <li>RCSD Teachers now have correct certification in the area that they teach.</li> <li>Smart Board technology was added to all core subject classrooms. Computer lab was upgraded with new equipment.</li> <li>The collaborative effort with the RCSD has been strengthened considerably and the Supervisor of RCSD staff attends weekly Education/Program staff meetings to offer suggestions, feedback</li> </ul>			
<b>Strategies to complete December 15, 2009 – December 31, 2010:</b>			
<ul style="list-style-type: none"> <li>Work with OCFS and SED in response to recently voiced intentions to play a larger role in the oversight of educational services in detention facilities.</li> <li>Supervisor of RCSD staff will continue to attend weekly Education/Program staff meetings to offer suggestions and feedback</li> <li>Work with education staff to ensure designs/proposal for new facility has sufficient education space and correct configuration.</li> </ul>			
Contact(s): Mike Marinan, Director, Monroe County Children's Center			
<b>Strategy to achieve desired outcome:</b> Implement a Transition Manager program at the Monroe County Detention Center to focus on youth likely to recidivate or move on to OCFS placement and increase intra and interdepartmental coordination to support high risk youth in Detention.			
PRIORITY FOCUS AREA ADDRESSED: Youth Development, Family Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: 4	ADULT PROTECTIVE GOAL ADDRESSED: N/A
Lead Partnerships:			

Monroe County Department of Human Services, Monroe County Office of Probation/Community Corrections, CCSI, Inc., MCDHS-Office of Mental Health, Juvenile Justice Council, NYS OCFS
<b>Strategies Completed as of October 14, 2008:</b> <ul style="list-style-type: none"> <li>• Worked with Monroe County Department of Human Services - Office of Mental Health to secure funds for the Transition Case Manager position.</li> <li>• The Transition Case Manager position is a position hired through a local mental health provider. It is not required that youth have mental health diagnosis/concerns although those with mental health issues are given a higher priority.</li> <li>• Transition Case Manager was hired as of 1/1/08 to increase the rate of successful community reintegration for children discharged from the facility. Caseload for the Transition Case manger is 7 youth at any time</li> </ul>
<b>Strategies completed October 15, 2008 - December 2009:</b> <ul style="list-style-type: none"> <li>• Initial Transition Caseworker left position, new worker located and trained.</li> <li>• Report completed looking at the impact the Transition Manager position has made to youth's reintegration.</li> <li>• Facility cooperates with RCSD Transition program in addition to facility Caseworker. This allows for the inclusion of other children excluded by caseload maximum.</li> <li>• Facility Director participating in Safe Schools / Healthy Students Youth in Transition Initiative.</li> </ul>
<b>Strategies to complete December 15, 2009 – December 31, 2010:</b> <ul style="list-style-type: none"> <li>• Continue to monitor program effectiveness.</li> <li>• Continue participation in RCSD initiative.</li> <li>• Continue participation in Safe Schools /Healthy Students initiative.</li> <li>• Discuss with DHS Administration recommendations resulting from Safe Schools/Health Student Initiative that focus on Children's Center operations and staffing.</li> </ul>
Contact(s): Mike Marinan, Director, Children's Center

**Outcome 6: DHS operates at a maximum level of fiscal responsibility**

<b>Strategy to achieve desired outcome:</b> In cooperation with the county Purchasing Office implement a new performance measurement initiative for all contracts (5 year timeline).			
PRIORITY FOCUS AREA ADDRESSED: Community Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: N/A	ADULT PROTECTIVE GOAL ADDRESSED: N/A
Lead Partnerships: MCDHS, Monroe County Purchasing			
<b>Strategies Completed as of October 14, 2008:</b> <ul style="list-style-type: none"> <li>• Completed implementation of Contrak HQ, which is now used with 20% of all contracts</li> <li>• Dept. of Finance created new contract compliance office</li> <li>• Getting to Outcomes (GTO) implemented within Preventive Services 2008 contracts and training was completed with all preventive service partners</li> <li>• Preventive Services contracts and 2008 annual application outline were modified to reflect GTO steps</li> <li>• DHS departments and units began training in new Contrak HQ system</li> <li>• Vendors chosen for pilot of Contrak HQ trained in online system</li> <li>• Youth Bureau staff attended GTO workshops</li> </ul>			
<b>Strategies completed October 15, 2008- December 15, 2009:</b>			

- All appropriate DHS staff have been trained in Contrack HQ. Additional technical assistance has been provided as needed.
- Identified implementation issues with the Purchasing Dept. and made improvements [i.e. revised dashboard; more efficient routing/approval process by removing non-value added steps once staff became more comfortable with the system; revised data sheet for SCPO number and date to be entered for internal compliant monitoring; and added additional search capabilities].
- Trained 109 staff, representing 51 human service contractors, in on-line Contrack HQ use.
- 89% of vendor contracts with DHS are now in Contrack HQ system.
- Worked jointly with vendors and purchasing to ensure realistic, measurable, and appropriate performance outcomes and aligned performance reporting process between vendors, Purchasing and DHS Departments. GTO program narrative format and measures for preventive services revised to better align with State GTO model.

**Strategies to complete December 15, 2009 - December 31, 2010:**

- Continue to train DHS and vendor staff and/or provide technical assistance, as appropriate, in Contrack HQ.
- Work with Purchasing and system designer to add more enhancements to the system, as budget allows. Wish list includes:
  - Ability to copy Financial/Program Request information from one contract to another for efficiency and consistency sake.
  - Email reminders to vendors that do not respond to system request [i.e. approve or decline contract, report performance measures, update insurance certificate, etc.] every 10 business days.
- Continue to train vendors that are still not on system, especially out-of-county vendors.
- Continue to implement vendor contracts in the Contrack HQ system, as system training is accomplished.
- Continue to review and improve performance outcomes and measures.
- Develop outcomes and measures for residential and therapeutic foster care providers.

Contact(s): Robert Franklin, Deputy Commissioner, MCDHS; Marc J. Natale, Director of Administrative Services, MCDHS; Cindy Lewis, MCDHS Child and Family Services; Chris Dandino, Rochester-Monroe County Youth Bureau; Kim Deluca, Mon. Co. Contracts Office; Meagan Brennan, Mon Co. Purchasing Department

**Outcome 7: Employees of the Department will experience a high degree of satisfaction**

**Strategy to achieve desired outcome:**

Identify maximum effective caseloads, utilizing mandated state standards and work management studies and develop strategies to come in line with maximum numbers.

PRIORITY FOCUS AREA ADDRESSED: Youth Development; Family Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: N/A	ADULT PROTECTIVE GOAL ADDRESSED: N/A
---	-------------------------------------	---	---

Lead Partnerships:  
MCDHS; OCFS Monroe Regional Office

**Strategies Completed as of October 14, 2008:**

- Participated in the New York State Workload Measurement Study in 2006 which recommended that NYS reduce its caseloads for CPS, Foster Care, and Preventive Case Planning services.

- Completed an assessment of existing caseloads in Monroe County, an analysis of work that was not getting done, and a fiscal analysis of the impact reduced workloads would have on the quality of casework practice and savings that could be achieved.
- Proposed and received approval for a comprehensive plan, called Project Save, which involved the hiring of additional caseworkers, senior caseworkers, supervisors, and support staff to 1) reduce caseloads to the targeted level, 2) deepen the quality of casework practice, 3) increase safety for children in the community, and 4) achieve savings resulting from decreasing the length of stay in foster care placements.
- Began implementing Project Save through the hiring and training of new caseworkers and the promotion of new senior caseworkers and supervisors for the new teams.

**Strategies completed October 15, 2008- December 15, 2009:**

- Implemented a comprehensive plan, called Project Save, which involved the hiring of additional caseworkers, senior caseworkers, supervisors and support staff to (1) reduce caseloads to the targeted level, (2) deepen the quality of casework practice, (3) increase safety for children in the community, and (4) achieve savings resulting from decreasing the LOS in foster care placements
- Caseloads in CPS Management were decreased to 7 families per worker, and caseloads in CPS Investigation were decreased to an average of 17 active cases per worker.

**Strategies to complete December 15, 2009 – December 31, 2010:**

- Develop a strategy to continue standardized, quality preparation of new caseworkers using the Training Team while keeping vacant positions to a minimum.
- Continue to improve involvement in Benchmarking for Success, which is a comprehensive effort to assess caseload size, numerous other qualitative measures of our progress, and qualitative assessment of improvements in our practice on a monthly basis going forward.

Contact(s): Cindy Lewis, Director of Child & Family Services, DHS; Sue McLean, Tom Corbett, Sue Johnson, Linda Oinen, Marcia Young, Wendy Bolton & Ken Maurice – DHS Administrators.

**Strategy to achieve desired outcome:**

Review data obtained through employee satisfaction surveys to identify opportunities to improve employee satisfaction.

PRIORITY FOCUS AREA ADDRESSED: N/A	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: N/A	ADULT PROTECTIVE GOAL ADDRESSED: N/A
---------------------------------------	-------------------------------------	--	--------------------------------------

Lead Partnerships: MCDHS

- **Strategies Completed as of October 14, 2008:**
- Distributed an employee satisfaction survey. Results of the survey have been reviewed by Administration.
- Hold a monthly meeting open to staff from Financial Care Path and Child and Family Services to discuss common issues, new initiatives within divisions, etc. The intent of the meetings is to increase communication and knowledge between the staff in the two divisions.
- Support Staff Development Days expansion to be agency wide.
- Revitalization of the Safety and Security Committee
- Provided forums for staff to talk with the Commissioner and Administration
- Commissioner's Office distributes e-mail Safety Alerts/Information to all staff
- Established an on-line DHS Forum for staff. The site offers Announcements, Suggestions and a Q & A for Policies and Procedures.

**Strategies completed October 15, 2008- December 15, 2009:**

- Expanded Staff Development Days to twice a year and significantly expanded offerings during the Staff Development Days
- Continue to provide opportunities for staff to speak directly with the Commissioner and Administration thru the *Open Forum*
- Utilized Survey Monkey to get staff feedback on the value of the Open Forum conversations with Administration and suggestions for other opportunities to converse with Administration

<ul style="list-style-type: none"> <li>Expanded staff development opportunities and trainings offered</li> <li>Developed a Staff Development web Site that staff can access information on upcoming DHS training, county training as well as training opportunities in the community at large. Information/materials from trainings are also posted so staff unable to attend the training can still gets the information in a timely fashion.</li> <li>Expanded Safety &amp; Security committee membership and responsibilities. Developed a sub-committee model to afford other staff an opportunity to become involved in safety and security issues.</li> <li>Put PNG list on line in response to requests form staff for easier access to this information.</li> <li>Fall of 2009 held a Caseworker Appreciation event with the County Executive and all casework staff</li> <li>Hold an Annual Recognition Ceremony for 5, 10, 20 and 25 years of service</li> <li>Implemented a Q &amp; A called DHS Junction</li> </ul>
<p><b>Strategies to complete December 15, 2009 - December 31, 2010:</b></p> <ul style="list-style-type: none"> <li>Continue initiatives as noted above</li> <li>Develop a department wide newsletter</li> <li>Hold an Annual Meeting with DHS Administrators and the County Executive and her staff to discuss issues of concern and future initiatives</li> </ul>
<p>Contact(s): Kelly Reed, Commissioner; Bob Franklin, Deputy Commissioner; Marc Natale, Director, Administrative Services; Cindy Lewis, Director, Child &amp; Family Services Division</p>

**Outcome 8: Customers of the Department will experience a high degree of satisfaction**

<p><b>Strategy to achieve desired outcome:</b>                  Establish a Customer Service Hotline to address client concerns effectively and efficiently. Track all client complaints and compliments in a database with regular review by administration and managers.</p>			
PRIORITY FOCUS AREA ADDRESSED: Community Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: N/A	ADULT PROTECTIVE GOAL ADDRESSED: N/A
Lead Partnerships: MCDHS			
<p><b>Strategies Completed as of October 14, 2008:</b></p> <ul style="list-style-type: none"> <li>Customer service hotline and database were established.</li> <li>Training to staff assigned to hotline re responding to customers concerns/issues</li> <li>Developed data base to track hotline calls and complaints and their resolution</li> </ul>			
<p><b>Strategies completed October 15, 2008 - December 15, 2009:</b></p> <ul style="list-style-type: none"> <li>Created new Service and Issue Resolution (SIR) database with input from cross functional team that brings about major improvements in efficiency and response to issues such as integration with WMS, Worker dashboard, Supervisor Dashboard, and direct email notification of issue pending with link to database embedded. The average response time from client call in to Customer Service to Worker resolution of the issue was less than one day (.987) in November 2009.</li> <li>SIR database has back end, ad hoc reporting capability that is utilized to isolate recurrent themes/issues and bring about resolution.</li> <li>“Find Your Worker” phone solution implemented 4<sup>th</sup> QTR 2009. This is a front end phone application to the customer Service hotline that allows clients to utilize the phone number key pad to key in their identifying information and be connected directly to their associated Worker. This type of request accounted for 32% of all calls into Customer service.</li> </ul>			

- Customer Service training initiated by Staff Development starting 4<sup>th</sup> QTR 2009 and will be a regular future delivery for all DHS staff.

**Strategies to complete December 15, 2009 - December 31, 2010:**

- A front end phone solution will be created and added to the Customer Service line that will automate the application request process for members of the public. Basically, the caller will speak their name, which the solution will translate into text and print out a label to be affixed onto an envelope stuffed with the appropriate application to be mailed. For certain parts of the agency, this accounts for 40% of the calls.
- Continue to Enhance SIR database
- Continue to analyze reports pulled from the SIR database
- Continuation of Customer Service training delivery by Staff Development

Contact(s): Marc J. Natale, Director of Administrative Services, MCDHS

**Strategy to achieve desired outcome:**  
 Increase knowledge of human service providers on appropriate research based/evidence based programming and transition to more effective programs; increase skills of supervisory staff when integrating effective practice; increase competency and skills of those who work with youth and families to lay a foundation for strength based, youth development, and family centered approaches; increase capacity to integrate youth development approaches throughout appropriate organizations

PRIORITY FOCUS AREA ADDRESSED: Community Development, Family Development, Youth Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: N/A	ADULT PROTECTIVE GOAL ADDRESSED: N/A
---	-------------------------------------	---	---

Lead Partnerships:  
 RMCYB, MCDHS, Rochester Area Community Foundation, Youth Service Quality Council, Capacity Building Project (Best Practice Partnership)

**Strategies Completed as of October 14, 2008:**

- Continued to explore strategies/formats to introduce and share information on evidence based/research based programs shown to be effective in reducing risk and increasing assets/protective factors as well as latest research on youth development practice from the National Research Council
- Continued to offer Capacity Building Training in Advancing Youth Development, Youth Development Group Work, and Interactive Approach to Supervision
- Developed curriculum to the Capacity Building Series that focuses on gender issues for consideration in youth programming
- Provided Asset Mapping Training to youth in Sector 8 through the state-federal positive youth development grant
- Provided training to WIA youth service vendors in the development of Youth Employment Portfolios and Youth Development principles and practices

**Strategies completed October 15, 2008 - December 15, 2009:**

- Explored strategies/formats to introduce and share information on evidence based/research based programs shown to be effective in reducing risk and increasing assets/protective factors as well as latest research on youth development practice from the National Research Council
- Continued to offer Capacity Building Training in Advancing Youth Development, Youth Development Group Work, and Interactive Approach to Supervision and Service Learning
- Developed curriculum to the Capacity Building Series that focuses on gender issues for consideration in youth programming
- Provided Asset Mapping Training to youth in Sector 8 through the state-federal positive youth development grant
- Introduced Rochester Asset Mapping Project – RCAMP community-wide.

**Strategies to complete December 15, 2009 - December 31, 2010:**

- Explore additional methods for institutionalizing and integrating a youth development framework and effective learning environments for YD as identified by National Research Council, Institute for Medicine
- Continue to provide RCAMP training to the county-wide asset data base.

- Continue professional development series through Capacity Building/Best Practices Project
- Continue to promote and build Youth As Resources to model youth voice and youth philanthropy as a means to encourage active youth leadership in program planning, implementation, and evaluation a key component of YD.
- Pilot Youth Worker Series

Contact(s): Jutta Dottervich, ACT Center for Excellence; Stephanie Fitzgerald, United Way; Jane Amstey, RIT; Dr. Marie Watkins, Associate Professor, Nazareth College; Shirley Sharp, Professor, Nazareth College; Garth Freeman, YAR Coordinator, RMCYB; Rod Jones, Community Place of Greater Rochester-Sector 8 Initiative; John Premo, Youth Workforce Services Coordinator, RochesterWorks!

**Strategy to achieve desired outcome:**  
 Increase quality and effectiveness of collaborative efforts in the community where MCDHS is a partner. Increase the coordination of efforts including collaboratives in the community that align with priority focus areas and a common youth development framework.

PRIORITY FOCUS AREA ADDRESSED: Community Development, Family Development, Youth Development	NATIONAL STANDARD ADDRESSED: N/A	TITLE IV-B FEDERAL GOAL ADDRESSED: N/A	ADULT PROTECTIVE GOAL ADDRESSED: N/A
---	-------------------------------------	---	---

Lead Partnerships:  
 RMCYB, MCDHS, United Way of Greater Rochester, Youth Service Quality Council, Rochester City School District, Community Asset Partnership Network, Early Childhood Development Initiative, Council of Agency Executives, Greater Rochester After School Alliance (GRASA), Community-School Partnership Network, RochesterWorks!, Youth Council, NYS Youth Development Team, Association of NYS Youth Bureaus, Juvenile Justice Coordinating Council

- Strategies Completed as of October 14, 2008:**
- After school providers were brought together through GRASA to support submission of 21<sup>st</sup> Century proposal and provide TA
  - Youth providers convened through the YSQC to learn about the culture of poverty, social and emotional learning, and community initiative to address the impacts of youth violence
  - School principals, agency directors, school and agency coordinators of Student and Family Support Centers (SFSCs) developed common best practices for SFSC and visions, missions, values, core operating elements, and protocols via Community-School Partnership Network (CSPN)
  - Participated in annual ANYSYBs Youth Forum in Albany to introduce youth to policy areas relating to youth and opportunities to meet with elected officials to share their ideas to ensure and model youth voice opportunities
  - Participated as reviewer in the LWIB Youth Council allocations process for year round youth employment programs and summer employment programs
  - RMCYB, United Way of Greater Rochester, and the City of Rochester-Bureau of Human Services jointly reviewed applications for OCFS funding for programs funded by each organization
  - Continued to coordinated with UW on monitoring and assessment of jointly funded programs, where UW funds act as a match to RMCYB funds
  - Continued to collaborate with US Dept of HHS, FYSB, and OCFS and Community Place on federal-state-local PYD collaboration grant
  - Met with Tauck Foundation, a private family foundation, to consult on YD needs in the community and their funding interests in the area of YD; Tauck issued an RFP in the Rochester Community to support YD

- Strategies completed October 15, 2008 – December 15, 2009:**
- After school providers were brought together through GRASA to support submission of 21<sup>st</sup> Century proposal and provide TA
  - Youth providers convened through the YSQC to learn about the culture of poverty, social and emotional learning, and community initiative to address the impacts of youth violence, culture of poverty, and collaborative problem solving in mental health.
  - Participated in annual ANYSYBs Youth Forum in Albany to introduce youth to policy areas relating to youth and opportunities to meet with elected officials to share their ideas to ensure and model youth voice opportunities

- Participated as reviewer in the LWIB Youth Council allocations process for year round youth employment programs and summer employment programs
- RMCYB assisted United Way of Greater Rochester by jointly reviewed applications for United Way funding for programs funded by each organization
- Continued to coordinated with UW on monitoring and assessment of jointly funded programs, where UW funds act as a match to RMCYB funds
- Shared with Grant Maker Forum Members, YB asset building initiative with communities.

**Strategies to complete December 15, 2009 - December 31, 2010:**

- Attend relevant meetings, youth services councils and coalitions
- Participate actively in the LWIB youth council and share learnings and resources developed through joint OCFS-DOL partnership for youth grant that will be implemented
- Participate in annual ANYSYBs Youth Forum in Albany to introduce youth to policy areas relating to youth and opportunities to meet with elected officials to share their ideas to ensure and model youth voice opportunities
- Continue to participate in GRASA
- Participate in UW Student Readiness and Success Investment Team and coordinate monitoring and assessment of jointly funded programs where the funds act as a match to RMCYB funds
- Continue to participate in the Community-School Partnership Network
- Continue to collaborate with US Dept of HHS, FYSB, and OCFS and Community Place on federal-state-local PYD collaboration grant
- Continue to explore opportunities with private funders and community to support/enhance YD efforts in the community
- Continue to support Federal Safe Schools Healthy Students partnership grant with RCSD, Mon Co OMH, Probation and Rochester Police Department

Contact(s): Bob Zinck, Executive Director, RMCYB; Chris Dandino, RMCYB; Joan Bickweat, RMCYB; Kathy Rivera, RMCYB; Mike Dedee, Special Children Services Team Leader

## APPENDIX G

### CFSR Local Self-Assessment of Strengths and Needs 2009-2011 Monroe County

#### Section I. General Information

Local District Contact Name: Cindy Lewis, LMSW, ACSW

Title: Director of Child and Family Services

Address: 111 Westfall Rd., Rochester, NY 14620

Phone Number: 585-753-6431

Email Address: Cindy.Lewis@dfa.state.ny.us

---

#### Section II. Provide a summary of the input from the stakeholders who participated in the Local Self -Assessment process.

Due to the relatively short period of time available between receipt of the local data package and the due date for the local self-assessment, focus groups were scheduled with as many stakeholders as time would permit. Several rich discussions of the local data occurred nonetheless, resulting in a number of helpful questions being raised, which will be useful to pursue going forward, as well as some suggestions for solutions. Input centered most often on how to reduce the number of families who experience multiple indicated CPS reports in Monroe County, how to increase the number of children discharged from foster care within 2 years or less, and how to reduce the number of re-entries to foster care. Overall, most people had very positive comments to make about the impact of the recent increase in DHS staff/decrease in caseloads. Many expressed concern about whether the Risk Assessment Profile is being used to drive decision-making about where and at what intensity to target services. Some of the questions raised pointed to the need to devote staff resources to doing a retrospective case analysis to better discern the meaning of some of the most pertinent data around recurrence of maltreatment.

---

#### Section III – Review and Analysis of Data and Stakeholder Input:

Analyze and interpret your district's performance on safety, permanency and well being. Sources for your analysis include the Child Welfare Practice Improvement Data Guide locally developed data, and input you received from your stakeholders. Describe what factors or underlying conditions have contributed to your district's performance in safety, permanency and well being, highlighting both strengths and areas needing improvement.

##### Safety

#### **Outcome 1a - Safety – Children who have been abused or maltreated will be protected from future abuse and maltreatment**

##### **Key Outcome Measure**

##### **Rate of Recurrence of Abuse and Maltreatment:**

Monroe County's recurrence rate as of March 31, 2008 was 8.5% while the rate for the rest of the state was 12.8%. This means that 8.5% of the children who were victims of an indicated report registered between 4/1/07 and 9/30/08 were re-victimized in the six months following that report. This is an improvement from the first half of 2004, when our recurrence rate was 14.2% (compared to 16% ROS). The ability to consolidate open investigations has, no doubt, contributed somewhat to our decrease in

the rate of recurrence. While our family recurrence rate is in the lower one-third in NYS in all 4 areas, the federal measure for child recurrence is 5.4% or less, so our 8.5% still leaves us with work to do in this area.

**Focus areas include: Workload Management/Organizational Capacity; Safety/Risk Assessment; Family Engagement and Cultural Competency; Service Array/Availability and Other local areas:**

**Factors Affecting Performance: (from the list of focus areas noted above and from input from your stakeholders summarize those factors with the most impact (both strengths and needs) affecting Safety Outcome 1A:**

Workload Management/Organizational Capacity:

In 2008, Monroe County DHS was able to add a total of nine new child protective teams, each including a supervisor, senior caseworker, and six caseworkers. Four of the teams are CPS Investigation, four are CPS Management, and the 9<sup>th</sup> is a Child Protective Training Team. This allowed us to decrease caseloads, although it took the rest of 2008 to get existing active caseloads in CPS Investigation – which averaged 27 cases/worker with some as high as 70-80 cases – down to close to our target of 12 active cases. We had reached an average of 13.8 cases/worker by January of 2009, but that number has risen again to almost 20 due to 1) the continued increase in new reports coming in, and 2) the loss of a number of caseworkers who have either not passed probation or have had other significant performance issues after passing probation. In addition, we have employed 3 retired CPS senior caseworkers on a per diem basis to focus on assisting those CPSI workers with the highest caseloads in completing overdue investigations and learning organizational strategies to keep their caseloads down thereafter.

Safety/Risk Assessment:

There has been a continuous decline in the rate of indication here from 30.1% in 2001 to 24.7% in 2007. The likelihood is that increasing caseloads through 2007 contributed to this decrease, in that caseworkers averaging up to 11 new investigations assigned per worker per month were overwhelmed and unable to give proper attention to the thoroughness of their investigative work. In addition, the intake “funnel” from the NYS SCR has widened; for example, we were recently notified that the SCR would begin registering reports alleging excessive corporal punishment whenever it was alleged that an instrument was used, even though there was no allegation that a child had been harmed by the use of corporal punishment.

The percentage of new reports originating from mandated sources was lower in Monroe than the ROS in 2008 (54.8% vs. 68.2% ROS), which may be a reflection of our having a local CPS Hotline, which takes 50% of the reports in Monroe County. We developed and maintain a website called Do Right By Kids, which is a reference guide that helps educate mandated reporters about appropriate CPS reporting. Conversely, the Medical Director of our foster care pediatric practice notes that she hears a lot of frustration from pediatricians about the lack of feedback to them allowed by law about the results of reports they have made; only being told if the report was indicated or unfounded leaves them not knowing why the decision was made, and having to “continue to work with the family in a relative vacuum of information with ongoing concerns about child safety”. If mandated reporters were able to learn from the outcomes of reports registered by them it might increase the quality of reports going forward and help them better support the families they serve. This, unfortunately, would require a change in state law.

Overdue investigation determinations in Monroe County have consistently decreased, from 55% in November of 2007 to 28% as of 12/31/08. Overdue 7-day safety assessments have also decreased, with 90% being completed on time by the end of 2008 compared with 46% in March of 2007.

Of particular concern for us is the fact that more than 50% of the families involved in an indicated CPS report in both 2005 and 2007 had been previously involved in an indicated report, with 12.9% of those in

2007 having been involved in 5 or more previous indicated reports. While this data is consistent with the rest of the state, it raises a number of critical questions:

- How are families with no repeat reports different from families with multiple repeat reports?
- Are subsequent reports in a family for the same issue(s)?
- Are the most intensive interventions being targeted to families with multiple indicated reports? Or, alternatively, does the greatest benefit come from targeting services to families who are most receptive to using them, and thus least likely to have a second report?
- Is data from the Risk Assessment Profiles predictive of repeat reports?
- 

Between 2005 and 2007 there was a significant increase in low risk assessment scores (from 41.6% up to 71.6%) and a decrease in high or very high risk assessment scores (from 19.3% down to 6%) in Monroe County. The most current risk assessment definitions are less subjective than before, and comments allowed to support the choice of risk ratings may influence workers toward lower risk ratings.

#### Service Array/Availability:

An interesting conundrum for us is that even though a risk rating may be low, overwhelmed workers tend to refer for services whether the risk is high or not (one person commented that one response to high caseloads is to “get someone else to respond to this family because I can’t”); while this may be seen as a conservative approach, if we give services to some families who may not need them as much are services then available for those who need it most? Both DHS staff and Public Defenders commented that fairly often they want to refer families for services but none are available – especially mental health services. We don’t close cases where children are not safe, but the risk of future maltreatment doesn’t seem to be used effectively; family court judges send children home with high risk ratings if they are deemed safe in the moment.

Also noteworthy is the data regarding families involved in indicated reports that were closed and referred to community services at a higher rate than the ROS in all 3 risk categories. The reason for this is that many, many years ago, in the face of steadily increasing caseloads, a policy decision was made that only indicated cases that rose to the level of a court petition would be referred on to CPS Management teams; those that are not petitioned are indicated and closed, with referrals made to preventive services where appropriate. Since we contract out our preventive services, some families fail to engage with the preventive agency once CPS is no longer involved. In light of the high rate of indicated reports involving families with multiple indications, this policy needs to be re-examined.

#### Family Engagement and Cultural Competency:

We have made intense, sweeping efforts in Monroe County to capitalize on lower caseloads as an opportunity to deepen the quality of our practice, focusing particularly on family engagement. Our efforts in CPS Investigation began with our participation in the pilot of Parent to Parent, along with Ontario County, which involved using parents with previous involvement in the CPS system as mentors to other parents experiencing new CPS involvement. We were hoping to continue this project and be able to collect enough data to determine its effectiveness, but the state discontinued funding the pilot as of the end of June 2009.

High caseloads have no doubt affected our ability to engage meaningfully with families, since engagement takes time and the ability to listen intently to the story of each individual family. This raises the question of whether we have been continuing to do the same thing with families experiencing multiple reports – with the same unsuccessful outcomes.

**Outcome 1b - Safety – Children will be safe from abuse or maltreatment in foster care.**

**Key Outcome Measure**

**Number and percent of children in direct LDSS care with an indicated CPS Report:**

In Monroe County in 2008, 29 CPS reports were investigated that included children placed in DHS certified foster homes. Of the 29 reports, only 1 resulted in an indication; the other 28 were unfounded. This indication rate was substantially lower than the ROS.

**Factors Affecting Performance: (from input from your stakeholders summarize those factors with the most impact (both strengths and needs) affecting Safety Outcome 1b:**

The focus group of DHS foster parents reported that smaller caseloads have definitely made a positive difference. Caseworkers have more time to spend with foster parents and children, foster parents are receiving better information from caseworkers, supervisors have been more responsive to their needs and concerns, and they feel more respected by DHS staff than in the past. Overall they feel a greater sense of partnership with DHS. A stronger, more consistent presence and increased support to foster parents likely contributes to better functioning foster homes.

**Permanency**

**Outcome 2a – To place children in foster care only when other family and community based alternatives are not an option**

**Key Outcome Measures –**

**Rate of First Placement into Foster Care:**

In 2008, adolescents ages 14-17 had the highest first placement rate per 1,000 adolescents in the population, but this was never true in previous years when babies under one year old always had the highest placement rate. The rate of placement of adolescents has not actually increased; it is now just the highest due to the decrease in rate of placement of babies. In fact, the rate of placement of adolescents actually decreased beginning in 2007, due to the beginning of our FACT program in January of 2007 and the resulting decrease in PINS petitions filed and PINS youth placed.

The overall number of first placements into foster care, however, has decreased dramatically since 2001 (574) to 288 in 2008, and discharges exceeded admissions in 2006, 2007, and 2008.

**Focus Areas include: Family Engagement and Cultural Competency; Risk, Needs and Strengths Assessment Process; Service Availability/Accessibility; and Other- local areas:**

**Factors Affecting Performance: (from the list of focus areas noted above and from input from your stakeholders summarize those factors with the most impact (both strengths and needs) affecting Permanency Outcome 2a:**

**Family Engagement and Cultural Competency:**

Monroe County DHS has been working intentionally on decreasing caseloads and increasing effective family engagement, which is a function both of casework skill and time available to spend with families. The decrease in first placements, however, has been influenced by other factors as well – some good, others perhaps not so good. The dramatic decrease in babies being placed into care is likely a factor both of enhanced efforts to locate relatives who can care for babies to avert placement and of our Family Court judges' increased inclination to place with any available relative, whether we agree that it is a

suitable placement or not. In addition, we have experienced an overall decrease in the number of Article 10 petitions filed by us, despite the continuing rise in registered CPS reports. Of concern is the possibility that the huge caseloads in CPS Investigation, until recently, may have compromised workers' ability to do a thorough enough job investigating reports to be able to sustain viable petitions. With caseloads lower now, we'll continue to track the rate of new petition filing and new placements to see if they rise or remain stable.

The success of our FACT program has been demonstrated in dramatically lowered number of PINS petitions filed as well as decreases in the number of PINS placements occurring in 2007 and 2008, and our Youth and Family Partnership program has similarly engaged youth at the doorway of placement and their families in Child & Family Team process in a successful effort to avert the majority of them from having to come into care.

Risk, Needs, and Strengths Assessment Process:

In 2009, our DHS administrative staff again delivered our own intensive child protective services training to all of the CPS caseworkers hired since the last time we offered this, as well as any senior caseworkers and supervisors promoted in the interim. This is mandatory for staff as we have a deep commitment to developing the knowledge and skills of all CPS workers beyond what they are able to learn and absorb in CORE and CPS Response training. Supervisors and senior caseworkers additionally receive training in effective leadership, and in the critical skills necessary to managing the workload of a team in addition to overseeing individual workers' cases.

The assessment of safety is used to inform decision-making about removal, but the risk of future maltreatment may be less directly associated with judges' decisions about placement or staff decisions about referrals for services.

In 2008, we began the process of training our child protective management casework staff in child and family team process, which begins with the strengths, needs, and cultural discovery process with each family. Recognizing that we needed to improve engagement with families on the front end of our work as well, we elected to opt in to a pilot of the Family Assessment Response (FAR) beginning in 2010; we are in the planning phase now. We are hoping that, over time, this results in fewer repeat reports and fewer out of home placements as families are better engaged in participating in identifying and planning for their families' needs up front at the time of the first CPS report.

Service Availability/Accessibility:

Monroe County is fortunate to have two local programs targeted to support kinship caregivers in caring for children of family member when their parents are unable to: SKIP Generations, run by Crestwood Children's Center and the Kinship Care Resource Network, run by Catholic Family Center. We have been challenged internally by our ability to expedite eligibility for Temporary Assistance for relatives who offer themselves as resources, but have been working on developing a seamless and expedited process.

**Outcome 2b - To achieve a timely discharge to a safe, permanent home through reunification, discharge to a relative or adoption**

**Key Outcome Measures**

**Permanent Exits in 2 years for children admitted to care for the first time:**

There has been a continuous increase in the number of children exiting foster care within 2 years since 2003 in Monroe County. In 2003 58% of those who entered care were discharged in two years; for those entering care for the first time in 2006, 69% were discharged within two years. The median length of stay for all ages of children placed for the first time in 2006 was 4.9 months, which was the 5<sup>th</sup> lowest in the state. Of note, however, is that 61% of all children admitted to care in 2006 exited within 12 months while only 44% of those admitted in 2007 exited within 12 months.

**Permanent Exits in 2 years for children in care on the last day of the year:**

From 2002 through 2006, the number of children in care at the end of the year who left care to a permanent exit within the following two years has been relatively stable, between 42% and 50%, with more babies leaving within 2 years than adolescents. In contrast to the cohort of first admissions in 2006 and 2007, the percentage of children in care at the end of the year who exited care within 12 months was similar each year (35% in 2006 and 31% in 2007).

**Re-entry to foster care within one year of discharge:**

The rate of re-entry into foster care within 12 months decreased significantly in 2007 over previous years. 11% of children discharged during 2007 re-entered care within a year, as compared to 17% in 2006. Of note, however, is the fact that only 8% of children discharged via reunification re-entered care, while **24% of those discharged to relatives re-entered care**. Specifically, local data shows us that 40 children came into care from failed relative placements in 2008.

**Focus Areas include: Family Engagement and Cultural Competency; Risk, Needs and Strengths Assessment Process; Service Availability/Accessibility; Court System Partnerships; Permanency Facilitation; and Other local areas:**

**Factors Affecting Performance: (from the list of focus areas noted above and from input from your stakeholders summarize those factors with the most impact (both strengths and needs) affecting Permanency Outcome 2b:**

**Family Engagement and Cultural Competency:**

While we have been improving in our efforts to provide support to foster parents, stakeholders suggest that we could benefit from increasing the interaction between foster parents and biological families, allowing foster parents to function as resources and role models for the children's parents. Community agency stakeholders noted the importance of engaging both the child and the family, and that sometimes services are designed to engage one or the other.

We began training CPS staff in Care Coordination (Child & Family Team process) in 2008 as a way of partnering differently with families to create plans for what it would take for reunification to occur safely and as early as possible, and in a culturally sensitive manner. Being a large county, this is a massive effort that will take time to fully accomplish.

We also recognize that we have not been using visitation for the rich opportunity it affords to help parents understand and meet the developmental needs of their individual children, and to practice the skills they have been learning in parenting education. In early 2009 we engaged the services of the national expert in Visit Coaching to train and coach our staff as well as staff from our voluntary agency partners in this model of supervised visitation. Once again, much is needed in this area due to the size of our staff.

**Risk, Needs, and Strengths Assessment Process:**

Stakeholders suggested that we could do a better job of identifying, at the beginning of each placement, what the goal/expected outcome of the placement is; in other words, what will it take for the child to be able to return home? Public Defenders suggested we look at better individualizing dispositional plans, assuring that everything in the plan relates to an allegation in the petition and not including "generic" service requirements if there hasn't been a concern noted in that area.

**Service Availability/Accessibility:**

Limited community mental health services were noted over and over during the focus groups, causing lengthy delays in beginning mental health treatment. The preventive services we are able to fund are also insufficient to meet the volume of need according to both DHS staff and public defenders. Preventive program openings are e-mailed to staff twice a week by our Preventive Team, and they are

gone within minutes. We are looking at developing a better way to target available services to families who need it most, which is complicated, instead of giving slots to the worker whose referral is received first.

Also currently lacking is the ability to provide intensive, in-home parent coaching tailored to the needs of each individual family. This kind of flexible, targeted, hands-on coaching adapted to the family's particular situation is likely to be more effective than services designed to teach/train more generic skills and approaches.

Through our ACCESS System of Care grant, our staff and our community partners are being trained in the Functional Behavioral Approach, which is based on understanding the effects of stress on the brain and the premise that children do well when they can – as opposed to when they choose to – as another tool to avoid unnecessary placements and shortening those that have occurred.

Court System Partnerships:

While we have been making some headway in opening dialogue with judges, law guardians, public defenders, and other court personnel, delays in permanency are created by multiple, complex court system factors. It is not uncommon for Family Court judges to order discharge to relatives (or non-relatives) where DHS staff have not recommended that relative as an appropriate discharge resource. There seems to be a big push toward placements with relatives, but placing with one who is not capable of caring safely for the child on an ongoing basis becomes just another failure for that child.

Multiple adjournments, delays in completing permanency hearings, judicial calendaring that results in trials taking place in one-hour increments over weeks and months, and suspended judgments all contribute to delaying permanency for children. We are doing a fairly good job of filing TPR's by 15 of 22 months in care when appropriate, but many of them drag on for months after that – and all too often years – before they are resolved.

Permanency Facilitation:

One factor that has been delaying permanency is the length of time between a child being freed and the case being transferred to the Adoption unit, as well as the length of time between transfer and finalization due to high caseloads in the Adoption team. Caseloads have been reduced over the last year with the addition of new staff, and we are in the process of implementing a shift in staffing to allow more caseworkers to do adoption work.

**Outcome 2c - To discharge youth 18 and older with permanent connections to caring adults**

**Focus Areas include: Family Engagement and Cultural Competency; Youth Engagement and Other local areas**

**Factors Affecting Performance: (from the list of focus areas noted above and from input from your stakeholders summarize those factors with the most impact (both strengths and needs) affecting Permanency Outcome 2c:**

There is no data in the CFSR packet to help inform our work in this area, nor do we have aggregate local data regarding how many youth 18 and older had a permanent adult connection at the time of their discharge or how many applied for temporary assistance vs. becoming self-sufficient through employment. We do know that one major factor affecting our success in working with these adolescents is the education system. Our experience has been that it is not uncommon for youth the graduate from high school unable to read or write sufficiently to enable them to succeed in the workforce. Additionally we've found that these young people often repeat the same grades multiple times; it isn't difficult to

understand why a 16 year old repeating the 7<sup>th</sup> or 8<sup>th</sup> grade for the second or third time isn't interested in going to school.

The Adolescent Permanency Review conducted in late 2008 in Monroe County identified the involvement of adult resources for older youth approaching discharge from foster care as an opportunity for improvement. Our Youth Opportunity Unit, which manages the bulk of older youth with APPLA goals, has been working diligently to identify possible adult resources/connections for each youth in care, and we learned that we have to be more intentional in including those resources in all planning meetings in addition to arranging occasional contacts/visits.

We also want to do a better job of formally and comprehensively assessing the life skills of these youth in order to target skill development accordingly.

### **Outcome 2d - To promote well-being for children in foster care**

**Focus Areas include:** Family Engagement and Cultural Competency; Service Availability; and Educational, Behavioral and Mental Health System Indicators:, and local areas

**Factors Affecting Performance:** (from the list of focus areas noted above and from input from your stakeholders summarize those factors with the most impact (both strengths and needs) affecting Permanency Outcome 2d:

We are extremely fortunate in Monroe County to have a nationally renowned medical home for our children in foster family care, called Starlight Pediatrics. We have a close working partnership with Dr. Moira Szilagy and her staff whereby we continually work together to improve the physical, social, and emotional well-being of our foster children. Starlight Pediatrics has developed incredible expertise in understanding the foster care system and the unique challenges these children face. Dr. Szilagy has partnered with us on numerous grant opportunities for such things as mental health screenings at the clinic, integrating primary care and mental health care, a qualitative analysis of mental health screenings for adolescents in foster care, and most recently a CDC grant proposal that would support the location of mental health services in our new Visitation Center when it opens in the fall of 2010. Through Dr. Szilagy's efforts, a developmental pediatrician comes to the clinic to do developmental screenings twice a month, dental screenings have been arranged from time to time through staff of the Eastman Dental Center, and coordination of medical planning in preparation for discharge from care has been vastly improved.

To further enhance well-being, we are in the design phase of our new Visitation Center which will allow us to combine supervised visitation (using the Visit Coaching model) with on-site parenting education, the Starlight Pediatric Clinic, and some mental health services.

Foster home recruitment is a top priority of ours, supported by a contract with a local marketing firm to focus both on recruitment and retention of high quality foster homes. Metrix Marketing works closely with our Homefinding Teams to target recruitment according to our areas of greatest need each year, most recently homes for teenagers and sibling groups. Of the 338 foster homes currently certified by DHS, 47% are black, 43% are white, 4% are Hispanic, and 6% are "other".

---

### **Section IV –Areas Needing Improvement and Identification of Priorities**

Identify those areas of performance in safety, permanency and well being you will address over the next two years. Note: This might be a strength that you will enhance or strengthen in order to continue improving an outcome.

It is clear, both from the feedback of staff and community stakeholders and from the data that our work over the next two years should prioritize 1) further in-depth analysis of the pertinent data at the level of case record reviews, 2) examination of current policies, 3) additional training and 4) practice initiatives which will contribute to continued improvement in two areas:

- Reducing the rate of recurrence of maltreatment, and
- Expediting permanency for children in foster care

More specifically, we will be focusing much of our effort on continuing to improve the skill and ability of staff to engage meaningfully with families from our first contacts with them in CPS investigation all the way through to the permanency work done in CPS management. Our recent work in beginning to implement child and family team process at DHS has validated our belief that families are indeed the experts about their own family, and that we need to provide strong leadership in changing the culture of social work practice – shifting our role from “expert” toward the role of “accountable ally”. Reexamination of the underlying beliefs and values of all staff is central to this culture change, recognizing that formal social work education for decades taught people to do thorough psychosocial assessments in order to define the “presenting problem” and create a plan for the family that would lead to improvement. We have come to understand in recent years that families need to be engaged in identifying their own strengths and needs, and to participate in planning to meet their own identified goals for themselves with our support. Much of our planning over the next several years will be based around strategies that will increase family engagement, as we believe that it will ultimately lead to improvements in outcomes relating to safety, permanency, and well-being.

In some ways, the process of self-assessment has raised more questions than answers, but we see this as a positive step toward making well-informed policy and practice decisions. In order to reduce recurrence and expedite permanency, we plan to address the following areas where improvements are needed:

- Understanding the relationship between Risk Assessment Profile ratings, services offered to families, and subsequent CPS reports;
- Decreasing the number of families experiencing multiple repeat reports, understanding better who these families are and the pattern of allegations and our responses to them;
- Continuing our efforts to decrease overdue safety assessments and investigation conclusions;
- Understanding the relationship between families with histories of indicated and closed reports and those who experience multiple subsequent reports;
- Decreasing the rate of re-entry into foster care of children discharged to relatives;
- Exploring length of stay in foster care as it relates to our recent success in decreasing new placements in care [LOS in Monroe County has increased as lower caseloads in management have allowed workers to expedite the discharge of children most likely to be reunified, leaving the more complex cases in care];
- Increasing our understanding of how best to target available preventive services to have the greatest impact on outcomes;
- Decreasing the number of children who re-enter foster care within 12 months of discharge;
- Achieving a better understanding of how well we have prepared older youth discharged from care (over the last 4-5 years) to be self-sufficient and supported by connections to a caring adult, as a means of informing our practice decisions in this area going forward.

### **Section V: Local Self-Assessment Participants**

List the name, agency and title of those local stakeholders who participated in the Local Self-Assessment process. Use additional pages if necessary. Also list the dates of meetings held with local stakeholders.

Dates of Meetings:

4/30/09: Meeting with local providers of residential foster care services and local providers of preventive services (total of 24 participants)

1. Anne Sherman, Vice President for Day Treatment, Crestwood Children's Center

2. Jed Metzger, Clinical Coordinator, St. Joseph's Villa
3. Alice Berry, Supervisor of MST & FFT, Cayuga Home for children
4. Todd Liddell, Children's Services Specialist, Office of Mental Health, Monroe County DHS
5. Anne Eichas, Director of Family Services, Catholic Family Center
6. Kristie Elias, Preventive Services Supervisor, Catholic Family Center
7. Becky Joseph, Preventive Services Supervisor, Hillside Family Center
8. Lisa Butt, CEO, Society for the Protection and Care of Children
9. Sheree Toth, Executive Director, Mt. Hope Family Center
10. Kathy Leahy, Director of Education, St. Joseph's Villa
11. William Pearson, Director of Residential Services, St. Joseph's Villa
12. Peg Lyman, RRO
13. Chris Bruno, RRO, member of Building Bridges
14. William J. McLaren, Vice President, St. Joseph's Villa
15. Brian Conheady, Residential Program Manager, Crestwood Children's Center
16. Peter Alexson, Recreational Therapist, Crestwood Children's Center
17. Nancy Bleichfeld, Vice President for Residential Services, Crestwood Children's Center
18. Tracy Welch, Assistant Director of Residential, St. Joseph's Villa
19. Eunice Tate Adams, Residential Supervisor, St. Joseph's Villa
20. Clyde Comstock, Chief Operating Officer, Hillside Family of Agencies
21. Mary Alice Schmidt, Director of Emergency Services, Hillside Children's Center
22. Chris Dehon, Ph.D., Psychologist, Hillside Children's Center
23. David Autovino, Acting Director of Residential Services, Hillside Children's Ctr
24. Craig Cypher, Ph.D., Psychologist, Crestwood Children's Center

**5/4/09:** Meeting with Monroe County DHS Administrative Staff:

1. Susan McLean, Administrative Caseworker
2. Tom Corbett, Administrative Caseworker
3. Sue Johnson, Administrative Caseworker
4. Marcia Young, Administrative Caseworker
5. Ken Maurice, Administrative Caseworker
6. Linda Oinen, Administrative Caseworker
7. Wendy Bolton, Administrative Caseworker

**5/5/09:** Meeting with Monroe County DHS Supervisors and Senior Caseworkers (total of 75 participants)

**5/5/09:** Meeting with Monroe County Law Department, Children's Services Unit Attorneys:

1. Carol Eisenman, Esq, Supervising Attorney
2. Dave VanVarick, Esq, Deputy County Attorney
3. Peter Essley, Esq, Supervising Attorney
4. Charlie Baisch, Esq
5. Pat Woerhlen, Esq
6. Lori Ricci, Esq
7. Kerri Machado, Esq
8. Carrie Smith, Esq

**5/7/09:** Meeting with Rochester Regional Office:

1. Peg Lyman
2. Pat Heaman
3. Jackie Benjamin

**5/7/09:** Meeting with Monroe County Family Court Personnel:

1. Ron Pawelczak, County Clerk
2. Mary Aufleger, Court Improvement Project

**5/8/09:** Meeting with Monroe County Public Defenders:

1. Tamara Guglin, Esq, Supervising Attorney
2. Brian Wirley, Esq
3. Adele Fine, Esq
4. Pam Bayer, Esq
5. Celeste Ciaccia, Paralegal
6. Casie Ponticello, Esq
7. Leah Bourne, Esq
8. Seana Sartori, Esq
9. Jonathon Altman, Esq

**5/11/09:** Meeting with Moira Szilagyi, M.D., Ph.D., Medical Director of Starlight Pediatrics

**5/12/09:** Meeting with Monroe County DHS Foster Parents:

1. Shelly Larkin
2. Gloria Torrance
3. Diana Drew
4. Leanne Gallipeau
5. Mary Whiteside
6. Sue Radzio
7. Oscar Nelson
8. Sherene Nelson
9. Elisabeth Vells
10. Elizabeth Lawson
11. Beverly Wooden-Smith
12. Doris Hunter
13. Betty King

:

APPENDIX H

ANNUAL PLAN UPDATE (10/15/08)  
2007-2009 PINS DIVERSION SERVICES PLAN  
and  
MEMORANDUM OF UNDERSTANDING (MOU)  
part of the  
STRATEGIC COMPONENT – 2007-2009 CHILD AND FAMILY SERVICES PLAN UPDATE

I. Update of MOU Requirements Regarding LDSS and Probation Cooperative Procedures

a) Current Designated Lead Agency  Probation  LDSS/DHS

Current Designated Lead Agency reflects a change that was effective on

County intends to change the current designation effective

b) Inventory of PINS Service Options. *Items in **BOLD** are changes*

Service Category	Agency/Organization	Geographic Area Served	Service Gaps (check one)
1. residential respite (required)	<b>Catholic Family Center (PINS respite – family homes)</b>	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Center for Youth Services (R/HY shelter & TEFs)	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Salvation Army (R/HY shelter)	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Melita House (group home)	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Dept of Human Services (shelters & hotels)	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Hillside Children's Center (emergency shelter group beds)	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. crisis intervention – 24 hr/day (required)	FACT Info Line	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	NightWatch (RPD/Probation)	City of Rochester	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	County Night Watch (Mon Co Sheriff/Probation/Greece PD)	county (non City of Rochester)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Rochester Community Mobile Crisis Team (Strong Behavioral Health)	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Lifeline (24 Hotline) (Health Association/Strong)	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	FACIT (Rochester Police Department)	City of Rochester	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Hillside's Service Integration Team (crisis	countywide	<input type="checkbox"/> Yes

		counseling line) (24 Hour)		<input checked="" type="checkbox"/> No
		Metro Teen Help Line (Lifeline)	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		211 Line (24hr Info/Referral Service) (Rochester Police Dept/911 Center)	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3.	diversion services (required)	In-Home Diversion (Hillside Children's Ctr/Crestwood)	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Functional Family Therapy (FFT) Cayuga Home for Children	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Multi-Systemic Therapy (MST) Cayuga Home for Children	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Juvenile Reporting Center (JRC) St. Joseph's Villa/Probation	City of Rochester	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		<b>J-RISC</b> Mon. Co Probation	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		SPOA (ICM & Home Based Waiver) Monroe Co. Office of Mental Health	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Youth Family Partnership (care coordination) MCOMH, Mon Co Probation, MCDHS	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4.	alternatives to detention (required)	<b>VTCC ( Villa Tracking &amp; Curfew Checks)</b> <b>(St. Joseph's Villa)</b>	City of Rochester	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Electronic Monitoring (Mon Co Probation)	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5.	alternative dispute resolution program	PINS/JD Mediation Center for Dispute Settlement	countywide	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

c) PINS Procedures, APU Instructions: Please provide description of any changes that have been made to these procedures since the submission of your current plan. Changes are noted in **BOLD**.

	PINS Diversion Services Protocol	Responsible Agency(ies)	Brief Description of How Provided
1.	Provides an immediate Response to youth and families in crisis (include 24 hour a day response capability)	<input checked="" type="checkbox"/> Probation <input checked="" type="checkbox"/> LDSS <input checked="" type="checkbox"/> Both <input type="checkbox"/> Other <b>FACT</b>	No change since last submission
3.	Determines need for residential respite services and need for alternatives to detention	<input checked="" type="checkbox"/> Probation <input checked="" type="checkbox"/> LDSS <input type="checkbox"/> Both <input checked="" type="checkbox"/> Other <b>FACT</b>	<b>Vendor for respite services was changed in May 2009 to Catholic Family Center (noted above)</b>
4.	Serves as intake agency—(accepts referrals for PINS diversion services and conducts initial conferencing and makes PINS eligibility determinations)	<input checked="" type="checkbox"/> Probation <input type="checkbox"/> LDSS <input type="checkbox"/> Both <input checked="" type="checkbox"/> Other <b>FACT</b>	No change since last submission
5.	Conducts assessment of needs, strengths and risk for continuing with PINS behavior. Name of assessment instruments used: <b>YASI</b>	<input checked="" type="checkbox"/> Probation <input type="checkbox"/> LDSS <input type="checkbox"/> Both <input checked="" type="checkbox"/> Other <b>FACT</b>	No change since last submission

6.	Works with youth and family to develop case plan	<input checked="" type="checkbox"/> Probation <input type="checkbox"/> LDSS <input type="checkbox"/> Both <input checked="" type="checkbox"/> Other: <b>FACT</b>	No change since last submission
7.	Determines service providers and makes referrals	<input checked="" type="checkbox"/> Probation <input type="checkbox"/> LDSS <input checked="" type="checkbox"/> Other <b>FACT</b>	No change since last submission
8.	Makes case closing determination	<input checked="" type="checkbox"/> Probation <input type="checkbox"/> LDSS <input type="checkbox"/> Both <input checked="" type="checkbox"/> Other <b>FACT</b>	No change since last submission

**How will the county provide an immediate response to families and youth in need of services? Please include provision for 24 hour response capability**

Monroe County has done an analysis of the time of day when potential petitioners are making calls to Probation as well as the type of call/purpose of call. Very few calls come into Probation during non-office hours. Monroe County anticipates that families and community members will continue to contact the existing array of emergency contacts during non-business hours. FACT's operational hours are 9 a.m. - 5 p.m. Monday and Friday and 9 a.m. – 8 p.m. Tuesday through Thursday.

Monroe County will use the FACT Information number as the first contact point. FACT staff will respond to callers by triaging the call, identifying the needs of the caller and youth. If the situation is one that requires services from a mobile or crisis service, the FACT Facilitator will link the youth and family to that system and follow-up to ensure that the crisis is being addressed. During non office hours, a message will be on the FACT information line directing people to contact the police (911) in an emergency, or to contact 211 and/or Hillside Services Integration in order to speak with someone immediately, or to leave detailed message including reason for the call and best method/time to reach the caller. Callers who leave messages are contacted the next business day. FACT will keep data on the type of call, needs of the caller and youth, if the call involves a current PINS matter or Probationer, and what services/systems were the individuals linked to. This information will be reviewed and gaps in service delivery system identified. The information will be incorporated into ongoing planning and implementation efforts. Police agencies and other referral sources have been instructed to refer families to FACT and not to the Family Court. Monroe County Family Court Clerk's office routinely re-directs parents to FACT's offices at 1099 Jay Street.

**How potential petitioners initiate a request for diversion services.**

Monroe County will use the FACT Information number as the first contact point. FACT staff will respond to callers by triaging the call, identifying the needs of the caller and youth. FACT staff will respond to callers during the hours of 9 a.m. - 5 p.m. Monday and Friday and 9 a.m. – 8 p.m. Tuesday through Thursday. Messages left during non-office hours will be returned the morning of the next business day. During non office hours, a message will be on the FACT information line directing people to contact the police (911) in an emergency or contact 211 and/or Hillside Services Integration to speak with someone immediately or to leave detailed message including reason for the call and best method/time to reach the caller. Callers that leave messages are contacted the next business day. FACT will continue to keep data on the number of calls, type of call, needs of the caller and youth, where referred to, if the call involves a current PINS or Probationer, etc. This information will be reviewed and adjustments to staff coverage hours may be made based upon analysis of the data.

The *Education Liaison* position is jointly funded by DHS and OMH. School districts wishing to file a PINS Truancy complaint will be encouraged to contact the *Education Liaison* to discuss the situation and identify other options available to the school to address the behavior. School districts still desiring to file a PINS Truancy complaint will be required to complete a referral form in which the school district must identify what efforts have been taken to address the truancy behavior and the results of each intervention. In addition, if the child is classified as special education, the school district must attach documentation that a Nexus Hearing was held and the results of that hearing along with indicating who was present at the hearing. Each school district has been assigned a FACT facilitator(s) to serve as a contact point(s). If a school referral is incomplete, the *Education Liaison* will contact the school district, review the case, identify what is missing or unclear, list the current issues, and question

the school district expectations from the PINS system. The District representative and the *Education Liaison* will agree to a course of action.

## II. PINS Diversion Services Plan

- a) Development of PINS Diversion Services Plan and MOU  
1) Planning Activities.

Monroe County implemented its re-designed PINS system in January 2007. Continued oversight of the new system utilizes a multi-tier model involving representatives from several systems to ensure both continued buy-in and participation by several systems as well as accountability of the new system to the larger community on an ongoing basis. The oversight of the new PINS system includes:

- Weekly individual supervision with FACT staff
- Weekly staff meetings with FACT staff and all Supervisors to ensure consistency/continuity amongst the three teams. Meetings are also used to provide in-service training, hear presentations from community resources, and review data/operations/policies/practices.
- FACT Implementation Team (FIT) meets every other month with the three supervisors of FACT, Probation, OMH/CCSI and DHS Administration.
- System of Care Leadership Team meetings are held monthly to review data as well as identify service or system issues and develop strategies to address identified issues. The Leadership Team is comprised of representatives from Probation, DHS, OMH, Rochester City School District, City of Rochester, ACCESS, Rochester/Monroe County Youth Bureau and CCSI.

This constant oversight and using real time data and information to inform decision making has assisted in the early identification of issues and planfull adjustments to the PINS system to ensure that it continues to respond to the needs of youth and families.

During 2009, several new planning/assessment efforts have begun in the greater Rochester community that touch upon the PINS population and their families. Probation is an active participant in these initiatives:

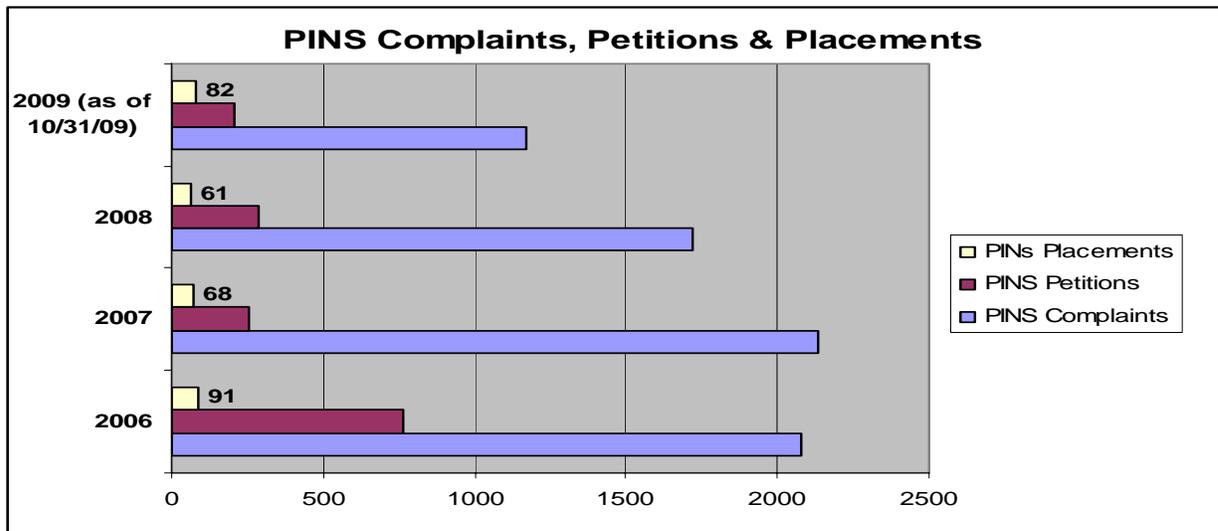
- Alternatives to Detention Initiative: Probation is a co-chair of the ATD Steering Committee. The ATD Steering Committee is focusing on detention use for both PINS and JD youth and developing a continuum of effective alternatives to detention.
- RCSD Safe School Initiative: Within this larger initiative there is a sub group working on transitional and support services for youth (PINS and JD) placed in detention and returning to the community as well as youth (PINS and JD) transitioning from residential placement. They are currently in the data collection phase. It is targeted to develop a plan in 2010 outlining how to address the needs of justice involved youth.
- School Attendance Partnership: The Administrative Judge for Family Court has convened a small group to explore the concept of establishing a truancy court in Monroe County.

- 2) Changes in Stakeholder and Service Agency Involvement in Planning.

*If no change in stakeholders or service agencies, check here.*

b) County assessment of needs for PINS population. Identify any *aggregate* needs assessments conducted or updated since submission of your current plan.

Monroe County continually monitors the PINS and JD system. Data is continually being reviewed and discussed. Since the start-up of FACT (the new intake point), the number of PINS complaints and petitions has declined. Initially, Monroe County also saw a decrease in placements, that trend has significantly changed in 2009. (See chart below) Monroe County is looking at the 2009 data and trying to ascertain why the placements are accelerating. Continued tracking of these and other data points will occur in 2010 as will discussions with key stakeholders to identify the cause of the increase in placements and identify alternative options.



Needs assessment activities are on-going and inform the decisions that are being made in the PINS system. Monroe County approaches needs assessment of PINS youth (as well as JDs) in several ways:

- Data is collected and reported monthly to the Juvenile Justice Council by several stakeholders in the local juvenile justice system including detention, Probation, DHS, OCFS, and Family Court. The data obtained and any issues of concern are discussed. If warranted, subcommittees or work groups are formed to address issues identified via this review.
- The Alternative Program Review Committee (APR) (committee reviews all youth where Probation is considering recommending placement or where Family Court is requesting out of home placement to look for alternative, community based options) has established a centralized data base that is used to discuss individual youth. Aggregate data can be taken from the data base to identify needs, gaps in service options, etc.
- The Non-Secure Detention Review Committee (comprised of DHS, Probation, and Hillside Non-Secure Detention) meets weekly to review all youth in Non-Secure Detention to look for opportunities to move youth faster through the system and reduce LOS (length of stay). The committee identifies systemic issues as well as department issues and raises concerns to Administration.
- DHS completes an annual review/analysis of PDI's for PINS and JD youth who have been placed with DHS to identify changes in demographics, and unmet needs or gaps in community services/resources.
- DHS tracks monthly numbers of PINS and JD youth and reports them on a Department Report Card.

In addition to the ongoing data collection and needs assessment activities noted above, Monroe County will be participating in several additional needs assessment activities in 2010:

- ATD Steering Committee is developing a comprehensive data collection/reporting tool that will capture

and report monthly key benchmarks and will include DMC data.

- Monroe County has contracted with CCSI Inc. to conduct an evaluation of FACT that includes an analysis of the cases coming to FACT and their outcomes; as well as interviews with parents/guardians, youth, school personnel, etc.....
- Monroe County will be looking at the issue of DMC (Disproportionate Minority Contact)/ DMR (Disproportionate Minority Respondents) through two projects in 2010. First, DHS has been selected by OCFS as one of 4 counties to work on DMR issues involving OCFS youth from Monroe County. As a companion to that, Probation has submitted a grant request to DCJS for a DMC Coordinator position to be responsible to look at the DMC within the juvenile justice system and work with key stakeholders to establish a plan to reduce DMC/DMR and establish benchmarks to measure reductions against.

c) Outcomes

*Please identify the intended outcomes to be achieved for the PINS population. These should be expressed as desired changes in community, family or individual behaviors or conditions. For each current outcome, please provide a brief description of the progress made to date. Please make any necessary changes to the indicators or strategies for each outcome with a brief explanation for the change. For new outcomes:*

1. *Identify quantifiable and verifiable indicators of the desired change in conditions or behaviors; and*
2. *Describe strategies to be implemented to achieve the identified outcomes. Each strategy should include the timeframe for completion, and a designation of what agency(ies) or department(s) is responsible for implementation. Strategies must be related to the achievement of the outcome.*

**OUTCOME 1: Decrease the number of PINS Intakes coming to Probation by 50% in 2007**

Results: In 2007, there were 2,130 PINS referrals to FACT. In 2007, there were 160 PINS referrals that came to Probation Intake (62 crt diversions and 98 from FACT) compared to 2,079 that came in 2006. Family Court received 257 new PINS petitions in 2007 compared to 766 in 2006 (66% reduction).

**Strategy to achieve desired outcome:**

Implement a re-design of the local PINS system

**Lead Partnerships:**

Monroe County Office of Probation – Community Corrections  
Monroe County Department of Human Services: Child & Family Services Division  
Monroe County Department of Human Services: Office of Mental Health  
CCSI Inc.

**Strategies Completed as of October 14, 2008:**

- Implemented FACT(Family Access and Connection Team) (1/1/07)
- FACT brochure developed in English & Spanish (3/07)
- Community information sessions held (4/07)
- Meetings held with schools, judges, community agencies, parents groups, etc (Ongoing)
- FACT implemented a wrap around fund to assist in purchasing services for individuals/families on as needed basis
- Transportation RFP issued 12/06. Medical Motors began providing transportation per RFP as of 6/07
- Respite RFP issues 10/06. Berkshire Farms began to provide PINS respite services as of 2/07
- Family Education Seminar started 6/07. Sessions held twice monthly. Involves staff from FACT, DHS & Probation
- Track data & prepare monthly/quarterly reports to FIT (FACT Implementation Team), System of Care Leadership Team, and Juvenile Justice Council
- 1<sup>st</sup> Year End Report completed ( 6/08)
- Training for FACT Facilitators (ongoing)
- Developed a community response to missing/runaway children by having Probation Officers look for the youth prior to a petition being filed. This resulted in a substantial decrease in petitions filed for purposes of a warrant on a missing child.
- Developed policy/protocol on when cases should be referred from FACT to Probation/s Juvenile Intake Unit for intensive diversion services.

**Strategies completed as of December 15, 2009:**

- PINS intakes are down by 55% from 2007. (as of 10/31/09)
- Continued to meet with schools, judges, community agencies, parents groups, etc. to explain the PINS system, discuss questions, hear concerns and strengthen the ongoing working relationship between FACT & Probation's Juvenile Intake and key stakeholders in the community.
- Revised FACT brochure
- Offer Education Seminar earlier "in process" to increase parent participation and reduce no-show rate
- Established a Girls Group called *Girls Circle*. The group provides interactive life skills training using key elements of national evidence based models that have proven effective with adolescent girls.
- Established a Boys Group called *Wise Guys*. The group provides interactive specific life skills training using key elements of national evidence based models that have proven effective with adolescent males.

<ul style="list-style-type: none"> <li>• Changed providers of the respite service to better respond to respite needs</li> <li>• CCSI completed an evaluation of FACT for 2008. 2009 evaluation is underway.</li> </ul>
<p><b>Strategies to complete December 15, 2009 – December 31, 2010:</b></p> <ul style="list-style-type: none"> <li>• Review results of CCSI evaluation of FACT and look at possibly implementing recommendations regarding changes/improvements</li> <li>• CCSI to complete evaluation of FACT by 12/2010 covering the time period</li> <li>• Work with Safe School Initiative to implement strategies identified via that planning process to reduce PINS filings</li> <li>• Train FACT facilitators and Probation Officers on System of Care principals to be incorporated in their work with youth and families</li> <li>• Work with Family Court Administrative Judge’s subcommittee on truancy court models</li> <li>• Identify and review effective truancy prevention models and research on truancy prevention with the goal to develop local strategies and resources to address PINS Truancy behavior</li> <li>• Work to expand ATD continuum to include additional resources for PINS youth</li> </ul>
<p><b>Contact(s):</b> Sandi Migliore, Assistant Probation Administrator –Family Services Division, Monroe Co Office of Probation-Community Corrections; Linda Oinen, Administrator, MCDHS Child &amp; Family Services Division</p>

**Outcome 2: Reduce by 40% the number of PINS placements with DHS on original petitions**

<p><b>Results:</b> In 2007, DHS placed 68 PINS youth on new petitions compared to 91 in 2006 (25% reduction)</p>
<p><b>Strategy(ies) to achieve desired outcome:</b> Reduce the number of new PINS petitions coming to Family Court</p>
<p><b>Lead Partnerships:</b> Monroe County Office of Probation – Community Corrections Monroe County Department of Human Services: Child &amp; Family Services Division Monroe County Department of Human Services: Office of Mental Health CCSI Inc. Monroe County Family Court St. Joseph’s Villa</p>
<p><b>Strategies Completed as of October 14, 2008:</b></p> <ul style="list-style-type: none"> <li>• Decreased the number of PI (Petitioned Immediately) cases: 2007 there were 42 vs. 295 in 2006</li> <li>• Increased the use of Alternatives to Detention for PINS youth. Referrals to SJV Villa Alternatives to Detention Programs (Villa Release; Curfew Checks; and Tracking) have increased substantially in the 1<sup>st</sup> half of 2008.</li> <li>• Mon Co secured an OCFS ATD TA grant (10/07) to work with Vera to develop and implement alternatives to detention continuum as well as develop an Risk Assessment Instrument (RAI)</li> <li>• Continue to use the APR process to identify alternatives to placement for youth who are at risk of placement</li> <li>• FACT developed and implemented a Girls Group to support young women coming in as PINS and address issues around self-esteem</li> </ul>
<p><b>Strategies completed by December 15, 2009:</b></p>

<ul style="list-style-type: none"> <li>• Began implementation of the Alternatives to Detention continuum</li> <li>• APR (Alternative Program Review) Committee will continue to meet weekly to review any/all PINS youth where placement is being proposed a part of PDI or Supplemental Report to the court or by the court itself.</li> <li>• Collaborating with Vera for a 2<sup>nd</sup> year of consultation on development of an ATD continuum and to identify strategies to address use of placements for PINS youth</li> </ul>
<p><b>Strategies to complete December 15, 2009 – December 31, 2010:</b></p> <ul style="list-style-type: none"> <li>• Continue to monitor outcomes of the SJV VTCC Program as it switches to focusing only on PINS youth (2/2010)</li> <li>• Seek funding to establish additional alternatives to detention resources as identified via the ATD Steering Committee</li> <li>• Meet quarterly with ATD programs to review outcome data, identify issues/concerns and develop any necessary action plans</li> <li>• Develop more evidenced based programs as an alternative to detention and placement</li> <li>• Develop and pilot a Truancy Prevention/Intervention project (12/2010) to reduce the number of PINS-T youth that are placed out of home</li> <li>• Develop strategies to address local "placement culture" for PINS youth</li> <li>• DHS to pilot care coordination policy and practice with the Residential Placement Unit caseworkers to reduce LOS for PINS youth</li> </ul>
<p><b>Contact(s):</b> Sandi Migliore, Assistant Probation Administrator –Family Services Division, Monroe Co Office of Probation-Community Corrections; Linda Oinen, Administrator, MCDHS Child &amp; Family Services Division</p>

**Outcome 3: Increase the use of diversion by 20%**

<p><b>Results:</b> In 2007, a total of 210 youth participated in a formal diversion program. (Note: Diversion slots in HCC In-Home Diversion Program were cut in half to 30 slots due to budget constraints.)</p>
<p><b>Strategy to achieve desired outcome:</b> FACT will identify and screen out youth who can be served by community or school based services. Formal Diversion Programs will be reserved for higher risk youth in order to focus efforts on addressing this group of youth.</p>
<p><b>Lead Partnerships:</b> Monroe County Department of Human Services: Child &amp; Family Services Division Monroe County Office of Probation – Community Corrections Juvenile Intake Unit Hillside Children's Center Cayuga Home for Children Youth and Family Partnership</p>
<p><b>Strategies Completed as of October 14, 2008:</b></p> <ul style="list-style-type: none"> <li>• Re-designed referral process to the formal diversion programs in light of FACT start-up. Youth referred to one of the formal diversion programs come through FACT. FACT assesses the youth/family and determines that the youth needs the intensity of one of the formal diversion programs, they will make the referral to the diversion program AND refer the case to Probation's Juvenile Intake to provide case management/oversight.</li> <li>• Re-design of PINS system, has resulted in Juvenile Intake Probation Officers having lower cases thus allowing them to provide more intensive services to diversion cases.</li> <li>• Utilize the YASI to identify needs and protective factors.</li> </ul>
<ul style="list-style-type: none"> <li>• <b>Strategies to complete October 15, 2008- December 2009:</b></li> <li>• 2009 contracts for preventive funded diversion programs utilized outcome and performance based language</li> </ul>

<ul style="list-style-type: none"> <li>Completed a three year (2005, 2006 and 2007) evaluation of ALL juvenile justice programs funded via DHS Preventive funds. Youth discharged from the individual programs in either 2005, 2006 or 2007 were tracked at 3, 6 and 12 month post discharge intervals to determine if (1) they had additional foster care placement, (2) had an OCFS placement, or (3) had been arrested. Information was compiled into individual reports on each program and shared with DHS Administration and Probation.</li> <li>DHS has implemented new contract requirement that all preventive programs including juvenile justice programs, will track and report outcomes on their discharges at the 3, 6, 12 and 18 month cut points.</li> <li>Reduced LOS for cases involved in FACT to facilitate quicker referral to Probation Juvenile Intake and formal diversion programs (i.e., MST; FFT) when the needs of the youth and family are not able to be met by FACT facilitators or the services that they have access to.</li> </ul>
<p><b>Strategies to complete December 15, 2009 - December 31, 2010:</b></p> <ul style="list-style-type: none"> <li>Complete 3, 6 and 12 month checks include foster care, OCFS and arrest information on 2008 discharges from the preventive funded juvenile justice programs (4/2010)</li> <li>Probation and DHS will look at the outcomes/results of the annual contract as well as the 3, 6, 12 and 18 month checks and make adjustments to program models as needed.</li> <li>Look at the reasons youth who are not successful with FACT and identify patterns, additional resource needs, staff training, etc....</li> <li>Maintain Preventive funding at 2009 levels if possible.</li> <li>Look for new funds to expand diversion programs/resources.</li> </ul>
<p><b>Contact(s):</b> Sandi Migliore, Assistant Probation Administrator –Family Services Division, Monroe Co Office of Probation-Community Corrections; Linda Oinen, Administrator, MCDHS Child &amp; Family Services Division</p>

**Outcome 4: Reduce the LOS (length of stay) of PINS youth in Non-Secure Detention by 30% in 2007**

<p><b>Results:</b> The LOS of youth in Non-Secure was 11 days in 2007 which is a decrease from 15 days in 2006. (27% decrease)</p>
<p><b>Strategy to achieve desired outcome:</b> Establish a viable system/continuum of alternatives to detention for PINS youth that reduces reliance on non-secure detention</p>
<p><b>Lead Partnerships:</b> Monroe County Presentment Agency Monroe County Department of Human Services: Child &amp; Family Services Division Monroe County Office of Probation – Community Corrections Juvenile Intake Unit Monroe County Family Court</p>
<p><b>Strategies Completed as of October 14, 2008:</b></p> <ul style="list-style-type: none"> <li>Developed a 8 ½ x 11 sheet of <i>Pre and Post Adjudication Alternatives</i> available to Family Court Judges rather than detaining/incarcerating a youth (2007)</li> <li>Re-wrote Non-Secure Detention contracts reducing the number of beds Monroe County will contract for (6/2007 &amp; 1/2008). Beds have been reduced from 42 to 32.</li> <li>Collaboration with Vera Institute on Alternatives to Detention Initiative. Formed two subcommittees: RAI and ATD, and ATD Steering Committee to oversee reform efforts. Work plan developed to track activities and successes and keep to timeline to implement Phase 1 by 1/1/09.</li> <li>Work with Vera Institute on “retrospective” of detained youth from 10/06-5/07 using draft RAI</li> <li>Developed a draft continuum of alternatives to detention currently available to PINS youth (5/08)</li> <li>Increased Family Court use of SJV’s Juvenile Release Program by (1) having POs include recommendation in warrant requests as appropriate, and (2) have Sr.</li> </ul>

<p>PO available in court to offer alternatives to detention options (2008)</p> <ul style="list-style-type: none"><li>- Continue weekly case conferencing of all youth detained in Non-Secure Detention identify opportunities to move youth through the system faster (ongoing)</li><li>- HCC provides monthly real-time track/report LOS for youth in Non-Secure Detention. This data is reported to Juvenile Justice Council monthly</li></ul>
<p><b>Strategies completed by December 15, 2009:</b></p> <ul style="list-style-type: none"><li>- Reduced the number of contracted Non-Secure Detention beds to 20 ( 1/09)</li><li>- Met with law guardians to increase the number of recommendations to court for PINS youth to be referred to the SJV VTCC</li><li>- Reduced bed days by 57% from that of 2007 (9,263 bed days (2007) vs. 5,302 bed days (2009 as of 10/31/09)</li><li>- Continue weekly case conferencing of all youth detained in Non-Secure Detention identify opportunities to move youth through the system faster (ongoing)</li><li>- HCC provides monthly real-time track/report LOS for youth in Non-Secure Detention. Data is reported to Juvenile Justice Council monthly</li></ul>
<p><b>Strategies to complete December 15, 2009 – December 31, 2010:</b></p> <ul style="list-style-type: none"><li>- Develop local key juvenile justice system indicators (including detention data and LOS) and set up system to track and report data (1/10)</li><li>- Look for opportunities to expand viable alternatives to detention options for PINS youth</li><li>- Track “success” of PINS youth referred to an ATD and report results to ATD Steering Committee, Family Court and Juvenile Justice Council.</li><li>- Expedite mental health evaluations and substance abuse evaluation through the Juvenile Justice Clinical Coordinator who will be stationed at Family Court.</li></ul>
<p><b>Contact(s):</b> Sandi Migliore, Assistant Probation Administrator –Family Services Division, Monroe County Office of Probation-Community Corrections (co-chair of ATD Steering Committee); Linda Oinen, Administrator, MCDHS Child &amp; Family Services Division (co-chair ATD Steering Committee)</p>