

KATHY HOCHUL Governor SHEILA J. POOLE Commissioner

March 29, 2022

Dear Chief Executive Officer,

Thank you for submitting Orange County's Supervision and Treatment Services for Juveniles Program (STSJP) plan for Program Year (PY) 2021-2022. Your entire STSJP plan, including any amounts listed for PY 2021-2022 STSJP-RTA, has been **approved**.

The County is eligible to receive 62% State reimbursement for STSJP expenditures up to the capped STSJP allocation amount. Your municipality will continue to receive 49% State reimbursement for eligible detention services expenditures up to the capped allocation amount. If your municipality shifts a portion of its detention allocation into its STSJP plan, your municipality will receive 62% State reimbursement, up to the capped allocation, if such shifted funds are spent on STSJP eligible expenditures. A municipality may make a detention allocation shift at the time of the STSJP plan submission or up until June 30, 2022, unless otherwise approved by the Office of Children and Family Services.

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

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

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

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

All STSJP claims, inclusive of STSJP-RTA, must be submitted electronically via the Juvenile Detention Automated System (JDAS) for the service period of October 1, 2021 to September 30, 2022. Questions on all aspects of the claiming process should be directed to the STSJP mailbox at stsjp@ocfs.ny.gov with the subject line: "STSJP Claiming Questions".

If you have any STSJP plan questions, please also email us at stsjp@ocfs.ny.gov and write "STSJP Plan Questions" in the subject line or reach out to Geneva Hilliard at (518) 486-1819 or Lynn Tubbs at (518) 473-9116.

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

Sincerely,

Nina Aledort, Ph.D., LMSW

a

Deputy Commissioner

Division of Youth Development and Partnerships for Success

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

NEW YORK STATE OFFICE OF CHILDREN AND FAMILY SERVICES

SUPERVISION AND TREATMENT SERVICES FOR JUVENILES PROGRAM (STSJP) - WITH ROLLOVER ANNUAL PLAN FOR PROGRAM YEAR OCTOBER 1, 2021 – SEPTEMBER 30, 2022

| SUBMITTING MUNICIPA | LITY CONTACT INFORMA | ATION | | | | | | |
|------------------------------|---|--------------------------------------|--|--|--|--|--|--|
| Name of applicant county, co | Name of applicant county, counties or jurisdiction: Orange County | | | | | | | |
| Lead agency for STSJP subr | Lead agency for STSJP submission: Orange County Department of Social Services | | | | | | | |
| Contact person's name: Ann | e Caldwell | Title: Senior Case Supervisor | | | | | | |
| Phone: (845) 291-2802 | Ext: | Email: Anne.Caldwell@dfa.state.ny.us | | | | | | |

PLAN SUBMISSION INSTRUCTIONS

STSJP plans are due to the Office of Children and Family Services (OCFS) by 09/08/2021

- 1. Once you have opened this form on your computer, please use the "Save As" function to save a copy with the following file name: "STSJP 2021-2022 Annual Plan [ex. Municipality Name]."
- Work from the copy saved in Step 1 as you record your municipality information. Save your work as you complete each section.
- 3. Email the completed application to OCFS at stsjp@ocfs.ny.gov. Use the subject line "STSJP 2021-2022 Annual Plan [Municipality Name]" to facilitate timely review of your plan.

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

NOTE: Cooperative Applications Submitted Jointly by Two or More Counties

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

PART I - MUNICIPALITY LEVEL DETAILS

A. MUNICIPALITY LEVEL ANALYSIS

- (a) Identify the communities or neighborhoods (ZIP codes) from which the highest number of Youthful Offenders (YO), Adolescent Offenders (AO), Juvenile Offenders (JO), Juvenile Delinquents (JD), and Persons in Need of Supervision (PINS), enter the youth justice system, are remanded to detention, and/or are residentially placed; and (b) Discuss what factors may be contributing to these high numbers:
 - Orange County has a population of 384,940 and covers 811.7 miles. There are 42 municipalities in the county including 20 towns, 19 villages and 3 cities. The three cities are Newburgh, Middletown and Port Jervis. The population of these cities are Newburgh 28,177, Middletown 28,189 and Port Jervis 8558. A significant number of families living at or below the poverty line reside in the three cities. Census Bureau estimates in 2019 show the percentage of persons living in poverty as follows: Newburgh 29.5%, Middletown 16.6% and Port Jervis 18.8%. The three cities have the highest number of JD petitons entering the juvenile justice system. Zipcodes 12550 (Newburgh) and 10940 (Middletown)have the largest representation within the juvenile justice system. Factors that may contribute to higher representation of youth living in these zipcodes becoming involved in the juvenile justice system are unmet mental health needs, gang influence and poverty.
- 2. Resources available at the following link can help you answer these questions: https://www.ocfs.ny.gov/programs/youth/stsjp/planning.php
 - (a) In the charts below, please provide the municipality's distributions by race, ethnicity, and sex assigned at birth for the general population of youth younger than 18, and for the detained and placed population of youth younger than 18. (**Note:** Every July, the National Center for Health Statistics releases population data for the previous year. The population data you are being asked to report on was the latest available at the time OCFS updated the contents of this plan.)

| Race/Ethnicity | | eral Population 8 years | Ad | Detention missions 18 years | 2020 Placement Admissions <18 years | | |
|-------------------------|-------|----------------------------|----|-----------------------------------|---|----|--|
| | # | % | # | % | # | % | |
| Black/African American | 11012 | 11 | 10 | 43 | 3 | 42 | |
| White | 57790 | 59 | 1 | 4 | 2 | 29 | |
| Native American/Alaskan | 267 | 0 | 0 | 0 | | | |
| Asian/Pacific Islander | 2591 | 3 | 0 | 0 | | | |
| Hispanic | 26340 | 27 | 12 | 52 | 2 | 29 | |

| Sex Assigned at Birth | | 2019 General Population <18 years | | 2020 Detention Admissions <18 years | | acement ssions years |
|-----------------------|-------|--------------------------------------|----|---|---|----------------------------|
| | # | % | # | % | # | % |
| Male | 50307 | 51 | 21 | 91 | 5 | 71 |
| Female | 47693 | 49 | 2 | 9 | 2 | 29 |

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

Orange County's STSJP plan addresses the identified dispartity by providing "front loaded" services to all youth entering the juvenile justice system in our three cities. Census estimates show City of Newburgh's population is 75.2% black and/or Hispanic and City Middletown is 62.3% black and/or Hispanic. By providing all youth upon arrest in both Newburgh and Middletown with local voluntary Family Engagement Specialist services to assist them in meeting needs and navigating the juvenile justice system we continue to see better outcomes for our youth within these cities. Additionally, our Children's Cross System Team considers cultural barriers when conferencing cases and assigns services best suited to address each individual family and youth needs. All juvenile justice statistics disseminated by the Children's Cross System Team/Raise the Age Coordinator are reported with race and ethnicity included to inform county decision makers of disparity issues.

B. LOCAL COLLABORATION

- 1. Legislation requires local collaboration. Please describe your municipality's activities in developing this year's STSJP plan in collaboration with local agencies responsible for probation, law enforcement, detention, diversion, social services, courts, service providers, schools, and youth development programs:
 - Orange County continues to work collaboratively with all juvenile justice involved agencies. In response to changes in the PINS system, OC has implemented a Children's Cross System Team that meets regularly to conference cases and identify service gaps. Additionally, the Children's Cross System Coordinator (formerly JDAI Coordinator) updates members of the juvenile justice team (formally JDAI Collaborative) including law enforcement, Attorney for Children, courts, Probation, school districts, service providers on current trends in our system and elicits feedback and ideas including service needs.
- 2. How is your municipality gathering participant youth and family feedback as part of your STSJP plan development? Our STSJP direct service programs elicit feedback through exit survey (Family Keys) and parent/guardian/youth engagement (Family Engagement Specialist MHJJ Program) at multiple points.
 - Describe how the plan incorporates that feedback; if you have not yet received youth and family feedback, please describe the municipality implementation plan to develop such feedback mechanisms during PY 2021-2022.

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| Program Directors and county m youth served. This information i included in the plan. | | | r programs to best meet the needs of etermining what programs are | | | | | | |
|--|--|---|--|--|--|--|--|--|--|
| 3. Was community feedback in high ☐ Yes ☐ No | n-need ZIP codes (A.1.) s | ought as part of the S | STSJP plan development? | | | | | | |
| If yes, please describe how the pimplementation plan to develop s | | | | | | | | | |
| | | <u> </u> | s to inform the STSJP/STSJP RTA plan. | | | | | | |
| | | • | nunity coalitions that are represented | | | | | | |
| representatives from professional a decision making. Service providers | and community based or report youth/family/cor k along with input from | ganizations located ir nmunity feedback to the local representati | ne Youth Bureau Advisory Board has n both zip codes that are involved in the Children's Cross System Team ives listed are utilized to ensure this | | | | | | |
| C. COOPERATIVE APPLICATION (C | COMPLETE THIS SECTION | N ONLY IF THIS IS A JO | DINT APPLICATION.) | | | | | | |
| Describe the provisions for the proportionate cost to be borne by each county. | | | | | | | | | |
| 2. Describe how personnel will be co | ompensated across and | between counties in t | the cooperative: | | | | | | |
| 3. Will a single fiscal officer be the c ☐ Yes (If Yes, please provide th ☐ No (If No, skip to Q4.) | | | JP? | | | | | | |
| Officer's Name: | | Title: | | | | | | | |
| Phone: () Ext: | | Email: | | | | | | | |
| Provide the name and email addr for joint-funded programs, as wel funded programs: | | | collecting and submitting STSJP data cal officers responsible for joint- | | | | | | |
| PART II – PROGRAM LEVEL D | FTAILS | | | | | | | | |
| PROGRAM 1 | | | | | | | | | |
| A. PROGRAM 1 CONTACT INFORM | MATION | | | | | | | | |
| Program 1 Name: Family Engageme | ent Specialist (MHJJ) | | | | | | | | |
| Operating Agency: RSS | | | | | | | | | |
| Program Mailing Address: 30 Matth | news St. | | | | | | | | |
| Address Line 2: | | | | | | | | | |
| City: Goshen | | State: NY | ZIP Code: 10924 | | | | | | |
| Program Contact's Name: Rebekah | Feliciano | Title: Program Direc | ctor | | | | | | |
| Phone: (845) 707-9114 | Ext: | Email: rfeliciano@re | ehab.org | | | | | | |
| B. PROGRAM 1 DESCRIPTION AN | D TARGET POPULATION | | | | | | | | |
| as PINS. This program meets the | | | | | | | | | |

| 2. | | | le boxes | below to | identify | the service | e types that | will be ut | ilized for | this prog | ram in F | Υ |
|--|--|------------------------|--|--|------------------------------------|-------------|----------------|------------|------------|------------|------------|----------|
| | ST | SJP STSJP-RTA | | | | | | | | | | |
| | | | Early Int Alternati Alternati Reentry | tervention ive to De ive to Pla / Afterca | tention / acement are (R / A | (ATP) | sitional Place | ement (A | TD / ATF | PDP) | | |
| *No | te: I | f you indicated this p | rogram w | vill operat | te as an | FSS, it can | not provide | STSJP-F | RTA serv | ices unde | er this pr | ogram. |
| 3. | Plea | se list the ZIP codes | this prog | gram will | target: | | | | | | | |
| | All C | range County with a | dditiona | l services | offered | in 12550, | 10940 and 1 | .2771 | | | | |
| 4. | 2021-2022: STSJP STSJP-RTA Prevention (P) Early Intervention (EI) Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP) Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP) Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP) Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP) Alternative (I you indicated this program will operate as an FSS, it cannot provide STSJP-RTA services under this program. Please list the ZIP codes this program will carget: All Orange County with additional services offered in 12550, 10940 and 12771 4. Describe the program, including how it is family focused. If you answered "Yes" to Q1 (FSS), be sure to demonstrate how your program meets each requirement of the legislation. Also, please explain how each of the service types selected in Q2 will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them. (Please refer to the STSJP Annual Plan Development Guide for additional guidance). The FES MHJJ program is offered to JD/JO/AO youth arrested in Orange County. Contact is made by the program within days of arrest. The program provides a comprehensive assessment to identify needs and work with the youth/family to meet those needs and navigate the juvenile justice system. 24/7 crisis conselling is available to participating youth. The clinicians assigned to this program are embedded within the Probation Department located in our three cities and assist in providing "Strengthening Familes" to high risk youth. 5. Is the program capable of being replicated across multiple locations? Yes \(\) No C. PROGRAM 1 PERFORMANCE HISTORY (REFER TO YOUR MUNICIPALITY'S STSJP DATA FILES.) 1. What, if any, funding did this program receive in PY 2020-2021? If the program was approved in PY 2020-2021, but was not implemented or is anticipated to serve no youth, please choose Non | | | | | | | | | | | |
| 5. | | | | • | | | | | | | | |
| | | | | | | - | | 's STSJI | P DATA F | FILES.) | | |
| 1. | was | not implemented or | is anticip | ated to s | erve no y | youth, plea | se choose N | | s approv | ed in PY | 2020-20 |)21, but |
| What, if any, funding did this program receive in PY 2020-2021? If the program was approved in PY 2020-2021, but was not implemented or is anticipated to serve no youth, please choose None. None (If none, skip to section D.) STSJP STSJP-RTA Please use the table to record how many youth (#) were served by the program between 10/1/2020 and 3/31/2021. Enter zero (0) if not applicable. | | | | | | | | | | | | |
| | Γ | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | _ | | | | | ` | | ` ' | | | | |
| | ⊢ | | | | 0 | 0 | | | | | | |
| | - | | | | _ | | _ | | _ | | | |
| | L | Total | 0 | 53 | 0 | 0 | 0 | 0 | 0 | 0 | 53 | |
| 3. | proje | ected capacity on 9/3 | 80/2021? | Please e | explain: | | - | | rving moi | re or less | than its | |
| 4. | Plea | se use the table to re | ecord the | average | e length | of service | | | o exited t | the progra | am betw | een |
| | | | | | | Progra | am Type | | | | | |
| | | | | | | | | 1 | | | | |
| | | | | | | 1 | | <u> </u> | | | | |
| | | STSJP | 0.00 | 134.13 | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | _ | |
| | | STSJP-RTA | 0.00 | 174.63 | | | 0.00 | 0.00 | 0.00 | 0.00 | | |

| 5. | How does the average length of service compare to what you would expect for that service type? For ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and residential placements during the same time period. |
|----|---|
| | Due to COVID precautions extending court time, this program has an increased LOS as the program continues throughout the pendancy of the case. This program is utilized for JD youth and AO/JO youth receiving Voluntary Assessment and Case Planning Services through Probation. |
| 6. | Will this program's outcomes meet the PY 2020-2021 projected goals by 9/30/2021? ☐ Yes (If Yes, skip to section D.) ☐ Partially ☐ No |
| 7. | (a) What outcomes are on track to meet the goals set for PY 2020-2021? (b) How will they be met? |
| 8. | (a) What outcomes are not on track to meet the goals set for PY 2020-2021? (b) Please describe any contributing barriers. |
| 9. | What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2021-2022? |

D. PROGRAM 1 SERVICE PROJECTIONS FOR PY 2021-2022

| | | | | Progra | am Type | | | | |
|------------------|---|-----|--------|---------|----------|------|-----|-----|-------|
| | | | | ATD/ | ATPDP | | | | |
| Approved Funding | Р | El | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | Total |
| STSJP | 0 | 65 | 0 | 0 | 0 | 0 | 0 | 0 | 65 |
| STSJP-RTA | 0 | 75 | | | 0 | 0 | 0 | 0 | 75 |
| Total | 0 | 140 | 0 | 0 | 0 | 0 | 0 | 0 | 140 |

| PROGRAM | 2 | | | | | | | | |
|--------------|---|-------------------|-------------------|-------------------------|---|--|--|--|--|
| A. PROGRA | м 2 (| CONTACT INFORMA | ATION | | | | | | |
| Program 2 N | ame: | Family Keys | | | | | | | |
| Operating Ag | ency | Southwest Key Pro | ograms | | | | | | |
| Program Mai | Program Mailing Address: 1997 Route 17M | | | | | | | | |
| Address Line | Address Line 2: | | | | | | | | |
| City: Goshen | | | | State: NY | ZIP Code: 10924 | | | | |
| Program Con | tact's | Name: Monica Re | cinos | Title: Program Director | | | | | |
| Phone: (845) | 294- | 6917 | Ext: | Email: mrecinos@s | wkey.org | | | | |
| B. PROGRA | м 2 [| DESCRIPTION AND | TARGET POPULATION | | | | | | |
| as PINS. | This | program meets the | | mily Support Servi | ecoming, alleged to be, or adjudicated ces (FSS) program (Social Services Yes No | | | | |

| 2. | | | ole boxes | below to | identify t | the service | types that v | will be ut | lized for | this prog | ram in F | Ϋ́ |
|---|------------------------|---|---------------------------------|-----------------------------------|-------------------------------------|----------------------|---------------------------------------|-------------|------------|------------|------------|---------|
| | STS | SJP STSJP-RTA | | | | | | | | | | |
| | | | Prevent | ion (P) | | | | | | | | |
| | | | | . , | n (EI) | | | | | | | |
| | | | Alternat | ive to De | tention / F | Pre-Dispos | itional Place | ement (A | TD / ATF | PDP) | | |
| | | | | | | • | | , | | | | |
| | | | Reentry | / Afterca | are (R / A) | | | | | | | |
| | | | Indirect | Services | i | | | | | | | |
| *No | | | | | | SS, it can | not provide | STSJP-F | RTA serv | ices und | er this pr | ogram. |
| 3. | | | this prog | gram will | target: | | | | | | | |
| | All O | range County | | | | | | | | | | |
| STSJP STSJP-RTA | | | | | | | | | | | | |
| | • | | | | | | | | | | | |
| including: information and referral, crisis management, safety planning and short term case management with | | | | | | | | | | | | |
| All Orange County Describe the program, including how it is family focused. If you answered "Yes" to Q1 (FSS), be sure to demonstrate how your program meets each requirement of the legislation. Also, please explain how each of the service types selected in Q2 will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them. (Please refer to the STSJP Annual Plan Development Guide for additional guidance.) All youth referred for PINS behaviors and their families are assessed and provided with immediate intervention, including: information and referral, crisis management, safety planning and short term case management with the goal of successful PINS diversion. Is the program capable of being replicated across multiple locations? Yes No PROGRAM 2 PERFORMANCE HISTORY (REFER TO YOUR MUNICIPALITY'S STSJP DATA FILES.) What, if any, funding did this program receive in PY 2020-2021? If the program was approved in PY 2020-2021, but was not implemented or is anticipated to serve no youth, please choose None. None (If none, skip to section D.) STSJP STSJP-RTA Please use the table to record how many youth (#) were served by the program between 10/1/2020 and | | | | | | | | | | | | |
| | | <u> </u> | | | | <u>-</u> | | | | FILES.) | | |
| including: information and referral, crisis management, safety planning and short term case management with the goal of successful PINS diversion. 5. Is the program capable of being replicated across multiple locations? Yes No C. PROGRAM 2 PERFORMANCE HISTORY (REFER TO YOUR MUNICIPALITY'S STSJP DATA FILES.) 1. What, if any, funding did this program receive in PY 2020-2021? If the program was approved in PY 2020-2021, but was not implemented or is anticipated to serve no youth, please choose None. None (If none, skip to section D.) STSJP STSJP-RTA 2. Please use the table to record how many youth (#) were served by the program between 10/1/2020 and 3/31/2021. Enter zero (0) if not applicable. | | | | | | | | | | | | |
| | | , | • | • | | | | | | | | _ |
| | | - | T | | | | | | | | | |
| | | | _ | | (DINIO) | | | (10) | 4.TD | D / A | - | |
| | | T i | - | | | | ` ' | | | | | |
| | <u> </u> | | | - | 0 | 0 | + | | | | | - |
| | _ | | | | | | | | | | | |
| | Ľ | Total | 0 | 41 | 0 | 0 | 0 | 0 | 0 | 0 | 41 |] |
| 3. | proje Fami incre | cted capacity on 9/3 ly Keys is under the ase the number of y | 30/2021? program outh ser | Please e s budget ved as so | explain: ed capaci chools rec | ity due to to topen. | the pandem | ic. It is a | nticipate | ed that th | nis progra | am will |
| 4. | Pleas 10/1/ | se use the table to re 2020 and 3/31/2021 | ecord the . Enter z | e average ero (0) if | e length on not application | of service cable. | (days) for y | outh who | o exited t | the progr | am betw | reen |
| | Γ | | | | | Progra | am Type | | | | | |
| | | | | | | | | |] | | | |
| | | Approved Funding | Р | El | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | 1 | |
| | - | | | | | | · · · · · · · · · · · · · · · · · · · | ` ' | | | - | |
| | <u> </u> | STSJP STSJP-RTA | 0.00 | 137.32 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 1 | |

| | How does the average I ATD/ATPDP and ATP s residential placements o | ervice ty | pes, com | pare with | the avera | , | | | 71 | | n and | |
|--|--|------------|------------|------------------------|-------------------|-------------------|------------|-----------|------------|-----------|---------|--|
| | The average length of s | tay is cor | nsistent v | vith prior | years and | expectation | S. | | | | | |
| | Will this program's outco $	extstyle 	extstyl$ | | | / 2020-20 Partially | | ed goals by No | 9/30/202 | 1? | | | | |
| 7. | (a) What outcomes are | on track | to meet t | he goals | set for PY | 2020-2021? | (b) How | will they | be met? | | | |
| | barriers. | | | | | | | | | | | |
| What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2021-2022? | | | | | | | | | | | | |
| D. PROGRAM 2 SERVICE PROJECTIONS FOR PY 2021-2022 | | | | | | | | | | | | |
| Please use the table to indicate the projected # youth to be served by the program for PY 2021-2022. Enter zero (0) if not applicable. | | | | | | | | | | | | |
| | | | | | | am Type | | | | | | |
| | | | | | | ATPDP | | | | | | |
| | Approved Funding | Р | EI | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | Total | | |
| | STSJP | 0 | 120 | 0 | 0 | 0 | 0 | 0 | 0 | 120 | | |
| | STSJP-RTA | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | |
| | Total | 0 | 120 | 0 | 0 | 0 | 0 | 0 | 0 | 120 | | |
| | OGRAM 3 | 1 | .= | | | | | | | | | |
| | PROGRAM 3 CONTACT | | | S | T | Caralianta | ·/ D.: | | | | | |
| | gram 3 Name: Orange C | | | cross Syst | tems Team | Coordinato | r/ Raise t | ne Age C | oordina | tor | | |
| <u> </u> | erating Agency: Southwe | | | | | | | | | | | |
| | gram Mailing Address: 1 ress Line 2: | 997 Rou | te 17IVI | | | | | | | | | |
| | | | | | Stor | te: NY | ZID | Code: 10 | 0024 | | | |
| | : Goshen | toyon Da | ck | | - | e: OC Childre | | | | oordinate | or/ DTA | |
| | gram Contact's Name: S | Ext: | CK | | - | ail: spack@s | | - | s realli C | oorumatt | JI/ KIA | |
| | ne: (845) 825-2833 PROGRAM 3 DESCRIPT | | TARGET | PODIII / | | all. Spack@S | wkey.org | <u> </u> | | | | |
| | A Family Support Service | | | | | outh at rick o | of hecomi | ing alleg | ed to be | or adjud | icated | |
| | as PINS. This program <i>Law Section 458-m)</i> ar | meets the | e legal de | efinition of | f a Family | Support Se | rvices (l | | | | | |

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| 2. | Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2021-2022: |
|----|--|
| | STSJP STSJP-RTA |
| | Prevention (P) |
| | ☐ Early Intervention (EI) |
| | ☐ Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP) |
| | ☐ Alternative to Placement (ATP) |
| | Reentry / Aftercare (R / A) |
| | |
| | ote: If you indicated this program will operate as an FSS, it cannot provide STSJP-RTA services under this program. |
| 3. | Please list the ZIP codes this program will target: |
| | All Orange County |
| 4. | Describe the program, including how it is family focused. If you answered "Yes" to Q1 (FSS), be sure to demonstrate how your program meets each requirement of the legislation. Also, please explain how each of the service types selected in Q2 will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them. (Please refer to the STSJP Annual Plan Development Guide for additional guidance.) |
| | The OC Children's Cross System Team Coordinator (formally JDAI Coordinator) / RTA Coordinator has two |
| | separate functions. |
| | |
| | The OC Chilidren's Cross System Team Coordinator is tasked with the following: |
| | - Leading a team of Probation, Mental Health and Social Service representatives addressing PINS situations |
| | - Coordinating case conferences on youth exhibiting PINS like behavior with a goal of assigning effective and |
| | appropriate community based services to address the needs of the youth/family |
| | - Completing all Detention Risk Assessment Instruments (DRAI) for youth petitioned to Family Court |
| | - Conducting training for schools, law enforcement and county agencies on juvenile justice legislative changes |
| | Representing Orange County on various state and local juvenile justice collaboratives Collecting, analyzing and disseminating multiple data sets to inform county decision makers |
| | - Completing funding applications |
| | - Monitor and make recommendations on racial and ethnic disparities within the local juvenile justice system |
| | - Monitor and make recommendations on the unnecessary use of detention |
| | ,, , |
| | The OC Raise the Age Coordinator is tasked with the following: |
| | - RTA Fiscal Plan preparation |
| | - RTA data collection, review and dissemination |
| | - RTA Detention Risk Assessment Instrument preparation |
| | - Informs and makes recommendations on policy/procedure development |
| | - On call for RTA questions regarding new arrests, detention, funding, etc. |
| | - Representing Orange County at OCFS RTA Learning Collaborative |
| 5. | Is the program capable of being replicated across multiple locations? 🛛 Yes 🗌 No |
| | PROGRAM 3 PERFORMANCE HISTORY (REFER TO YOUR MUNICIPALITY'S STSJP DATA FILES.) |
| 1. | What, if any, funding did this program receive in PY 2020-2021? If the program was approved in PY 2020-2021 but |
| | was not implemented or is anticipated to serve no youth, please choose None. |
| | ☐ None (If none, skip to section D.) ☐ STSJP ☐ STSJP-RTA |

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2020 and 3/31/2021. Enter zero (0) if not applicable.

| | | | | Progra | am Type | | | | |
|------------------|---|----|--------|---------|----------|------|-----|-----|-------|
| | | | | ATD/ | ATPDP | | | | |
| Approved Funding | Р | EI | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | Total |
| STSJP | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| STSJP-RTA | 0 | 0 | | | 0 | 0 | 0 | 0 | 0 |
| Total | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

3. Based on the program's record of youth served (Q2), do you anticipate this program serving more or less than its projected capacity on 9/30/2021? Please explain:

N/A Indirect Service Provider

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2020 and 3/31/2021. Enter zero (0) if not applicable.

| | | | | Progra | ım Type | | | |
|------------------|------|------|--------|---------|----------|------|------|------|
| | | | | ATD/ | | | | |
| Approved Funding | Р | El | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A |
| STSJP | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| STSJP-RTA | 0.00 | 0.00 | | | 0.00 | 0.00 | 0.00 | 0 |

| 5. | How does the average length of service (Q4) compare to what you would expect for that service type? For |
|----|--|
| | ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and |
| | residential placements during the same time period. |

N/A Indirect Service Provider

| ŝ. | Will this program's outcomes meet | the PY 2020-2 | 2021 projected g | oals by 9/30/2021? |
|----|--|---------------|------------------|--------------------|
| | \boxtimes Yes (If Yes, skip to section D.) | Partial | ly No |) |

- 7. (a) What outcomes are on track to meet the goals set for PY 2020-2021? (b) How will they be met?
- 8. (a) What outcomes are not on track to meet the goals set for PY 2020-2021? (b) Please describe any contributing barriers.
- 9. What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2021-2022?

D. PROGRAM 3 SERVICE PROJECTIONS FOR PY 2021-2022

1. Please use the table to indicate the **projected # youth to be served** by the program for PY 2021-2022. Enter zero (0) if not applicable.

| | | Program Type | | | | | | | | | | |
|------------------|---|--------------|--------|---------|----------|------|-----|-----|-------|--|--|--|
| | | | | ATD/ | ATPDP | | | | | | | |
| Approved Funding | Р | El | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | Total | | | |
| STSJP | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | |
| STSJP-RTA | 0 | 0 | | | 0 | 0 | 0 | 0 | 0 | | | |
| Total | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | |

PROGRAM 4

A. PROGRAM 4 CONTACT INFORMATION

Program 4 Name: Astor Family Services and Support

| Operating | Agency: Astor Ch | ildren's S | Services | | | | | | | | |
|--|--|--|--|--|--|--|--|---|---|---|--------------------------|
| Program N | Mailing Address: 3 | 90 Crysta | al Run Ro | ad, Suite | 101 | | | | | | |
| Address L | ine 2: | | | | | | | | | | |
| City: Mido | lletown | | | | Stat | e: NY | ZIP | Code: 10 | 940 | | |
| Program (| Contact's Name: Z | oryn Laza | arus-Theo | odore | Title | : Supervisin | g Social V | Norker | | | |
| Phone: (84 | 45) 673-4260 E | Ext: | | | Ema | ail: zltheodo | re@asto | rservices | .org | | |
| B. PROG | RAM 4 DESCRIPT | ION AND | TARGET | POPULA | ATION | | | | | | |
| as PIN | nily Support Servic NS. This program i Section 458-m) an | meets the | e legal de | finition of | a Family | Support Se | of becomi ervices (I Yes | ing, alleg F SS) <i>pro</i> ⊠ No | ed to be, gram (S | , or adjud ocial Se i | icated r vices |
| 2. Please 2021-2 | e check all applica 2022: | ble boxe | s below t | o identify | the servic | e types that | will be ut | ilized for | this prog | gram in P | Y |
| STS | STSJP STSJP-RTA | | | | | | | | | | |
| | | Preven | . , | | | | | | | | |
| | | • | nterventio | ` , | | | | | | | |
| | | | | | • | sitional Place | ement (A | ATD / ATF | PDP) | | |
| | | | | acement are (R / A | . , | | | | | | |
| | | | Services | • | ·) | | | | | | |
| *Note: If y | ou indicated this p | | | | FSS, it car | nnot provide | STSJP-F | RTA serv | rices und | er this pr | ogram. |
| 3. Please | e list the ZIP code | s this pro | gram will | target: | | | | | | | |
| All Ora | ange County | | | | | | | | | | |
| demor service will aid please This p juveni menta opera | the the program, in the strate how your per types selected in the reduction of the list them. (Please rogram targets RT le justice system and health services at the services are the services ar | orogram r n Q2 will of youth of e refer to A youth and/or out with adj | meets ear address to detained at the STS. with mer ut of hom ded. Pare | ch require the unique and resid JP Annua ntal healtl ne placem ent educa | ement of the needs of entially or all Plan Deventially or all service needs. Interection and s | ne legislation youth at the otherwise place elopment Gareeds and are nsive case manupport is als | . Also, plat system aced. If yuide for a e at risk canagemes so provid | lease exp point, ar you select additional of deepe ent, psych ed for ea | plain how and how the sted Indirect guidance prenetra niatrist a ach famile | y each of those service.) ation into nd clinica | rices ces, the |
| | program capable | | | | | | Yes [| ☐ No | | | |
| C. PROG | RAM 4 PERFORM | ANCE HI | STORY (| REFER TO | O YOUR MU | JNICIPALITY | 's <mark>STSJ</mark> | P data f | FILES.) | | |
| was n | if any, funding did ot implemented or one (<i>If none, skip t</i> | is anticip | pated to s | | youth, plea | | lone. | as approv | ed in PY | ′ 2020-20 |)21, but |
| | e use the table to 1 2021. Enter zero (0 | | | | t) were se | rved by the | program | between | 10/1/20 | 20 and | |
| | | | , | | | ım Type | | | | | |
| | . _ | _ | | /n: | | ATPDP | / | . —- | | | |
| | pproved Funding | Р | El | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | Total | |
| | TSJP | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| S | TSJP-RTA | 0 | 1 | | | 0 | 0 | 0 | 0 | 1 | |
| Т | otal | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | |

| Based on the program's record of youth served (Q2), do you anticipate this program serving more or less than its |
|--|
| projected capacity on 9/30/2021? Please explain: |

This program is under budgeted capacity due to less RTA arrests than projected.

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2020 and 3/31/2021. Enter zero (0) if not applicable.

| | | Program Type | | | | | | | | | | |
|------------------|------|--------------|--------|---------|----------|------|------|------|--|--|--|--|
| | | | | ATD// | | | | | | | | |
| Approved Funding | Р | EI | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | | | | |
| STSJP | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | | | | |
| STSJP-RTA | 0.00 | 462.00 | | | 0.00 | 0.00 | 0.00 | 0.00 | | | | |

| 5. | How does the average length of service (Q4) compare to what you would expect for that service type? For |
|----|--|
| | ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and |
| | residential placements during the same time period. |

The average length of stay is consistent with expectations. This program will run beyond adjustment or court proceedings if necessary.

| 3. | Will this program's outcomes mee | et the PY 202 | 0-2021 projected | goals by 9/30/2021? |
|----|---|---------------|------------------|---------------------|
| | \boxtimes Yes (If Yes, skip to section D. |) 🗌 Par | tially | No |

- 7. (a) What outcomes are on track to meet the goals set for PY 2020-2021? (b) How will they be met?
- 8. (a) What outcomes are not on track to meet the goals set for PY 2020-2021? (b) Please describe any contributing barriers.
- 9. What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2021-2022?

D. PROGRAM 4 SERVICE PROJECTIONS FOR PY 2021-2022

1. Please use the table to indicate the **projected # youth to be served** by the program for PY 2021-2022. Enter zero (0) if not applicable.

| | | | | Program Type | | | | | | | | |
|------------------|---|----|--------|--------------|----------|------|-----|-----|-------|--|--|--|
| | | | | ATD/ | | | | | | | | |
| Approved Funding | Р | EI | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | Total | | | |
| STSJP | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | |
| STSJP-RTA | 0 | 15 | | | 0 | 0 | 0 | 0 | 15 | | | |
| Total | 0 | 15 | 0 | 0 | 0 | 0 | 0 | 0 | 15 | | | |

PROGRAM 5

A. PROGRAM 5 CONTACT INFORMATION Program 5 Name: Intensive Clinical Case Management (ICCM) Operating Agency: Rehabilitation Support Services Program Mailing Address: 30 Matthews St. Address Line 2: City: Goshen State: NY ZIP Code: 10924 Program Contact's Name: Shirley Johnson Title: Program Director Phone: (845) 615-9020 Ext: Email: sjohnson@rehab.org

B. PROGRAM 5 DESCRIPTION AND TARGET POPULATION

| 1. | as I | amily Support Service PINS. This program of the section 458-m) are | meets the | e legal de | finition of | a Family | Support Se | rvices (l | | | | |
|-----|---|--|------------|-------------|-------------|-----------------|------------------------|----------------------|------------|-----------|------------|---------|
| 2. | | ase check all applica 21-2022: | ble boxe | s below t | o identify | the servic | e types that | will be ut | ilized for | this prog | ram in P | Y |
| | Sī | TSJP STSJP-RTA | | | | | | | | | | |
| | | | Preven | tion (P) | | | | | | | | |
| | | | Early Ir | nterventio | n (EI) | | | | | | | |
| | | | Alterna | tive to De | etention / | Pre-Dispo | sitional Plac | ement (A | TD / ATI | PDP) | | |
| | | | Alterna | tive to Pla | acement | (ATP) | | | | | | |
| | | | Reentry | y / Afterca | are (R / A | ۸) | | | | | | |
| | | | Indirect | Services | 3 | | | | | | | |
| *No | Note: If you indicated this program will operate as an FSS, it cannot provide STSJP-RTA services under this program. | | | | | | | | | | | |
| 3. | | | | | | | | | | | | |
| | All Orange County | | | | | | | | | | | |
| 4. | demonstrate how your program meets each requirement of the legislation. Also, please explain how each of the service types selected in Q2 will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them. (Please refer to the STSJP Annual Plan Development Guide for additional guidance.) Intensive Clinical Case Management services are provided to youth ages 16 and 17 who are arrested and in need of mental health assessment and services. Clinical services, information and referral, family support and other | | | | | | | | | | | |
| | ind | ividualized services a | re provi | ded to pr | event fur | ther involv | ement in th | e juvenil | e justice | system. | Smaller | |
| | cas | eloads enable for a h | igh level | of service | e that are | e focused o | on family pre | eservatio | n. | | | |
| 5. | ls tl | he program capable | of being | replicated | d across r | multiple loc | ations? $oxed{oxtime}$ | Yes [| No | | | |
| C. | PR | OGRAM 5 PERFORM | ANCE HI | STORY (| REFER TO | O YOUR MU | JNICIPALITY | 's <mark>STSJ</mark> | P DATA F | FILES.) | | |
| 1. | was | at, if any, funding dic s not implemented or None (<i>If none, skip t</i> | is anticip | pated to s | | youth, plea | | lone. | as approv | ed in PY | 2020-20 | 21, but |
| 2. | | ase use the table to 1/2021. Enter zero (0 | | | | t) were se | rved by the | program | between | 10/1/202 | 20 and | |
| | | | | | | Progra | am Type | | | | | |
| | | | | | | | ATPDP | | | | | |
| | | Approved Funding | Р | EI | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | Total | |
| | | STSJP | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | | STSJP-RTA | 0 | 1 | | | 0 | 0 | 0 | 0 | 1 | |
| | | Total | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | |
| 3. | proj | sed on the program's jected capacity on 9/ s program is under b | 30/2021 | Please | explain: | | · | | m servin | g more o | r less tha | n its |

4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2020 and 3/31/2021. Enter zero (0) if not applicable.

| | | | | Progra | ım Type | | | |
|------------------|------|--------|--------|---------|----------|------|------|------|
| | | | | ATD/ | | | | |
| Approved Funding | Р | EI | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A |
| STSJP | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| STSJP-RTA | 0.00 | 271.00 | | | 0 | 0.00 | 0.00 | 0 |

| 5. | How does the average length of service (Q4) compare to what you would expect for that service type? For |
|----|--|
| | ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and |
| | residential placements during the same time period. |

Average length of stay is consistent with expectations

| 6. | Will this program's outcomes meet the | PY 2020-2021 | projected goals b | by 9/30/2021? |
|----|--|--------------|-------------------|---------------|
| | \boxtimes Yes (If Yes, skip to section D.) | Partially | ☐ No | |

- 7. (a) What outcomes are on track to meet the goals set for PY 2020-2021? (b) How will they be met?
- 8. (a) What outcomes are not on track to meet the goals set for PY 2020-2021? (b) Please describe any contributing barriers.
- 9. What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2021-2022?

D. PROGRAM 5 SERVICE PROJECTIONS FOR PY 2021-2022

| | Program Type | | | | | | | | |
|------------------|--------------|----|--------|-----------|----------|------|-----|-----|-------|
| | | | | ATD/ATPDP | | | | | |
| Approved Funding | Р | El | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | Total |
| STSJP | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| STSJP-RTA | 0 | 10 | | | 0 | 0 | 0 | 0 | 10 |
| Total | 0 | 10 | 0 | 0 | 0 | 0 | 0 | 0 | 10 |

| Program 6 |
|-----------|
|-----------|

| A. PROGRAM 6 CONTACT INFORMATION | | | | | | | |
|--|--------------------|-----------------------|-----------------|--|--|--|--|
| Program 6 Name: YAP Res | sidential Services | | | | | | |
| Operating Agency: Youth | Advocate Program | | | | | | |
| Program Mailing Address: | 280 Broadway | | | | | | |
| Address Line 2: | | | | | | | |
| City: Newburgh | | State: NY | ZIP Code: 12550 | | | | |
| Program Contact's Name: | Rhonda Green | Title: Regional Direc | ctor | | | | |
| Phone: (845) 565-5035 | Ext: | Email: rgreen@yap | inc.org | | | | |
| B. PROGRAM 6 DESCRIPTION AND TARGET POPULATION | | | | | | | |
| 1. A Family Support Service program (FSS) may ONLY serve youth at risk of becoming, alleged to be, or adjudicated as PINS. This program meets the legal definition of a <i>Family Support Services (FSS) program (Social Services Law Section 458-m)</i> and will operate in this capacity for PY 2021-2022. Yes No | | | | | | | |

| 2. Please check all applicable boxes below to identify the service types that will be utilized for this pr 2021-2022: | | | | | | | this prog | gram in P | Y | | | |
|---|----------|---|------------|------------|--------------|--------------|----------------------|----------------------|----------|------------|------------|---------|
| | S | TSJP STSJP-RTA | | | | | | | | | | |
| | <u> </u> | | Prevent | tion (P) | | | | | | | | |
| | | | | iterventic | n (EI) | | | | | | | |
| | | | - | | . , | Pre-Dispo | sitional Place | ement (A | TD / ATI | PDP) | | |
| | | | | | acement | - | | (| | | | |
| | | | | | are (R / A | ` ' | | | | | | |
| | | | | Services | • | , | | | | | | |
| *Nc | te: | If you indicated this p | orogram v | will opera | te as an | FSS, it car | nnot provide | STSJP-F | RTA serv | rices und | er this pr | ogram. |
| 3. | | ase list the ZIP codes | s this pro | gram will | target: | | | | | | | |
| 4 | | | ا بمائم ما | | famails (fam | used If ve | anaana.d | " \/o o" to | 04 /500 | `\ ba a | | |
| 4. | | scribe the program, ir nonstrate how your p | | | | | | | | | | the |
| | | vice types selected in | | | | | | | | | | |
| | | aid in the reduction oase list them. (Please | | | | | | | | | | es, |
| | YAF | P provides preventati | ve, educ | ational a | nd vocati | onal servic | es to juvenil | le justice | RTA you | ith ages | 16/17. Y | 4P |
| | util | izes Strengthening Fa | amilies, S | eeking S | afety, Pea | aceful Alte | rnatives to T | ough Sit | uations, | Aggressi | on Replac | ement |
| | Tra | ining, Thinking for Ch | iange, Se | ven Chal | lenges, G | irls Circle | and Wise Gu | ys withir | their pr | ogram. | An advoc | ate is |
| | | igned to each youth p | _ | _ | | | _ | • | | | | |
| | | nily. These strategies | are utiliz | zed in an | effort to | prevent y | outh from fu | irther pe | netratio | n into the | e juvenile | |
| | just | tice system. | | | | | | | | | | |
| 5. | ls t | he program capable o | of being r | eplicated | d across r | multiple loc | ations? $oxed{oxed}$ | Yes [| No | | | |
| C. | PR | OGRAM 6 PERFORM | ANCE HIS | STORY (| REFER TO | O YOUR MU | UNICIPALITY | 's <mark>STSJ</mark> | P DATA I | FILES.) | | |
| 1. | Wh | at, if any, funding did | this prog | gram rece | eive in PY | 2020-202 | 21? If the pro | gram wa | s approv | ed in PY | 2020-20 | 21, but |
| | was | s not implemented or | | | | | | | | | | |
| | | None (If none, skip t | o section | D.) | STS | SJP | STSJP-F | RTA | | | | |
| 2. | | ase use the table to r 1/2021. Enter zero (0 | | | | t) were se | rved by the | program | between | 10/1/20 | 20 and | |
| | | | | | | Progra | am Type | | | | | ı |
| | | | | | | | ATPDP | | | | | i |
| | | Approved Funding | Р | El | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | Total | i |
| | | STSJP | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | ı |
| | | STSJP-RTA | 0 | 7 | | | 0 | 0 | 0 | 0 | 7 | ı |
| | | Total | 0 | 7 | 0 | 0 | 0 | 0 | 0 | 0 | 7 | |
| 3. | Bas | sed on the program's | record o | f vouth s | erved (O | 2). do vou | anticipate th | is progra | m servin | a more o | r less tha | an its |
| | | jected capacity on 9/3 | | | | ,, j.u. | | F 3. W | | J | | |
| | Thi | s program is under b | udgeted | capacity | due to le | ss RTA arro | ests than pro | ojected. | | | | |
| | | | | | | | | | | | | |

4. Please use the table to record the average length of service (days) for youth who exited the program between 10/1/2020 and 3/31/2021. Enter zero (0) if not applicable.

| | Program Type | | | | | | | |
|------------------|--------------|-----------|--------|---------|----------|------|------|------|
| | | ATD/ATPDP | | | | | | |
| Approved Funding | Р | EI | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A |
| STSJP | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| STSJP-RTA | 0.00 | 320.00 | | | 0.00 | 0.00 | 0.00 | 0 |

| 5. | How does the average length of service (Q4) compare to what you would expect for that service type? For |
|----|--|
| | ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and |
| | residential placements during the same time period. |

Average length of stay is consistent with expectations. This program will run beyond adjustment or court proceedings if necessary.

| 3. | Will this program's outcomes mee | t the PY 2020-2021 | projected goals | by 9/30/2021? |
|----|--|--------------------|-----------------|---------------|
| | \boxtimes Yes (If Yes, skip to section D.) | | . ∫ No | • |

7. (a) What outcomes are on track to meet the goals set for PY 2020-2021? (b) How will they be met?

(a) What outcomes are not on track to meet the goals set for PY 2020-2021? (b) Please describe any contributing barriers.

What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2021-2022?

D. PROGRAM 6 SERVICE PROJECTIONS FOR PY 2021-2022

1. Please use the table to indicate the projected # youth to be served by the program for PY 2021-2022. Enter zero (0) if not applicable.

| | Program Type | | | | | | | | |
|------------------|--------------|----|--------|---------|----------|------|-----|-----|-------|
| | | | | ATD/ | ATPDP | | | | |
| Approved Funding | Р | El | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | Total |
| STSJP | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| STSJP-RTA | 0 | 25 | | | 0 | 0 | 0 | 0 | 25 |
| Total | 0 | 25 | 0 | 0 | 0 | 0 | 0 | 0 | 25 |

| PROGRAM | 7 | | |
|----------|---|---------|--------|
| A DROOPA | 7 | CONTACT | LUEGON |

| A. PROGRAM 7 CONTACT INFORMATION | | | | | | | |
|---|---|-----------------|-----------------|--|--|--|--|
| Program 7 Name: NAFI Pa | Program 7 Name: NAFI Parenting with Love and Limits Program | | | | | | |
| Operating Agency: North | Operating Agency: North American Family Institute | | | | | | |
| Program Mailing Address: | 30 Mulberry Street | | | | | | |
| Address Line 2: | | | | | | | |
| City: Middletown | | State: NY | ZIP Code: 10940 | | | | |
| Program Contact's Name: | Shatema Smith | Title: Director | | | | | |
| Phone: (845) 652-7273 Ext: Email: shatemasmith@nafi.com | | | | | | | |
| B. PROGRAM 7 DESCRIPTION AND TARGET POPULATION | | | | | | | |

1. A Family Support Service program (FSS) may ONLY serve youth at risk of becoming, alleged to be, or adjudicated as PINS. This program meets the legal definition of a Family Support Services (FSS) program (Social Services Law Section 458-m) and will operate in this capacity for PY 2021-2022.

Yes No

| 2. | Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2021-2022: | | | | | | | | | | | |
|-----|---|---|---|--|---|--|--|--|---|---|---|----------------|
| | STSJP | STSJP-RTA | | | | | | | | | | |
| | | | Alterna Alterna Reentry | ntervention tive to De tive to Pl | etention / acement (are (R / A) | (ATP) | sitional Place | ement (A | TD / ATF | PDP) | | |
| *No | te: If you | indicated this p | rogram | will opera | ite as an F | FSS, it can | not provide | STSJP-F | RTA serv | rices und | er this pr | ogram. |
| 3. | Please lis | t the ZIP codes | s this pro | gram wil | target: | | | | | | | |
| | All Orang | e County | | | | | | | | | | |
| 4. | demonstr service ty will aid in please lis NAFI PLL demonstr problems targets sp PLL utilize with appr | the program, in the reduction of the reduction of them. (Please is an evidence rated effectives and substance pecific risk and es assessment, ropriate RTA youstice system. | rogram r Q2 will of youth of e refer to d-based f ness in si e abuse v protectiv group se | meets ea address detained the STS family ed gnificant while also we factors | ch require the unique and reside JP Annual ucation, s ly reducing reducing s related t | ement of the eneeds of entially or of lending of lending aggressic recidivism to delinque ual coaching aggresoid and aggresoid and coaching aggresoid and aggresoid aggresoid and aggresoid aggresoid and aggresoid aggres | e legislation youth at that otherwise placelopment Gung and therapped and improvency and others gessions to the sessions to th | Also, placed. If your deced. If you de for a coeutic in so, depression familier emote chrougho | ease exp point, ar you select additional terventicesion, AD ily commional and out the p | plain how and how the ted Indirect guidance on mode D, externation d behavious rogram. | reach of nose servect Service.) I which hadizing n. The proble PLL will v | rogram ems. |
| 5. | | gram capable | of being i | replicated | d across n | nultiple loc | ations? | Yes [| No | | | |
| | | 7 PERFORMAN | | | | | | | | | | |
| 1. | What, if a was not in None | iny, funding did mplemented or (<i>If none, skip to</i> se the table to r | this prog is anticip section | gram reco | eive in PY serve no y STS | 2020-202 outh, plea | 1? If the pro se choose N ☑ STSJP-R1 | gram wa lone. ΓΑ | as approv | | |)21, but |
| | 3/31/2021 | 1. Enter zero (0 |) if not a | pplicable | | - | | | | | | |
| | | | | | | | m Type | | | | | |
| | Appr | oved Funding | Р | El | (PINS) | ATD/A (JO/JD) | ATPDP (JD-RTA) | (AO) | ATP | R/A | Total | |
| | STS | JP | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | STS | JP-RTA | 0 | 1 | | | 0 | 0 | 0 | 0 | 1 | |
| | Tota | l | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | |
| 3. | projected | the program's capacity on 9/3 | 30/20213 | ? Please | explain: | | · | | | g more o | or less tha | in its |

| 4. | Please use the table to record the average length of service (days) for youth who exited the program between |
|----|--|
| | 10/1/2020 and 3/31/2021. Enter zero (0) if not applicable. |

| | | | | Program Type | | | | | | | | | |
|------------------|----------------|------|--------|--------------|----------|------|------|------|--|--|--|--|--|
| | | | | ATD// | | | | | | | | | |
| Approved Funding | Р | El | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | | | | | |
| STSJP | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | | | | | |
| STSJP-RTA | 0.00 0.00 0.00 | | | | | | 0.00 | 0.00 | | | | | |

| 5. | How does the average length of service (Q4) compare to what you would expect for that service type? For |
|----|--|
| | ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and |
| | residential placements during the same time period. |

NA. The one youth receiving this service is still active.

| 6. | Will this program's outcomes meet the | PΥ | 2020-2021 | projected goals | by 9/30/2021? |
|----|--|----|-----------|-----------------|---------------|
| | \boxtimes Yes (If Yes, skip to section D.) | | Partially | . ∫ No | • |

- 7. (a) What outcomes are on track to meet the goals set for PY 2020-2021? (b) How will they be met?
- 8. (a) What outcomes are not on track to meet the goals set for PY 2020-2021? (b) Please describe any contributing barriers.
- 9. What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2021-2022?

D. PROGRAM 7 SERVICE PROJECTIONS FOR PY 2021-2022

| | | Program Type | | | | | | | | | | |
|------------------|---|--------------|--------|---------|----------|------|-----|-----|-------|--|--|--|
| | | | | ATD/ | | | | | | | | |
| Approved Funding | Р | El | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | Total | | | |
| STSJP | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | |
| STSJP-RTA | 0 | 2 | | | 0 | 0 | 0 | 0 | 2 | | | |
| Total | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | | | |

| Program 8 | | | | | | | | | | | | |
|---|--------------|---------------------|-----------------|--|--|--|--|--|--|--|--|--|
| A. PROGRAM 8 CONTACT INFORMATION | | | | | | | | | | | | |
| Program 8 Name: NAFI Orange County Family Wrap Around Program | | | | | | | | | | | | |
| Operating Agency: North American Family Instistute | | | | | | | | | | | | |
| Program Mailing Address: 30 Mulberry Street | | | | | | | | | | | | |
| Address Line 2: | | | | | | | | | | | | |
| City: Middletown | | State: NY | ZIP Code: 10940 | | | | | | | | | |
| Program Contact's Name: | Tyler Jansen | Title: Director | | | | | | | | | | |
| Phone: (914) 343-4317 | Ext: | Email: tylerjansen@ | nafi.com | | | | | | | | | |
| B. PROGRAM 8 DESCRIPTION AND TARGET POPULATION | | | | | | | | | | | | |
| 1. A Family Support Service program (FSS) may ONLY serve youth at risk of becoming, alleged to be, or adjudicated as PINS. This program meets the legal definition of a <i>Family Support Services (FSS) program (Social Services Law Section 458-m)</i> and will operate in this capacity for PY 2021-2022. Yes No | | | | | | | | | | | | |

| 2. | Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2021-2022: | | | | | | | | | | | |
|--------------|---|--|--|--|---|---|--|--|--|--|--|---|
| | STSJP | STSJP-RTA | | | | | | | | | | |
| | | | Preventi | ion (P) | | | | | | | | |
| | | | | terventio | n (EI) | | | | | | | |
| | | | - | | | Pre-Dispos | sitional Place | ement (A | TD / ATF | PDP) | | |
| | | | | | acement (| - | | | | / | | |
| | | | | | are (R / A) | , | | | | | | |
| | | | • | Services | ٠, | • | | | | | | |
| *No | te: If you | indicated this p | rogram w | vill operat | te as an F | SS, it can | not provide | STSJP-F | RTA serv | ices und | er this pr | ogram. |
| 3. | Please lis | t the ZIP codes | s this prog | gram will | target: | | | | | | | |
| | All Orang | e County | | | | | | | | | | |
| 4. | demonstr service ty will aid in please lis NAFI Ora compone caregiver commun staff mer juvenile j | the program, in the program, in the how your purpes selected in the reduction of them. (Please ange County Fament for family are sof RTA youth ities while addranters working the ustice system for gram capable of | rogram m Q2 will a If youth d refer to t nily Wrap nd individ have the essing ea cogether f or RTA yo | neets each ddress the etained as the STSJ and treat skills and child's for the facuth. | ch require the unique and reside IP Annual utilizes a ment. Th d support s need for amily's su | ment of the eneeds of entially or of Plan Deve family present program is needed to reass with | e legislation youth at tha otherwise place lopment Gueservation mand is designed to maintain d well being a goal of pr | . Also, plot system aced. If yuide for a nodel and to ensure their childs. | ease exp point, ar ou select dditional I include re that b dren in t TA famil | olain how nd how the ded Indire guidanc s a stron irth pare heir hom y is assig | r each of nose servicect Service.) g clinical ents and innes atea | vices ces, relative n their am of |
| 1. | PROGRA What, if a was not in None | M 8 PERFORMA any, funding did mplemented or (If none, skip to | this prog is anticipal o section | ram rece ated to s | REFER TO eive in PY erve no y | 2020-202 routh, pleas | NICIPALITY 1? If the prose " STSJP-R | s STSJF gram wa None". TA | P DATA F s approv | red in PY | |)21, but |
| C. 1. | PROGRA What, if a was not in ⊠ None Please us | M 8 PERFORMA any, funding did mplemented or | this prog is anticipo o section o ecord ho | ram rece ated to s D.) w many | REFER TO eive in PY erve no y | 2020-202 routh, pleas | NICIPALITY 1? If the prose " STSJP-R | s STSJF gram wa None". TA | P DATA F s approv | red in PY | |)21, but |
| C. 1. | PROGRA What, if a was not in ⊠ None Please us | m 8 PERFORMA iny, funding did implemented or (If none, skip to se the table to r | this prog is anticipo o section o ecord ho | ram rece ated to s D.) w many | REFER TO eive in PY erve no y | 2020-202 Youth, pleas JP [| INICIPALITY 1? If the prose choose " STSJP-R ved by the prosecular. | s STSJF gram wa None". TA | P DATA F s approv | red in PY | |)21, but |
| C. 1. | PROGRA What, if a was not in ⊠ None Please us | m 8 PERFORMA iny, funding did implemented or (If none, skip to se the table to r | this prog is anticipo o section o ecord ho | ram rece ated to s D.) w many | REFER TO eive in PY erve no y | 2020-202 routh, pleas JP [) were ser | NICIPALITY 1? If the prose " STSJP-R | s STSJF gram wa None". TA | P DATA F s approv | red in PY | |)21, but |
| C. 1. | PROGRA What, if a was not in ⊠ None Please us 3/31/202 | m 8 PERFORMA iny, funding did implemented or (If none, skip to se the table to r | this prog is anticipo o section o ecord ho | ram rece ated to s D.) w many | REFER TO eive in PY erve no y | 2020-202 routh, pleas JP [) were ser | INICIPALITY 1? If the prose choose " STSJP-R ved by the prosection of the prosect | s STSJF gram wa None". TA | P DATA F s approv | red in PY | |)21, but |
| C. 1. | PROGRA What, if a was not in ⊠ None Please us 3/31/202 | m 8 PERFORMA iny, funding did implemented or (If none, skip to se the table to r 1. Enter zero (0 | this prog is anticipo o section o ecord ho) if not ap | ram rece ated to s D.) w many oplicable. | REFER TO eive in PY erve no y STS. youth (#) | 2020-202 routh, pleas JP () were ser Progra ATD/A | INICIPALITY 1? If the prose the choose for the choose for the prosection of the pro | s STSJF ogram wa None". TA program | DATA F | red in PY | 20 and |)21, but |
| C. 1. | PROGRA What, if a was not in None Please us 3/31/202 | m 8 PERFORMA iny, funding did implemented or (If none, skip to se the table to r 1. Enter zero (0 | this prog is anticipo o section o ecord ho) if not ap | ram rece ated to s D.) w many oplicable. | REFER TO eive in PY erve no y STS. youth (#) | 2020-202 routh, pleas JP () were ser Progra ATD/A | INICIPALITY 1? If the prose the choose for the choose for the prosection of the pro | s STSJF ogram wa None". TA program | DATA F | red in PY | 20 and | 021, but |
| C. 1. | PROGRA What, if a was not in None Please us 3/31/202 | m 8 PERFORMA Inny, funding did Inny, funding di | this prog is anticipo o section o ecord ho) if not ap | ram rece ated to s D.) w many oplicable. | REFER TO eive in PY erve no y STS. youth (#) | 2020-202 routh, pleas JP () were ser Progra ATD/A | INICIPALITY 1? If the prose the choose for the choose for the prosection of the pro | s STSJF ogram wa None". TA program | DATA F | red in PY | 20 and | 021, but |
| C. 1. | PROGRA What, if a was not in Manager What was not in Manager Washington None Please us 3/31/202 | m 8 PERFORMA Inny, funding did Inny, funding di | this prog is anticipo section is ecord ho if not ap | ram rece ated to s D.) w many oplicable. | REFER TO eive in PY erve no y STS. youth (#) | Progra ATD/A (JO/JD) | INICIPALITY 1? If the prose choose " STSJP-R ved by the prosection of the prosecti | gram wa None". TA program | s approv | red in PY | 20 and Total | |
| 2. 3. | PROGRA What, if a was not in None Please us 3/31/202 | m 8 PERFORMA Inny, funding did Implemented or (If none, skip to se the table to r 1. Enter zero (0 OVER OVER FUNDING JP JP-RTA I the program's | this prog is anticipal of section is ecord horizontal programmer in the programmer i | ram receated to s D.) w many pplicable. El youth se Please e | REFER TO eive in PY erve no y STS youth (#) (PINS) erved (Q2 explain: | Progra ATD/A (JO/JD) 2), do you a | INICIPALITY 1? If the prose choose " STSJP-R ved by the prosection of the prosect | gram wa None". TA program (AO) | between ATP | red in PY 10/1/20: R/A g more o | 20 and Total or less tha | an its |
| 2. 3. | PROGRA What, if a was not in None Please us 3/31/202 | m 8 PERFORMA Iny, funding did Implemented or (If none, skip to se the table to r 1. Enter zero (0 OVED TO THE TENT OF THE TE | this prog is anticipal of section is ecord horizontal programmer in the programmer i | ram receated to s D.) w many pplicable. El youth se Please e | REFER TO eive in PY erve no y STS youth (#) (PINS) erved (Q2 explain: | Progra ATD/A (JO/JD) 2), do you a of service cable. | INICIPALITY 1? If the prose choose " STSJP-R ved by the prosection of the prosect | gram wa None". TA program (AO) | between ATP | red in PY 10/1/20: R/A g more o | 20 and Total or less tha | an its |
| 2. 3. | PROGRA What, if a was not in None Please us 3/31/202 | m 8 PERFORMA Iny, funding did Implemented or (If none, skip to se the table to r 1. Enter zero (0 OVED TO THE TENT OF THE TE | this prog is anticipal of section is ecord horizontal programmer in the programmer i | ram receated to s D.) w many pplicable. El youth se Please e | REFER TO eive in PY erve no y STS youth (#) (PINS) erved (Q2 explain: | Progra ATD/A (JO/JD) Progra ATD/A (JO/JD) Progra ATD/A (JO/JD) Progra ATD/A (JO/JD) | INICIPALITY 1? If the prose choose " STSJP-R ved by the prosection of the prosecti | gram wa None". TA program (AO) | between ATP | red in PY 10/1/20: R/A g more o | 20 and Total or less tha | an its |
| 2. 3. | PROGRA What, if a was not in None Please us 3/31/202 Appr STS. Tota Based on projected Please us 10/1/2020 | m 8 PERFORMA Iny, funding did Implemented or (If none, skip to se the table to r 1. Enter zero (0 OVED TO THE TENT OF THE TE | this prog is anticipal of section is ecord horizontal programmer in the programmer i | ram receated to s D.) w many pplicable. El youth se Please e | REFER TO eive in PY erve no y STS youth (#) (PINS) erved (Q2 explain: | Progra ATD/A (JO/JD) Progra ATD/A (JO/JD) Progra ATD/A (JO/JD) Progra ATD/A (JO/JD) | INICIPALITY 1? If the prose choose " STSJP-R ved by the process of the process | gram wa None". TA program (AO) | between ATP | red in PY 10/1/20: R/A g more o | 20 and Total or less tha | an its |
| 2. 3. | PROGRA What, if a was not in None Please us 3/31/202 Appr STS. Tota Based on projected Please us 10/1/2020 | w 8 PERFORMA Inny, funding did Inny, funding di | this prog is anticipe of section in ecord horomorphisms and programmer in the progra | ram receated to s D.) w many pplicable. El youth se Please e e average ero (0) if | REFER TO eive in PY erve no y STS. youth (#) (PINS) erved (Q2 explain: e length of not applie | Progra ATD/A (JO/JD) 2), do you a of service cable. Progra ATD/A | INICIPALITY 1? If the prose choose " STSJP-R ved by the prosection of the prosect | gram wa None". TA program (AO) | DATA F s approve between ATP m serving c exited t | R/A g more of | 20 and Total or less tha | an its |

| 5. | ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and residential placements during the same time period. | | | | | | | | | | | |
|----------|--|---|----------|---------|------------------------|---------|-------------------|----------|----------|------|-------|--|
| 6. | | I this program's outco Yes <i>(If Yes, skip to</i> s | | | ′ 2020-20 Partially | | ed goals by No | 9/30/202 | 1? | | | |
| 7. | (a) What outcomes are on track to meet the goals set for PY 2020-2021? (b) How will they be met? | | | | | | | | | | | |
| 8. | . (a) What outcomes are not on track to meet the goals set for PY 2020-2021? (b) Please describe any contributing barriers. | | | | | | | | | | | |
| 9. | What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2021-2022? | | | | | | | | | | | |
| D. | PR | OGRAM 8 SERVICE F | ROJECT | IONS FO | R PY 20 | 21-2022 | | | | | | |
| 1. | PROGRAM 8 SERVICE PROJECTIONS FOR PY 2021-2022 Please use the table to indicate the projected # youth to be served by the program for PY 2021-2022. Enter zero (0) if not applicable. | | | | | | | | | | | |
| | | | | | | | am Type | | | | | |
| | | | _ | | | | ATPDP | (1.5) | | | | |
| | | Approved Funding | P | El | (PINS) | (JO/JD) | | (AO) | ATP | R/A | Total | |
| | | STSJP | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | | STSJP-RTA | 0 | 2 | | | 0 | 0 | 0 | 0 | 2 | |
| | | Total | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | |
| | OGF | | | | | | | | | | | |
| | | OGRAM 9 CONTACT | | | | | | | | | | |
| | _ | m 9 Name: Safe Harb | | | | Program | | | | | | |
| <u> </u> | | ing Agency: Fearless! | | • | nc. | | | | | | | |
| | | m Mailing Address: Po | O Box 64 | 9 | | | | | | | | |
| Ad | dres | s Line 2: | | | | | | | | | | |
| Cit | y: Ne | ewburgh | | | | Sta | te: NY | ZIP | Code: 12 | 2551 | | |
| Pro | Program Contact's Name: Pam O'Dea Title: Collaborative Program Director | | | | | | | | | | | |
| Ph | Phone: (845) 562-5364 Ext: 126 Email: podea@fearlesshv.org | | | | | | | | | | | |
| B. | B. PROGRAM 9 DESCRIPTION AND TARGET POPULATION | | | | | | | | | | | |
| 1. | | | | | | | | | | | | |

| 2. | Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2021-2022: | | | | | | | | | | | |
|-----|--|--|-------------|------------|------------|--------------|----------------|----------------------|-----------|-----------|------------|---------|
| | STSJP | STSJP-RTA | | | | | | | | | | |
| | \boxtimes | | Prevent | tion (P) | | | | | | | | |
| | | | Early In | terventic | n (EI) | | | | | | | |
| | | | Alternat | tive to De | etention / | Pre-Dispo | sitional Place | ement (A | ATD / ATI | PDP) | | |
| | | | Alternat | tive to Pl | acement | (ATP) | | | | | | |
| | | | Reentry | / / Afterc | are (R / A | ۸) | | | | | | |
| | | | Indirect | Services | S | | | | | | | |
| *No | ote: If you indicated this program will operate as an FSS, it cannot provide STSJP-RTA services under this program. | | | | | | | | | | | |
| 3. | Please list the ZIP codes this program will target: | | | | | | | | | | | |
| | All Orang | • | | | | 1.16 | | " | 04 (506 | N 1 | | |
| 4. | Describe the program, including how it is family focused. If you answered "Yes" to Q1 (FSS), be sure to demonstrate how your program meets each requirement of the legislation. Also, please explain how each of the service types selected in Q2 will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them. (Please refer to the STSJP Annual Plan Development Guide for additional guidance.) The Safe Harbor Trafficking Prevention Program staff provide supportive and comprehensive services to youth in | | | | | | | | | | | |
| | The Safe | Harbor Traffick | ing Preve | ention Pr | rogram st | aff provide | supportive | and con | nprehens | ive servi | ces to you | ıth in |
| | Orange County who are identified as being trafficked or vulnerable to trafficking. Fearless! Anti- Trafficking staff | | | | | | | | | | | |
| | lead the Orange County Safe Harbor program with a primary focus of 'Eliminating Exploitation, Empowering Our | | | | | | | | | | | |
| | | ulnerable and | | • | • | | • | | • | • | | ay |
| | • | . Safe Harbor v | | - | | • | | | | | | |
| | intervent | ipport to traffici ion. | ckea you | tn and ta | milies to | decrease i | nstances of | runaway | benavio | r and Fai | nily Cour | τ |
| 5. | Is the pro | gram capable | of being r | eplicated | d across r | multiple loc | ations? | Yes | ☐ No | | | |
| C. | PROGRA | M 9 PERFORM | ANCE HI | STORY (| REFER TO | O YOUR M | JNICIPALITY | 's <mark>STSJ</mark> | P DATA I | FILES.) | | |
| 1. | was not in | ny, funding did mplemented or (<i>If none, skip t</i> e | is anticip | ated to | | youth, plea | | lone. | as approv | ved in PY | ′ 2020-20 | 21, but |
| 2. | | se the table to | | | | #) were se | rved by the | program | between | 10/1/20 | 20 and | |
| | 3/31/202 | 1. Enter zero (0 |) if not ap | oplicable | • | | | | | | | |
| | | | | | | | ım Type | | • | ı | | |
| | A | | - | | (DIMO) | | ATPDP | (40) | , TD | D/A | Tatal | |
| | | oved Funding | Р | El | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | Total | |
| | STS | | | | | | | | | | | |
| | | JP-RTA | | | | | | | | | | |
| | Tota | | | | | | | | | | | |
| 3. | | the program's capacity on 9/ | | | | 2), do you | anticipate th | is progra | ım servin | g more c | r less tha | n its |

| 4. | | ase use the table to re /2020 and 3/31/2021 | | | | | (days) for y | outh who | exited t | he progi | am betw | reen |
|------|--|--|------------|-----------------|----------|-----------|---------------|-----------|----------|----------|-----------|---------|
| | | | | | | Progr | am Type | | | | ٦ | |
| | | | | | | | ATPDP | | | | | |
| | | Approved Funding | Р | EI | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | | |
| | | STSJP | | | | | | | | | | |
| I | | STSJP-RTA | | | | | | | | | | |
| 5. | ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and residential placements during the same time period. | | | | | | | | | | | |
| 6. | ☐ Yes (If Yes, skip to section D.) ☐ Partially ☐ No | | | | | | | | | | | |
| 7. | . (a) What outcomes are on track to meet the goals set for PY 2020-2021? (b) How will they be met? | | | | | | | | | | | |
| 8. | . (a) What outcomes are not on track to meet the goals set for PY 2020-2021? (b) Please describe any contributing barriers. | | | | | | | | | | | |
| 9. | 9. What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2021-2022? | | | | | | | | | | | |
| D. | D. PROGRAM 9 SERVICE PROJECTIONS FOR PY 2021-2022 | | | | | | | | | | | |
| 1. | | ase use the table to ir f not applicable. | ndicate th | ne proje | cted# yo | uth to be | served by the | ne progra | m for PY | 2021-2 | 022. Ente | er zero |
| | Г | T | | | | Progra | m Type | | | | | 1 |
| | | ŀ | | | | | TPDP | | | | | |
| | | Approved Funding | Р | EI | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | Total | |
| | | STSJP | 75 | | | | | | | | 75 | |
| | | STSJP-RTA | | | | | | | | | | |
| | | Total | 75 | | | | | | | | 75 | |
| PR | OGR/ | AM 10 | | | | | | | | | | |
| A. | PRO | GRAM 10 CONTACT | INFORM | IATION | | | | | | | | |
| Pro | gram | n 10 Name: | | | | | | | | | | |
| Ор | eratir | ng Agency: | | | | | | | | | | |
| Pro | gram | n Mailing Address: | | | | | | | | | | |
| Add | dress | Line 2: | | | | | | | | | | |
| City | / : | | | | | Stat | e: NY | ZIP (| Code: | | | |
| Pro | gram | Contact's Name: | | | | Title | | | | | | |
| Pho | one: (| () E | xt: | | | Ema | il: | | | | | |
| B. | PRO | GRAM 10 DESCRIPT | TION AND | TARGE | T POPUL | ATION | | | | | | |
| 1. | | | | | | | | | | | | |

| 2. | Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2021-2022: | | | | | | | | | | | |
|----|--|-----------------------------------|------------|------------|------------|-------------|-----------------|-----------|------------|-----------|------------|--------|
| | STSJP | STSJP-RTA | | | | | | | | | | |
| | | | Prevent | ion (P) | | | | | | | | |
| | | | Early Int | terventio | n (EI) | | | | | | | |
| | | | Alternat | ive to De | etention / | Pre-Dispo | sitional Place | ement (A | TD / ATF | PDP) | | |
| | | | | | acement | • • | | | | | | |
| | | | • | | are (R / A | .) | | | | | | |
| | | | | Services | | | | | | | | |
| | | indicated this p | | | | FSS, it car | nnot provide | STSJP-F | RTA serv | ices und | er this pr | ogram. |
| 3. | Please lis | t the ZIP codes | s this pro | gram will | target: | | | | | | | |
| | | the program, in | | | | | | | | | | 46.0 |
| | | ate how your p pes selected in | | | | | | | | | | |
| | will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, | | | | | | | | | | | |
| | please list them. (Please refer to the STSJP Annual Plan Development Guide for additional guidance.) | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | Is the program capable of being replicated across multiple locations? Yes No PROGRAM 10 PERFORMANCE HISTORY (REFER TO YOUR MUNICIPALITY'S STSJP DATA FILES.) | | | | | | | | | | | |
| | | | | | • | | | | | | | |
| | . What, if any, funding did this program receive in PY 2020-2021? If the program was approved in PY 2020-2021, but was not implemented or is anticipated to serve no youth, please choose "None". None (If none, skip to section D.) STSJP STSJP-RTA | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | , | | <u> </u> | | D | T | | | | | Ì |
| | | | | | | | m Type ATPDP | | | | | |
| | Appr | oved Funding | Р | EI | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | Total | |
| | STS | | | | (1110) | (00.00) | (== ::::,) | (110) | | | | |
| | | JP-RTA | | | | | | | | | | |
| | Total | | | | | | | | | | | |
| | | | | | | | | | | | | |
| 3. | | the program's capacity on 9/3 | | | | 2), do you | anticipate th | is progra | m servin | g more c | r less tha | an its |
| | | | | | | | | | | | | |
| 4. | | se the table to r and 3/31/202 | | | | | e (days) for y | youth who | o exited | the progr | am betw | een |
| | | | | | | Progr | am Type | | | | 7 | |
| | | | | | | ATD, | /ATPDP | | | | 7 | |
| | | roved Funding | Р | EI | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | 4 | |
| | STS | | | | | | | | | | _ | |
| | STS | SJP-RTA | | | | | | | | | | |
| 5. | How does | the average le | ength of s | service (0 | Q4) comp | are to wha | at you would | expect fo | or that se | rvice typ | e? For | |

5. How does the average length of service (Q4) compare to what you would expect for that service type? For ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and residential placements during the same time period.

| 6. | Wil | I this program's outco Yes (If Yes, skip to s | | | / 2020-20 ☐ Partially | | ted goals by ☐ No | 9/30/202 | 1? | | | |
|-----|---|--|------------|-----------------|--------------------------|------------------|----------------------|---------------------|-------------|----------|--------------------|--|
| 7. | (a) | What outcomes are o | on track t | o meet t | he goals s | set for PY | 2020-2021? | (b) How | will they | be met? | | |
| 8. | barriers. | | | | | | | | | | | |
| 9. | What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2021-2022? PROGRAM 10 SERVICE PROJECTIONS FOR PY 2021-2022 | | | | | | | | | | | |
| D. | PR | OGRAM 10 SERVICE | PROJEC | TIONS F | OR PY 20 | 021-2022 | | | | | | |
| 1. | | ase use the table to i if not applicable. | ndicate t | he proje | cted # yo | outh to be | e served by t | he progra | am for P | Y 2021-2 | 022. Enter zero | |
| | Program Type ATD/ATPDP | | | | | | | | | | | |
| | | | | | | | _ | | | | | |
| | | Approved Funding | Р | EI | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | Total | |
| | | STSJP | | | | | | | | | | |
| | | STSJP-RTA | | | | | | | | | | |
| | | Total | | | | | | | | | | |
| | | | | | | | | | _ | | | |
| PR | OGF | RAM 11 | | | | | | | | | | |
| A. | PR | OGRAM 11 CONTACT | T INFOR | MATION | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | s Line 2: | | | | | | | | | | |
| | | 0 1 11 11 | | | | | | ZIP | Code: | | | |
| | | | | | | | | | | | | |
| | | · / | | D TABOR | T Donu | | iaii: | | | | | |
| | | | | | | | 41 4 1 | | . ,, | 1.4 | P P 4 1 | |
| 1. | as | PINS. This program r | neets the | e legal de | efinition of | a Famil y | / Support Se | er <u>vi</u> ces (l | FSS) pro | gram (S | | |
| 2. | | | ble boxe | s below t | o identify | the servi | ce types that | will be ut | tilized for | this pro | gram in PY | |
| | S | TSJP STSJP-RTA | | | | | | | | | | |
| | | | Preven | tion (P) | | | | | | | | |
| | Early Intervention (EI) | | | | | | | | | | | |
| | ☐ ☐ Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP) | | | | | | | | | | | |
| | ☐ Alternative to Placement (ATP) | | | | | | | | | | | |
| | | | | | • | a) | | | | | | |
| *NI | Approved Funding P EI (PINS) (JO/JD) (JD-RTA) (AO) ATP R/A Total STSJP STSJP-RTA | | | | | | | | | | | |
| | | <u> </u> | | | | 1 00, IL UZ | unioi provide | O I OJF-I | INIA SEIV | nocs und | iei tilis program. | |
| 3. | Ple | ase list the ZIP codes | s this pro | gram wil | I target: | | | | | | | |

| 4. | Describe the program, in demonstrate how your program service types selected in will aid in the reduction of please list them. (Please | orogram non Q2 will a cof youth co | neets ea address detained | ch require the unique and resid | ement of the e needs of entially or | ne legislation youth at that otherwise pl | . Also, ple at system aced. If yo | ease expl point, and ou selecte | ain how d how the ed Indire | each of the ose services ct Services, | | | |
|----|--|------------------------------------|---------------------------------|---------------------------------------|---|---|---|---------------------------------------|-----------------------------------|---------------------------------------|--|--|--|
| 5. | Is the program capable | of being r | eplicated | d across r | nultiple loc | ations? |] Yes [| ☐ No | | | | | |
| C. | PROGRAM 11 PERFOR | MANCE H | IISTORY | (REFER | TO YOUR I | <i>MUNICIPALIT</i> | y's STSJ | IP DATA I | FILES.) | | | | |
| 1. | but was not implemente None (<i>If none, skip t</i> | d or is an | ticipated | to serve | no youth, JP | please choo | se None. | | | | | | |
| 2. | Please use the table to 3/31/2021. Enter zero (0 | | | | | • | program t | oetween ' | 10/1/202 | 0 and | | | |
| | | | | | | ım Type | | | | | | | |
| | ATD/ATPDP | | | | | | | | | | | | |
| | Approved Funding P EI (PINS) (JO/JD) (JD-RTA) (AO) ATP R/A Total | | | | | | | | | | | | |
| | STSJP | | | | | | | | | | | | |
| | STSJP-RTA | | | | | | | | | | | | |
| | Total | | | | | | | | | | | | |
| | Based on the program's projected capacity on 9/ Please use the table to 10/1/2020 and 3/31/202 | /30/2021? record the | Please e averaç | explain: ge length | of service | | | | | | | | |
| | | | | | Prog | ram Type | | | | 7 | | | |
| | | | | | |)/ATPDP | | | | 7 | | | |
| | Approved Funding | Р | El | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | _ | | | |
| | STSJP | | | | | | | | | | | | |
| | STSJP-RTA | | | | | | | | | | | | |
| 5. | How does the average I ATD/ATPDP and ATP s residential placements of | ervice typ | oes, com | pare with | the avera | | | | | | | | |
| 6. | Will this program's outco | | | ∕ 2020-20 ☐ Partially | | ed goals by No | 9/30/2021 | ? | | | | | |
| 7. | (a) What outcomes are | on track t | o meet t | he goals s | set for PY | 2020-2021? | (b) How v | vill they b | e met? | | | | |
| 8. | (a) What outcomes are barriers. | not on tra | ck to me | eet the go | als set for | PY 2020-20 | 21? (b) Pl | ease des | cribe an | y contributing | | | |
| 9. | What changes have bee desired goals for PY 202 | | | ome the b | arriers ide | ntified in Q8 | , so that th | ne progra | m can a | chieve its | | | |
| D. | PROGRAM 11 SERVICE | PROJEC | TIONS F | OR PY 20 | 021-2022 | | | | | | | | |

| | | | | Progra | am Type | | | | |
|------------------|---|----|--------|---------|----------|------|-----|-----|-------|
| | | | | ATD/ | ATPDP | | | | |
| Approved Funding | Р | El | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | Total |
| STSJP | | | | | | | | | |
| STSJP-RTA | | | | | | | | | |
| Total | | | | | | | | | |

| Program 12 | | |
|--|------------------------------|--------------------------------------|
| A. PROGRAM 12 CONTACT INFORMATION | | |
| Program 12 Name: | | |
| Operating Agency: | | |
| Program Mailing Address: | | |
| Address Line 2: | | |
| City: | State: NY | ZIP Code: |
| Program Contact's Name: | Title: | |
| Phone: () Ext: | Email: | |
| B. PROGRAM 12 DESCRIPTION AND TARGET POPULATION | N | |
| A Family Support Service program (FSS) may ONLY se as PINS. This program meets the legal definition of a Fa Law Section 458-m) and will operate in this capacity for | amily Support Se <u>rv</u> i | ces (FSS) program (Social Services |
| 2. Please check all applicable boxes below to identify the 2021-2022: | service types that will | be utilized for this program in PY |
| STSJP STSJP-RTA | | |
| Prevention (P) | | |
| ☐ ☐ Early Intervention (EI) | | |
| Alternative to Detention / Pre- | • | ent (ATD / ATPDP) |
| Alternative to Placement (ATF | ') | |
| Reentry / Aftercare (R / A) | | |
| Indirect Services | | |
| *Note: If you indicated this program will operate as an FSS | it cannot provide ST | SJP-RTA services under this program. |
| 3. Please list the ZIP codes this program will target: | | |
| 4. Describe the program, including how it is family focused | | |
| demonstrate how your program meets each requiremen | | |
| service types selected in Q2 will address the unique new will aid in the reduction of youth detained and residential | | |
| please list them. (Please refer to the STSJP Annual Pla | | |
| piedse list them. (Fledse refer to the OTOSI Almadi Flat | 1 Development Guide | o for additional guidance. |
| 5. Is the program capable of being replicated across multip | ole locations? | es 🗌 No |
| C. PROGRAM 12 PERFORMANCE HISTORY (REFER TO Y | | |
| 1. What, if any, funding did this program receive in PY 202 | | , |
| was not implemented or is anticipated to serve no youth | | |
| None (If none skin to section D.) | ☐ STS IP-RTΔ | |

| 2. | Please use the table to record how many youth (#) were served by the program between 10/1/2020 and |
|----|--|
| | 3/31/2021. Enter zero (0) if not applicable. |

| | | | | Progra | am Type | | | | |
|------------------|---|----|--------|---------|----------|------|-----|-----|-------|
| | | | | ATD/ | ATPDP | | | | |
| Approved Funding | Р | El | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | Total |
| STSJP | | | | | | | | | |
| STSJP-RTA | | | | | | | | | |
| Total | | | | | | | | | |

- 3. Based on the program's record of youth served (Q2), do you anticipate this program serving more or less than its projected capacity on 9/30/2021? Please explain:
- 4. Please use the table to record the **average length of service (days)** for youth who exited the program between 10/1/2020 and 3/31/2021. Enter zero (0) if not applicable.

| | | Program Type | | | | | | | | |
|------------------|---|--------------|--------|---------|----------|------|-----|-----|--|--|
| | | | | | | | | | | |
| Approved Funding | Р | El | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | | |
| STSJP | | | | | | | | | | |
| STSJP-RTA | | | | | | | | | | |

- 5. How does the average length of service (Q4) compare to what you would expect for that service type? For ATD/ATPDP and ATP service types, compare with the average length of stay for youth who were in detention and residential placements during the same time period.
- 6. Will this program's outcomes meet the PY 2020-2021 projected goals by 9/30/2021?
 - ☐ Yes (If Yes, skip to section D.) ☐ Partially ☐ No
- '. (a) What outcomes are on track to meet the goals set for PY 2020-2021? (b) How will they be met?
- 8. (a) What outcomes are not on track to meet the goals set for PY 2020-2021? (b) Please describe any contributing barriers.
- 9. What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2021-2022?

D. PROGRAM 12 SERVICE PROJECTIONS FOR PY 2021-2022

| | | | | Progra | am Type | | | | |
|------------------|---|----|--------|-----------|----------|------|-----|-----|-------|
| | | | | ATD/ATPDP | | | | | |
| Approved Funding | Р | El | (PINS) | (JO/JD) | (JD-RTA) | (AO) | ATP | R/A | Total |
| STSJP | | | | | | | | | |
| STSJP-RTA | | | | | | | | | |
| Total | | | | | | | | | |

PART III - Goals for PY 2021-2022 Please set the municipality's goals for its programs to achieve in PY 2021-2022. State-required outcomes have been included with space for you to identify what programs in Part II-Program Details will serve youth within each service domain. Goals are focused by service type and should reflect the percentage of youth expected to achieve the outcome described. Note: Outcomes are only recorded for youth once they have left the program; this may represent a subset of all the youth served during the period. Goals should reflect high, yet realistic, expectations for the programs. **PREVENTION** (Programs \square 1 \square 2 \square 3 \square 4 \square 5 \square 6 \square 7 \square 8 \boxtimes 9 \square 10 \square 11 \square 12 \square N/A) **STSJP STSJP Outcomes RTA** 90 % of youth will have no PINS referrals during service engagement 75 % of youth will have no truancies during service engagement 75 % % of youth will have no school suspensions during service engagement 90 % % of youth will have no arrests or probation intakes during service engagement % % 90 of youth will be able to identify at least one accessible, positive adult connection % of youth will be engaged in at least one positive community activity 90 % 75 % of youth will comply with program rules 75 % % of youth will attend at least 90% of programming If goal is set below 70% for any outcome please explain: **EARLY INTERVENTION** (Programs \boxtimes 1 \boxtimes 2 \square 3 \boxtimes 4 \boxtimes 5 \boxtimes 6 \boxtimes 7 \boxtimes 8 \square 9 \square 10 \square 11 \square 12 \square N/A) **STSJP STSJP Outcomes RTA** of youth will have no PINS referrals during service engagement 90 % 90 of youth will have no truancies during service engagement % 75 % 75 of youth will have no school suspensions during service engagement 75 75 % of youth will have no arrests or probation intakes during service engagement 90 % 90 % % of youth will have their cases successfully adjusted/diverted during service engagement 90 % 90 % of youth will be able to identify at least one accessible, positive adult connection 90 % 90 % of youth will be engaged in at least one positive community activity 80 % 80 % of youth will comply with program rules 90 % 90 of youth will attend at least 90% of programming 75 % 75 If goal is set below 70% for any outcome please explain: ALTERNATIVE TO DETENTION / PRE-DISPOSITIONAL PLACEMENT (Programs \square 1 \square 2 \square 3 \square 4 \square 5 \square 6 \square 7 \square 8 \square 9 \square 10 \square 11 \square 12 \square N/A) **STSJP STSJP Outcomes RTA** of youth will have no missed court appearances during service engagement % of youth will have no warrants issued during service engagement % % of youth will have no arrests or probation intakes during service engagement % of youth will have no detention or jail admissions during service engagement % % of PINS will have no pre-dispositional placements during service engagement % % of youth will be able to identify at least one accessible, positive adult connection % of youth will be engaged in at least one positive community activity % %

%

% % of youth will comply with program rules

of youth will attend at least 90% of programming

| If goal is set below 70% for any outcome please explain: | | | | | | | | | | | |
|--|-----------------|--|--|--|--|--|--|--|--|--|--|
| ALTERNATIVE TO PLACEMENT | | | | | | | | | | | |
| (Programs \square | 1 2 3 | ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ 12 ☐ N/A) | | | | | | | | | |
| STSJP | STSJP RTA | Outcomes | | | | | | | | | |
| % | % | of youth will have no warrants issued during service engagement | | | | | | | | | |
| % | % | of youth will have no arrests or probation intakes during service engagement | | | | | | | | | |
| % | % | of youth will have no detention or jail admissions during service engagement | | | | | | | | | |
| % | % | of PINS will have no pre-dispositional placements during service engagement | | | | | | | | | |
| % | % | of youth will have no violations of probation filed during service engagement | | | | | | | | | |
| % | % | of youth will have no new placements during service engagement | | | | | | | | | |
| % of youth will be able to identify at least one accessible, positive adult connection | | | | | | | | | | | |
| % | % | of youth will be engaged in at least one positive community activity | | | | | | | | | |
| % | % | of youth will comply with program rules | | | | | | | | | |
| % | % | of youth will attend at least 90 percent of programming | | | | | | | | | |
| If goal is set be | elow 70 percen | t for any outcome please explain: | | | | | | | | | |
| REENTRY / AFTE (Programs | ERCARE 1 | □ 4 □ 5 □ 6 □ 7 □ 8 □ 9 □ 10 □ 11 □ 12 □ N/A) | | | | | | | | | |
| STSJP | STSJP RTA | Outcomes | | | | | | | | | |
| % | % | of youth will have no warrants issued during service engagement | | | | | | | | | |
| % | % | of youth will have no arrests or probation intakes during service engagement | | | | | | | | | |
| % | % | of youth will have no detention or jail admissions during service engagement | | | | | | | | | |
| % | % | of PINS will have no pre-dispositional placements during service engagement | | | | | | | | | |
| % | % | of youth will have no new placements during service engagement | | | | | | | | | |
| % | % | of youth will have no returns to their previous placements during service engagement | | | | | | | | | |
| % | % | of youth will be able to identify at least one accessible, positive adult connection | | | | | | | | | |
| % | % | of youth will be engaged in at least one positive community activity | | | | | | | | | |
| % of youth will comply with program rules | | | | | | | | | | | |
| % | % | of youth will attend at least 90% of programming | | | | | | | | | |
| If goal is set be | elow 70% for ar | ny outcome please explain: | | | | | | | | | |

| | PART IV – FUNDING | | | | | | | |
|----|---|------------------------------------|----------------------|--------------------------------|-----------------------------|-------------------------|-------------------------|--------------------------|
| A. | ANTICIPATED PROGRAM | EXPENSES AN | ID FUNDING I | DISTRIBUTIO | N | | | |
| | | | | STS | IP | | | STSJP- RTA |
| | ogram Name d Service Types | Detention Allocation Shifted | Approved Rollover | PY21-22 STSJP Allocation | Total Expenses (100%) | Local Share (38%) | State Share (62%) | State Share (100%) |
| 1 | Family Engagement Specialist (MHJJ) | \$ 52,591.68 | \$12,297.26 | \$27,500.98 | \$149,016.00 | \$56,626.08 | \$92,389.92 | \$146,094.00 |
| | Prevention | | | | | | | |
| | Early Intervention | \$52,591.68 | \$12,297.26 | \$27,500.98 | \$149,016.00 | \$56,626.08 | \$92,389.92 | \$146,094.00 |
| | ATD/ATPDP | | | | | | | |
| | ATP | | | | | | | |
| | Reentry/Aftercare | | | | | | | |
| | Indirect | | | | | | | |
| 2 | Family Keys | \$153,694.56 | \$35,937.65 | \$80,369.17 | \$435,486.09 | \$165,484.71 | \$270,001.38 | |
| | Prevention | | | | | | | |
| | Early Intervention | \$153,694.56 | \$35,937.65 | \$80,369.17 | \$435,486.09 | \$165,484.71 | \$270,001.38 | |
| | ATD/ATPDP | | | | | | | |
| | ATP | | | | | | | |
| | Reentry/Aftercare | | | | | | | |
| | Indirect | | | | | | | |
| 3 | Orange County Children's Cross Systems Team Coordinator/Raise the Age Coordinator | \$37,229.72 | \$8,705.24 | \$19,467.96 | \$105,488.59 | \$40,085.67 | \$65,402.9 2 | \$51,932.00 |
| | Prevention | | | | | | | |
| | Early Intervention | | | | | | | |
| | ATD/ATPDP | | | | | | | |
| | ATP | | | | | | | |
| | Reentry/Aftercare | | | | | | | |
| | Indirect | \$37,229.72 | \$8,705.24 | \$19,467.96 | \$105,488.59 | \$40,085.67 | \$65,402.92 | \$51,932.00 |
| 4 | Astor Family Services and Support | | | | | | | \$75,000.00 |
| | Prevention | | | | | | | |
| | Early Intervention | | | | | | | \$75,000.00 |
| | ATD/ATPDP | | | | | | | |
| | ATP | | | | | | | |
| | Reentry/Aftercare | | | | | | | |
| | Indirect | | | | | | | |
| 5 | Intensive Clinical Case Management | | | | | | | \$25,000.00 |
| | Prevention | \$0.00 | | | | | | |

| Early Intervention | | | | \$25,000.00 |
|--------------------|--|--|--|-------------|
| ATD/ATPDP | | | | |
| ATP | | | | |
| Reentry/Aftercare | | | | |
| Indirect | | | | |

| | | | | STS | SJP | | | STSJP- RTA |
|---|---|------------------------------------|----------------------|--------------------------------|-----------------------------|-------------------------|-------------------------|-----------------------------|
| | gram Name I Service Types | Detention Allocation Shifted | Approved Rollover | PY21-22 STSJP Allocation | Total Expenses (100%) | Local Share (38%) | State Share (62%) | State Share (100%) |
| 6 | YAP Residential Services | | | | | | | \$212,500.00 |
| | Prevention | | | | | | | |
| | Early Intervention | | | | | | | \$212,500.00 |
| | ATD/ATPDP | | | | | | | |
| | ATP | | | | | | | |
| | Reentry/Aftercare | | | | | | | |
| | Indirect | | | | | | | |
| 7 | NAFI Parenting with Love and Limits Program | | | | | | | \$31 ,3 81.00 |
| | Prevention | | | | | | | |
| | Early Intervention | | | | | | | \$31,381.00 |
| | ATD/ATPDP | | | | | | | |
| | ATP | | | | | | | |
| | Reentry/Aftercare | | | | | | | |
| | Indirect | | | | | | | |
| 8 | NAFI Orange County Family Wrap Around Program | | | | | | | \$41,729.00 |
| | Prevention | | | | | | | |
| | Early Intervention | | | | | | | \$41,729.00 |
| | ATD/ATPDP | | | | | | | |
| | ATP | | | | | | | |
| | Reentry/Aftercare | | | | | | | |
| | Indirect | | | | | | | |
| 9 | Safe Harbor Trafficking Prevention Program | \$13,086.04 | \$3,059.85 | \$6,842.89 | \$37,078.67 | \$ 14,089.89 | \$22,988.78 | |
| | Prevention | \$13,086.04 | \$3,059.85 | \$6,842.89 | \$37,078.67 | \$14,089.89 | \$22,988.78 | |
| | Early Intervention | | | | | _ | | |
| | ATD/ATPDP | | | | | | | |
| | ATP | | | | | | | |
| | Reentry/Aftercare | | | | | | | |

| Indirect | | | | |
|--------------------|--|--|--|--|
| 10 | | | | |
| Prevention | | | | |
| Early Intervention | | | | |
| ATD/ATPDP | | | | |
| ATP | | | | |
| Reentry/Aftercare | | | | |
| Indirect | | | | |

| | STSJP | | | STSJP- RTA | | | |
|--------------------------------|------------------------------------|----------------------|--------------------------------|-----------------------------|-------------------------|-------------------------|--------------------------|
| Program Name and Service Types | Detention Allocation Shifted | Approved Rollover | PY21-22 STSJP Allocation | Total Expenses (100%) | Local Share (38%) | State Share (62%) | State Share (100%) |
| 11 | | | | | | | |
| Prevention | | | | | | | |
| Early Intervention | | | | | | | |
| ATD/ATPDP | | | | | | | |
| ATP | | | | | | | |
| Reentry/Aftercare | | | | | | | |
| Indirect | | | | | | | |
| 12 | | | | | | | |
| Prevention | | | | | | | |
| Early Intervention | | | | | | | |
| ATD/ATPDP | | | | | | | |
| ATP | | | | | | | |
| Reentry/Aftercare | | | - | | | | _ |
| Indirect | | | | | | | |
| ►Sum of Program Totals: | \$256,602.00 | \$60,000.00 | \$134,181.00 | \$727,069.35 | \$276,286.35 | \$450,783.00 | \$583,636.00 |

| B. STSJP REIMBURSEMENT SUMMARY | | | | | |
|---------------------------------------|----------------------|--|--|--|--|
| STSJP Allocation Amount | \$134,181.00 | | | | |
| Locally Approved Amount of PY 2021-20 | \$134,181.00 | | | | |
| Approved Detention Allocation Shifted | \$256,602.00 | | | | |
| Approved Rollover Amount | \$60,000.00 | | | | |
| Total Approved for State Reimbursem | \$ 450,783.00 | | | | |
| | | | | | |
| C. STSJP-RTA REIMBURSEMENT SUMMARY | | | | | |
| STSJP-RTA Approved Plan Amount | \$583,636.00 | | | | |
| Total Approved for State Reimbursem | \$583,636.00 | | | | |

| A. Municipality Level Approval – Chief Executive / Administrative Official | | | | | | |
|--|---|-----------------|--|--|--|--|
| As STSJP Lead for Orange County, I certify that the Chief Executive/Administrative Official, [Name and Title] Steven | | | | | | |
| Neuhaus, County Executive, has reviewed and approved the 2021-2022 STSJP Plan. | | | | | | |
| User ID: 33a896 | Print Name: Anne Caldwell Date: 9/16/2021 | | | | | |
| B. State Level Approval – OCFS Program Reviewer | | | | | | |
| As OCFS STSJP reviewer, I certify that I approve of this STSJP plan for Orange County for 2021-2022. | | | | | | |
| User ID: JM9737 | Print Name: Karen Sessions | Date: 3/23/2022 | | | | |