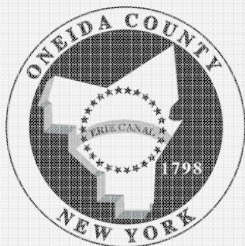


ONEIDA COUNTY

School Guide to Three County Sponsored Youth & Family Support Services

1. School Partnership for Youth (SPFY) Program
2. Pre-PINS Diversion Program
3. Tier 1

*Program Description and Guide to Help School
Professionals Know When and How to Make Referrals*



Guide Prepared by:

Herkimer-Oneida Counties Comprehensive Planning Program

In Cooperation with:

*Oneida County Probation Department
Oneida County Department of Mental Health
Oneida County Department of Social Services*

February 2009

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School Guide to Three County Sponsored Youth & Family Support Services

1. Oneida County Department of Social Services:
School Partnership for Youth (SPFY) Program
2. Oneida County Probation Department:
Pre-PINS Diversion Program
3. Oneida County Department of Mental Health:
Coordinated Children's Services Initiative (CCSI) – Tier 1

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Utica, New York 13501
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This Guide is posted on the Oneida County Probation Department webpage:
<http://www.ocgov.net/oneidacty/gov/dept/probation/probindex.htm>

PREFACE

When youth behave so badly that they seriously jeopardize their own future, disrupt, or even endanger, others at school or home and become uncontrollable, parents, teachers, school administrators, police and significant others all can become deeply frustrated, seeking an answer about how to change their behavior. In frustration, they often turn to the County for the answer. Many times they believe the best, or at least most expedient, answer is placement. Get this kid out of our home or out of our school! Let them learn a lesson. Just send them to a residential facility - that'll teach them!

Unfortunately, more often than not, placement doesn't teach them, doesn't effectively change their behavior and, sometimes, makes things worse. Numerous studies have documented this. A 1999 Surgeon General's Report quotes several such studies. One, in a large longitudinal six-state study of children placed in publically funded Residential Treatment Centers, found at the seven-year follow-up that 75 percent of youth treated at a RTC had been either readmitted to a mental health facility (about 45 percent) or incarcerated (about 30 percent) (Greenbaum, et. al., 1998).

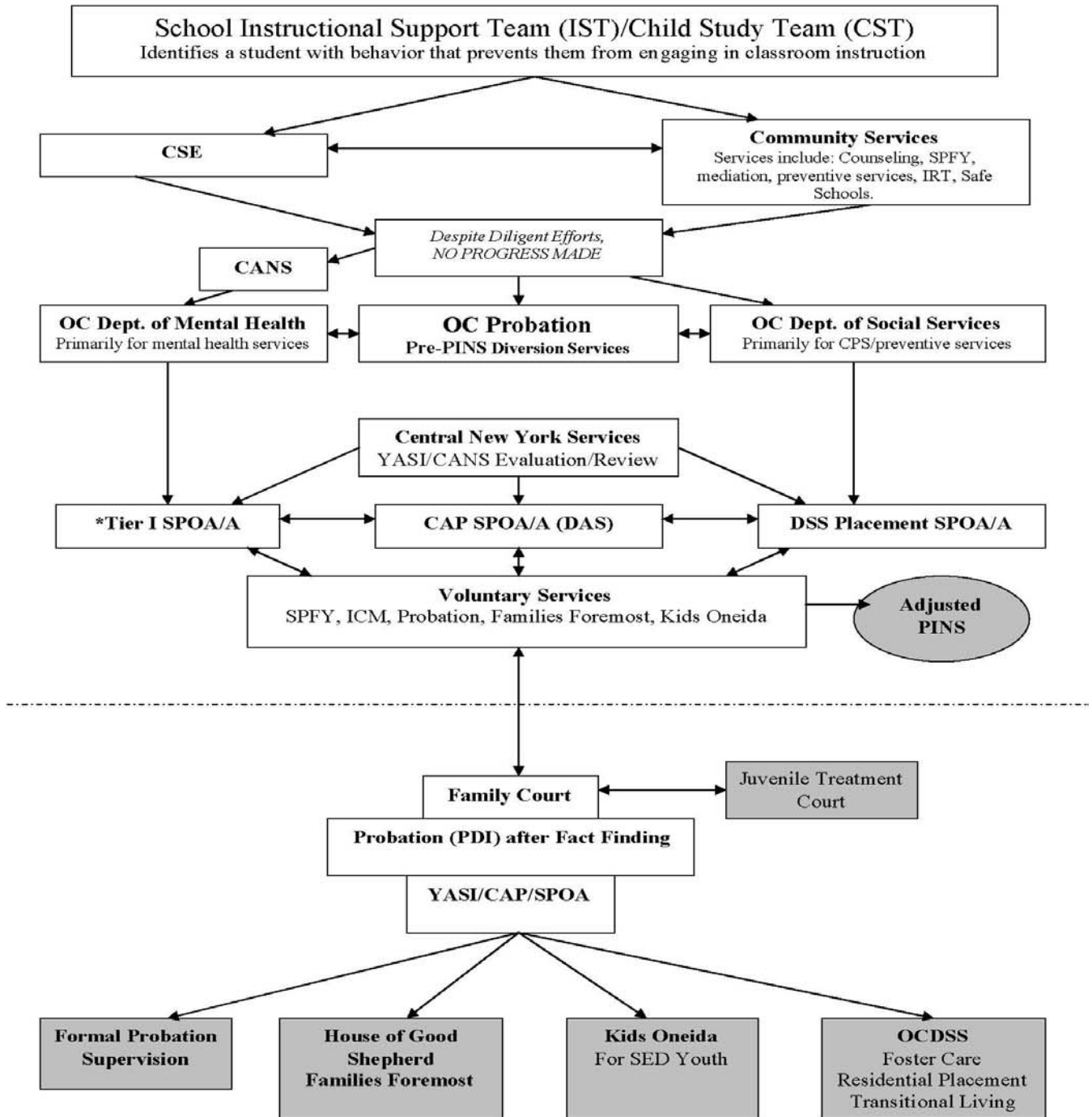
Both the 1999 Surgeon General's Report and a subsequent report from a 2003 Presidential Commission, entitled the New Freedom Commission, recommended limiting out-of-home placements, and, if necessary, using shorter term and more strategic placements. In their stead, both reports recommended increased community-based supports that use new technology, evidenced-based practices and more family advocacy.

The evidence locally supports the conclusions of these reports. Oneida County has resorted to placing children in a long list of different residential facilities with limited success and at great cost. In 2007 alone, Oneida County spent \$16 million for placements in residential facilities. Oneida County has long recognized that much of this money can be better spent on community-based services. For this reason, Oneida County continues to bolster their child and family support services. Within county government, this requires the commitment and collaboration of the three key agencies that serve children, youth, and family – the Department of Social Services, the Probation Department, and the Department of Mental Health. At the community level, it requires the commitment and cooperation of families, schools, police and county government, which is the reason for this Guide – to help build understanding and cooperation among all these parties.

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Oneida County SPOA/A Referral Process



INTRODUCTION

When a child has emotional, behavioral or adjustment problems in school, teachers, school counselors, social workers and administrators can all try their best to help the child and family but in the end have little or no success. Whatever is causing the child's behavior may be beyond the resources of the school. The purpose of this guide is to describe the three Oneida County programs designed to support children, youth and families and to explain when and how to refer them to these three programs.

The three programs each operate out of a different Oneida County agency, however, they are closely linked and are part of one support system referred to as the Oneida County Single Point of Access/Accountability (SPOA/A). Each program is designed to address different causes for a child's problem behavior. The School Partnership for Youth (SPFY) Program, sponsored by the Oneida County Department of Social Services, is a preventive services program intended to address primarily family-based issues, which may be contributing to the child's behavior. The PINS Diversion Program, sponsored by the Oneida County Probation Department, focuses more on the child as the locus of the problem. The Coordinated Children's Services Initiative (CCSI) or Tier 1 Program, sponsored by the Oneida County Department of Mental Health, is for children with diagnosed mental health problems. More times than not, however, the causes for a child's problem behavior are not clear and in fact are often a combination of issues – be it family dynamics, social factors, physical or mental health issues. It is for this reason these three programs, though still distinct, are closely linked.

When is it appropriate to make a referral to any one of these three programs? This depends on a number of factors. However, there is a process for schools to follow and an expectation that schools will assess the situation and do all they can to help alleviate the problem within the school environment. Further, schools are expected to have some form of a case conference group, e.g. Child Study Team, Instructional Support Team or Committee on Special Education, which reviews the case. Generally, prior to a referral to either the PINS Diversion Program or the Tier I Program, it is strongly recommended that the case be referred to the SPFY Program.

Below is a description of the progressive steps recommended for school personnel to take in the case of children who exhibit inappropriate, disruptive and/or dangerous behavior. *(See the Oneida County SPOA/A Flowchart on page iv)*

1. The student is exhibiting behavior that prevents that student from benefiting from classroom instruction and reaching the New York State Learning Standards.
2. The classroom teacher observes the student's behavior, talks with the parents/guardians and attempts various intervention strategies to correct the behavior that is interfering with his/her learning. The teacher documents the student's behavior and the intervention strategies.
3. The teacher requires intervention services beyond the classroom to help correct the student's behavior and forwards the information to the Instructional Support Team (IST) or Child Study Team (CST).

4. The IST/CST reviews the information about the child and determines if the school can intervene, if the family has appropriate resources or if there are possible community resources. If the child is suspected of having mental health problems, then a designated school district CANS Evaluator should complete a CANS Assessment at this point in the process. *(See Appendix C: Tier I Single Point of Access/Accountability District Liaison Role)* The CANS Assessment will assist school personnel in determining if the child has mental health needs. If the child appears to have family-related problems, then the case should be referred to the SPFY Program. If a SPFY worker is assigned to the school, then the SPFY worker would usually be part of the school-based IST/CST. If the school does not participate in the SPFY Program, the school can still make a referral to the SPFY Case Manager. Other interventions may include the Committee on Special Education (CSE) process, Functional Behavioral Assessment and Behavioral Management strategies, or a referral to other community-based services, such as counseling.

5. If these IST/CST recommended steps fail to appreciatively impact the behavior of the child, then the IST/CST should again review the case to determine an appropriate referral:
 - a. **Department of Social Services SPFY Program** - if the child is suspected of having problems at home which affect his/her behavior at school. *(See Section I: School Partnership For Youth (SPFY) on page 5)*

 - b. **Probation Department Pre-PINS Diversion Services** - if the child is evidencing excessive truancy, running away, and/or severe incorrigibility. *(See Section II: Probation Department Pre-PINS* Diversion Program on page 9)* Before the Probation Department's Intake Unit accepts a school referral, they must determine whether the school made "all diligent efforts" to adjust the case.

 - c. **Department of Mental Health Tier I Program** - if the child has a mental health diagnosis requiring services beyond traditional counseling and case management services and has parents who will cooperate in the treatment planning process. *(See Section III: Department of Mental Health Children & Youth Mental Health Services page 17)*

Each of the three Oneida County departments has their own SPOA/A case conferencing committee. The Department of Social Services has the DSS Placement Committee; the Probation Department – the Committee for Appropriate Placements (CAP); and the Department of Mental Health – Tier I Committee.

Once any one of these departments receives a referral, staff review the case and, if necessary, screen the child and family. If needed, staff will next present the case to their SPOA/A case conferencing committee, which helps in developing the service plan. The three SPOA/A committees share staff and information, so, if appropriate, they may re-direct a referral to any one of the other SPOA/A committees for them to develop the service plan. At this stage, service plans rely on the cooperation of the child and family because all services are voluntary.

The only way services can be mandated is through a court order. There are two ways a case can be referred to Family Court. One, if the parents or legal guardians have been abusive and/or neglectful, the Department of Social Services Child Protective Services, upon an investigation,

may refer a case to Family Court. And two, if a child remains persistently truant and/or incorrigible or is a runaway, despite diligent efforts to remediate the behavior, the Probation Department may determine that there is “no significant likelihood” the child will benefit from further services so refer the child to Family Court as a PINS or JD case. For PINS cases, there are four possible dispositions once a child has been adjudicated. The least restrictive option is being placed under Probation Supervision. The most restrictive is being placed in a residential facility under the custody of the Department of Social Services. In between these two options, a child can be ordered to participate in either The House of the Good Shepherd’s Family Foremost Program or the KIDS Oneida Program. Both provide case management, child and family support services, mentoring, counseling and, if warranted, treatment services.

Section I: SCHOOL PARTNERSHIP FOR YOUTH (SPFY)

School Partnership For Youth (SPFY) and Case Planning Departments

800 Charlotte St.

Utica, NY 13501

Telephone: (315) 798-8906

Fax: (315) 798-8949

MISSION STATEMENT

The mission of the SPFY Program is to reduce the number of at-risk children entering, or re-entering, out-of-home placement through the provision of coordinated, in-community, school-based, preventive services to children and their families, and thus enable the children to more fully participate and benefit from their educational opportunities.

ELIGIBILITY/ AREA SERVED

The family must reside in a participating school district and/or be eligible for preventive services, i.e. have one or more children in the home, under the age of 18, who are at risk of foster care placement or re-placement, based on child or adult service needs.

Current participating school districts include:

Camden, Holland Patent, Oriskany, Sauquoit, Utica, Rome, Vernon-Verona-Sherrill, Waterville, Madison-Oneida BOCES Triplexus, Oneida-Herkimer-Madison BOCES and Alternative Education Programs.

If a school does not participate in the SPFY Program, referrals can be made to the Oneida County Department of Social Services SPFY Case Manager at 798-8906.

POINT OF ENTRY

Primary point of entry: The Child Study Teams (CST) or Instructional Support Teams (IST) in the school buildings of these school districts that participate in the SPFY Program are the main conduit for referral of children and families. Most districts also have building staff designated who may make referrals in-between the scheduled CST/IST meeting times.

Secondary point of entry: Families may directly refer themselves to the SPFY Program.

The SPFY Program is primarily aimed at children and families when:

- ◆ the primary issues to be addressed are school-based;
- ◆ there are young, school-age children for whom the effectiveness of their intervention plan can best be monitored by frequent oversight and coordination with the school; and
- ◆ youth are being reintegrated into the community particularly from out-of-county residential or group home placements.

SERVICES OFFERED

The SPFY Program operates throughout the year and has 23 caseworkers who work in eleven participating school districts. SPFY caseworkers accept referrals on behalf of at-risk children and their families. The program provides a mechanism for fast, efficient referrals of youth and their families for early preventive services intervention. A key benefit of the SPFY Program is that it allows for coordination between the Oneida County Department of Social Services and the school staff.

The casework staff provides two basic services:

1. For cases that are opened as, or transferred to, preventive services, SPFY Caseworkers make home visits and contact parents, caretakers and others involved parties on an ongoing basis. They address the service needs of the entire family by conducting a family assessment, by developing a comprehensive services plan and by coordinating services.
2. For those families that are not eligible for preventive services or that are seeking assistance in making a self-referral for community-based services, SPFY caseworkers provide short term outreach as well as information and referral services.

Questions about the SPFY Program and its services may be directed as follows:
All School Districts: 798-8906.

PROGRAM OVERVIEW

SPFY is an acronym for School Partnership for Youth. The Program developed out of a partnership between the Oneida County Department of Social Services and local school districts. In 1992, the Oneida-Herkimer-Madison BOCES District Superintendent, the Madison-Oneida BOCES District Superintendent and Oneida County Department of Social Services Commissioner formed the Oneida County SPFY Policy Committee. This Committee developed the SPFY Program. The Oneida County Department of Social Services provides the SPFY Case Planning Program through a contract with the Neighborhood Center.

The SPFY Program involves collaboration between the schools in Oneida County, the Oneida County Departments of Social Services and the Neighborhood Center. It is the Neighborhood Center that actually employs the SPFY supervisors and caseworkers. Through an agreement between the Oneida County Department of Social Services and participating school districts, preventive services caseworkers, referred to as SPFY caseworkers, are based in school buildings and work cooperatively with the schools' Child Study Teams/Instructional Support Teams (CST/IST) and/or guidance personnel. The SPFY Program helps integrate the multiple systems of social services, mental health, probation, and schools so that appropriate services can be delivered to children and families as quickly as possible.

Services which may be provided as Preventive Services either directly or through a referral include the following:

- ◆ case planning
- ◆ case management
- ◆ casework contacts

- ◆ day care services *
- ◆ housekeeper/chore services *
- ◆ family planning services
- ◆ home management services *
- ◆ clinical services
- ◆ parent aide services
- ◆ day services to children *
- ◆ parent training
- ◆ transportation services *
- ◆ emergency cash or goods *
- ◆ emergency shelter *
- ◆ preventive housing services (subsidies to allow discharge of child from foster care)
- ◆ outreach activities

*Additional eligibility requirements exist for these services.

The SPFY caseworker makes home visits and determines a family's eligibility for mandated preventive services. Eligibility is based solely on risk of placement. If the family is determined eligible, the caseworker assumes responsibility for case management and case planning. This includes arranging referrals for appropriate supportive services as well as follow-up. If the family is not eligible for preventative services or does not choose to have a preventative services case opened on their behalf, the SPFY caseworker can offer them short term services. Short term services help the family identify community resources and assist the family, when necessary, through the self-referral process. However, short term cases are limited to a 90 day involvement. In either case, the SPFY caseworker acts as the link between the school, the family and the community.

Section II: ONEIDA COUNTY PROBATION DEPARTMENT PRE-PINS* DIVERSION PROGRAM

**Oneida County Probation Department/Pre-PINS Unit
(UTICA OFFICE)**

**Boehlert Center at Union Station
321 Main Street
Utica, New York 13501
Telephone: (315) 798-5914
Fax: (315) 798-6467**

**(ROME OFFICE)
300 South James Street
Rome, New York 13340
Telephone/Fax: (315) 356-0797**

* PINS is an acronym for Persons In Need of Supervision. PINS are youth under 18 years old who have been adjudicated by Family Court because they have repeatedly committed such non-criminal status offenses as school truancy and incorrigibility.

PROGRAM OVERVIEW

The Oneida County Pre-PINS Diversion Program is aimed at helping families and youth solve incorrigibility/truancy issues through voluntary preventive services, thus preventing the need for formal Family Court intervention. The primary objectives of the Pre-PINS Diversion Program are to divert youth from Family Court, to prevent placements into foster care or institutions and to maximize the chances for youth to stay with their families and in their communities and schools.

Pre-PINS Diversion Program is a mandatory pre-requisite prior to filing a formal PINS petition in Family Court. The Probation Department cannot approve a formal petition unless it can document that all diligent efforts have been made to remediate the complaint and there is no substantial likelihood that the youth would benefit from further diversion services.

A Pre-PINS referral should not be the first response to problem behaviors. Schools, parents and police can refer youth with patterns of incorrigible/truant behavior to the Probation Department, but only after they have made diligent efforts to resolve the problem behavior. Referrals for the Pre-PINS Diversion Program are made to the Oneida County Probation Department.

If the Probation Department determines that the case may be eligible for Pre-PINS Diversion Services, then an initial appointment with a probation officer will be scheduled for the youth and family to meet and discuss the presenting issues. If an interpreter is needed due to a language barrier, the parent or school should arrange to bring an interpreter.

Once accepted into the Pre-PINS Diversion Program, possible services can range from the least intensive probation monitoring to the most intensive home-based family intervention. Other services in between include referrals to counseling, mental health services, parent skills training, substance abuse treatment, education and mentoring services. In certain cases, the Probation

Department will coordinate services with the Oneida County Department of Social Services and Department of Mental Health. Youth and their parents are expected to cooperate with and participate in the services plan. There used to be a 90 day time limit for the Pre-PINS Diversion Program, but that is no longer the case. Currently, a case generally remains open for up to six months.

HOW THE PRE-PINS DIVERSION PROGRAM WORKS

The Pre-PINS Diversion Program is a voluntary program. Both the youth and parent/guardian must be willing to participate. The first stage of the program is the referral process. This stage culminates when the Probation Department determines the appropriateness of the referral. Once the Probation Department accepts a referral, the second stage begins. First, the case is assigned to a Probation Officer, who then sets-up an initial appointment with both the parent/guardian and youth. At the initial appointment, the Probation Officer interviews the family and screens the youth. Depending on the results of the screening, if it is found that more in-depth services are needed, then the youth's case may be presented to the CAP Committee, which was formerly referred to as the Designated Assessment Services (DAS) Committee. The CAP Committee reviews cases that require preventive services and develops appropriate service plans. The regular members of the CAP Committee include representatives from:

- ◆ Probation Department
- ◆ Department of Social Services
- ◆ Mental Health Department (SPOA/A)
- ◆ The House of the Good Shepherd
- ◆ BOCES
- ◆ Insight House (if substance abuse is a client issue)
- ◆ Kids Oneida (KO)
- ◆ SPFY

Service plans have no set timeframes. Instead, the timeframe for Diversion Services depends on each youth's personal adjustment to services. A Probation Officer monitors each case, but a DSS preventive service provider or other CAP partners may provide services depending on the youth's and family's needs.

If the youth and parent/guardian have made satisfactory progress, meaning the truant/incorrigible behavior has improved, then the case may be closed without any formal Family Court action. This is the ultimate goal of the program.

However, if the inappropriate behavior persists, and the Probation Department documents that "diligent efforts" have been made and that there is "no substantial likelihood that the youth would benefit from further diversion services," then the Probation Department can approve a formal PINS petition, and the third stage begins. The petition can be filed with the Oneida County Family Court for inclusion on the court calendar.

For those PINS complaints referred to Family Court for petition,, the Probation Department pre-determines their eligibility for detention, which is based on the risk the youth may not appear at

the next scheduled court appearance, and the Probation Department identifies those cases that they believe might be referred back to diversion services after the initial hearing. The Probation Department provides documentation of these recommendations as part of their petition report.

PINS REFERRAL PROCESS

Parent referrals:

If the repeated offense involves disobedience/incorrigibility at home or there is a current incident of the youth running away, then the parents may make a Pre-PINS referral to Probation. Parents are generally encouraged to first access appropriate community services, such as mental health services, substance abuse treatment, family counseling, etc., prior to initiating a Pre-PINS referral. The intent is to intervene quickly in the least intrusive manner to reduce the incidence of formal PINS adjudications. The Probation Department routinely suggests such early interventions to parents prior to accepting a referral. If those interventions do not resolve the problem, a Pre-PINS referral can be made.

If the youth is a RUNAWAY then the parent/guardian needs to notify their local law enforcement agency and file a Missing Person's Report (MPR), prior to contacting the Probation Department. After a MPR report has been filed and the youth is still unable to be located, then the parent/guardian should contact the Probation Department for further direction. Parents may schedule an appointment with the Probation Department to discuss their youth's disappearance and related behavioral problems, if any.

In cases when a parent or police initiate the Pre-PINS referral, the complainant makes the referral directly to the Probation Department. In order to both accurately and consistently document the child's behavioral background and school performance, the Probation Officer informs the youth's school of the Pre-PINS referral and requests that the school case conferencing team review their information about the pupil and attempt to secure a signed Parent/Guardian Release of Information Consent Form. If the parent/guardian signs the form, then the school should compile the appropriate records, complete a social summary and recommend appropriate services.

School referrals:

With school referrals, the process generally begins when a teacher, guidance counselor, school nurse, principal or other school personnel witness a pupil exhibiting a change in behavior or performance. If the repeated offense by the youth involves truancy or incorrigibility in school, then the Pre-PINS referral needs to be made by the school, not the parent. Prior to making the referral, the school is expected to consult with their case conferencing team, i.e. Child Study Team (CST) or Instructional Support Team (IST). If the youth is a special education student, the Committee on Special Education (CSE) must review the case. By law, the Probation Department Pre-PINS Diversion Program cannot refer a PINS referral for formal petition to Family Court on a special education student unless there has been a conclusion with respect to the manifestation

determination and the school has provided such documentation to the Probation Department and the court that youth's behavior is intentional and ongoing and not a result of his/her handicapping condition. This will ensure that the educational rights of youth are protected.

These CST/IST are expected to develop a service plan, offer appropriate school- and, if possible, community-based services to resolve the presenting problems. If the school participates in the School Partnership for Youth (SPFY) Program and has a SPFY caseworker based at their school, then the school is advised to refer the case to the SPFY Program prior to making a Pre-PINS referral.

After a careful evaluation of the pupil and after careful consideration of the available options, if the CST/IST decides on a Pre-PINS referral, then the school should complete a Pre-PINS referral report. This includes the *School Pre-PINS Diversion Services Referral Form* (See Appendix A) and, if the parent/guardian signs the *Release of Information Consent Form* (See Appendix B), all other documentation.

The list of required documentation for a school Pre-PINS referral is as follows:

1. Case Conferencing Team Report
2. Parent/Guardian Release of Information Consent Form
3. Pupil Personnel Information
 - a. Most current report card
 - b. Current record of attendance
 - c. Permanent record card
 - d. Achievement tests
 - e. Current discipline record
 - f. Health record
 - g. Social history*
 - h. Social Worker/Counselor report*
 - i. Psychiatric evaluation*
 - j. Psychological evaluation*
 - k. Summation of parent contacts
 - l. If a Special Education student:
 - i. I.E.P. (I&II)
 - ii. Documentation from the Manifestation Determination Hearing

**Include if available*

The Case Manager of the school case conferencing team, with the input of appropriate school support services personnel, is generally responsible for preparing the Pre-PINS referral report. Either the CSE case manager or school's guidance counselor/psychologist is expected to interview the family and develop the necessary social summary. In schools where a SPFY worker is based, they can be an integral part of this process.

In cases where there has been a pattern of illegal absences and the parent/guardian refuses to cooperate with the school, the school should file an educational neglect report with New York State Central Registry of Child Abuse and Maltreatment, by using the statewide toll-free numbers:

- For Mandated Reporters - 1-800-635-1522

- For General Public - 1-800-342-3720*

Likewise, if there is suspicion that the parent/guardian is abusive or neglectful, then this should be reported to the New York State Central Registry.

Police referrals:

For the police, violations that can be documented as incidences of incorrigibility in a Pre-PINS complaint are behaviors that do not reach the level of a crime, such as Possession of Marijuana or Disorderly Conduct. A Pre-PINS referral should not allege a penal code delinquency charge. Those charges should be pursued by the police under juvenile delinquency proceedings.

PRE-PINS DIVERSION PROGRAM REFERRAL CRITERIA

Definition of Truancy

Truancy is an unexcused illegal absence.

An absence is unexcused if:

1. Cooperating parent (or guardian) reports that their child refuses to attend school.
2. Cooperating parent reports that the child left for school but school records reveal an absence.
3. Cooperating parent reports child has run away and is missing.

An absence is illegal if allowed by the parent (or guardian) for reasons other than physical or mental health, emergencies, or family death. Such illegal absences include:

1. Babysitting
2. Family Vacations
3. Problems at School
4. Scheduling Problems
5. Non-certified Alternative Education
6. Non-cooperative parent refuses to explain child's absence.
7. Non-cooperative parent lies about reasons for absence, and this can be documented.

Suggested Intervention Plan*

Step 1: Once truancy is identified, contact family.

Step 2: After 5 days, refer to the CST/IST.

Step 3: After 8 days, implement CST/IST strategies:

- Family interview at school, if not already done
- Home visit (School Counselor, SPFY Worker)
- Counseling
- Service referral
- Other school options

Step 4: If family is uncooperative and if CST/IST strategies are clearly ineffective, make a CPS Report.

Step 5: If family is cooperative and CST/IST strategies ineffective, make a Pre-PINS referral.

*The steps outlined are according to an academic year, if there has been a pattern of truancy in the past year(s); then perhaps this process should be accelerated. For the most part, the Probation Department will not accept a PINS referral from schools for truancy after May 10th in that academic year.

Definition of Incurrable

PINS/Incurrable is defined in Family Court Act (SS712b) as a child who is, "ungovernable, or habitually disobedient and beyond the lawful control of a parent or other lawful authority."

From a school's perspective, there must be a documented pattern of incurrability that should include some form of harassment or physical threat.

Suggested Intervention Plan

The following steps only describe a possible model. Different circumstances and the severity of a case dictate the course of action.

Step 1: Once a student is identified as incurrable, refer the child to the Child Study Team (CST)/Instructional Support Team (IST).

Step 2: If incurrable behavior continues, take disciplinary action and have the CST/IST review the case.

Step 3: Administer the CANS evaluation and implement possible CST/IST strategies:

- a. Family interview at school, if not already done
- b. Home visit
- c. Counseling
- d. Service referral
- e. Other school options

Step 4: If incurrable behavior continues, perhaps conduct a Superintendent's Hearing.

Step 5: After further incurrable behavior and when school can document a pattern, make a PINS Referral.

FAMILY COURT PROCEDURES

Petitions

- ◆ Filed for a Person in Need of Supervision (PINS)
 - Filed by a parent or school official or police
 - Meets the criteria under "Incurrability" and/or "Truancy"
- ◆ Filed for a Juvenile Delinquent (JD)
 - Filed by a law enforcement agency on behalf of a business or private citizen
 - Commits any act that, if committed by an adult, would be considered a crime

Arraignment

- ◆ The initial court appearance at which the youth answers the charges alleged in the petition.
- ◆ If the youth admits the charges, he is adjudicated either a PINS or JD, and court is adjourned for an investigation and disposition.
- ◆ If the youth denies the charges, a fact finding hearing is scheduled within a four week period.
- ◆ If facts do not support the petition and/or there is no evidence of wrong-doing, the petition will be dismissed.
- ◆ In some instances, the court can refer a case back to the Probation Department for the continuation of diversion services.

Investigation

1. A probation officer obtains information about a youth and his family. Information is obtained through interviews with the parent(s), youth, school personnel, and any other significant person. This information is compiled into an investigative report which is submitted to the judge at least three days prior to a scheduled appearance. The investigation identifies causal factors that may have contributed to the incorrigible behavior of the youth and recommends possible dispositional alternatives that might best meet the needs of the youth and family on a continuum of “least” restrictive to “most restrictive – residential placement.” If out-of-home placement is seen as an option, then the Committee on Appropriate Placements reviews the case in order to determine whether placement is necessary, and, if so, to decide what is the least restrictive setting which still accounts for the needs and safety of the youth.

Disposition

2. Is usually made after adjudication.
3. The Oneida County Family Court judge determines a disposition-outcome that is most appropriate for an adjudicated youth to include:
 1. Formal Probation Supervision
 2. Suspended Judgment with Court ordered services through The House of the Good Shepherd’s Family Foremost Program, Kids Oneida services or the SPFY Program.
 3. Residential Placement
4. The Family Court Judge utilizes the Probation investigation report and recommendations of the Committee on Appropriate Placements to make the decision on each case.
5. The parents and/or youth have the right to disagree with a disposition. A dispositional hearing can be requested.
6. PINS dispositions are generally up to one year.

PINS REFERRAL FORMS

1. School Pre-PINS Diversion Services Referral Form *(See Appendix A)*

The School Pre-PINS Diversion Services Referral Form is required by the Oneida County Probation Department. School officials must complete this form when making a referral; and if the parent or guardian has signed the Release of Information Consent Form, school officials must also submit all school evaluation team case records and pupil personnel information.

2. Probation Department Authorization for School to Release Confidential Information *(See Appendix B)*

The Probation Department Authorization for School to Release Confidential Information is highly recommended. School officials must secure the signature of the parent or guardian on some type of an information consent form before they can release confidential school records to the Probation Department. Not all such forms are accurate or legally inclusive. This Parent/Guardian Release of Information Consent Form was specifically designed for PINS referrals and meets the legal requirements.

**Section III: ONEIDA COUNTY DEPARTMENT OF
MENTAL HEALTH CHILDREN & YOUTH
MENTAL HEALTH SERVICES**

**Director of Children's Services
Oneida County Department of Mental Health
235 Elizabeth St
Utica, NY**

**Telephone: 798-5903
Fax: 798-6445**

TIER I PHILOSOPHY

Coordinated Children's Service Initiative (CCSI), herein referred to as "Tier I," brings families and the community-based service providers together to create individualized and coordinated service plans that are designed to keep families together and maintain children, who have a mental health diagnosis, in their community.

Tier I endorses the values and principles for the System of Care, referred to as the Child and Adolescent Service System Program (CASSP) Principles (*See Appendix D for Child and Adolescent Service System Program (CASSP)*). In following the CASSP Principles, Tier I is child-centered, family-focused, community-based, culturally competent and strength-based. It allows the needs of the child and family to dictate the types and combination of services provided.

Tier I is intended to improve the method by which services are delivered across multiple systems and to eliminate any barriers within and between those systems. Therefore, the overall purpose of Tier I is a "process" rather than a "program." Family and service providers sit at the same table. The family can identify their child's unmet needs. The service providers can then suggest service options available across systems to meet these needs and arrange for the best array of services for the family. Tier I also has flexible funding available that can be utilized upon discretion to meet the immediate needs of families.

TIER I POLICY AND PROCEDURES

Tier I is under the auspices of the Oneida County Single Point of Access/Accountability (SPOA/A); thus, all Tier I meetings are SPOA/A meetings. To be eligible for Tier I, the child must have a mental health diagnosis or be diagnosable due to exhibiting emotional or behavioral difficulties at home, school and/or in the community. The child may be receiving services currently or have participated in services in the past.

Parents, schools, service providers and police can make a referral to Tier I.

1. The referent sends the referral, which consists of the Child and Adolescent Need and Strengths (CANS) Comprehensive Multi-System Assessment, to the Oneida County Department of Mental Health where it is reviewed and logged in. If more information is needed, the referent will be contacted. A family advocate is assigned to work with the family.
2. Family Contact:
The family advocate will call to make an initial home visit. At this step, they explain their role and the Tier I process. The family advocate will review the completed CANS information with the child, if appropriate, and family as well as confirm that both are voluntarily agreeing to services. The advocate gathers further information on the needs of the child and family and asks the parent/ guardian what they feel would be helpful to their situation. There is emphasis placed on helping families identify their own, and their children's, strengths and on exploring the family's natural supports. The family advocate will ask the parent/ guardian to sign consent forms for release of information so clinical documentation may be requested and reviewed and so that service providers and schools can become involved in the development of the plan.
3. Family advocates are expected to maintain contact with the parent throughout the Tier I process, typically by phone. This contact includes being a support and a sounding board to the parent, checking in with the parent to see how they are coping with the child, etc.
4. Subsequent phone contact or additional home visits may be scheduled to further discuss the proposed service plan. The family advocate will review services available to meet the family's needs and provide necessary information for families to make informed choices in developing a plan. Once a plan is agreed upon, the advocate will set up a Tier I meeting date with the family.
5. At the Tier I meeting, the service plan is reviewed and finalized with the child, whenever possible and appropriate, and the family as well as with the specific providers who will be working with them. Other participants who are invited, with the family's consent, include clinicians and school representatives. Parents/ guardians may invite anyone of their choosing for support. Unless the family has another advocate of their own, or decides to advocate for themselves, the family advocate, along with the assistance of the referent, will facilitate the meeting.
The family advocate supports the parent/ guardian throughout the meeting, ensures that the needs of the family are heard and makes certain that the family's questions are addressed.
6. Follow-up Procedures:
The family will be asked to complete a satisfaction survey regarding the process. The family advocate will make contact, as needed, with the family. For re-presents to Tier I, the referent will complete an updated CANS for quality assurance/ utilization review purposes. More specifically, there will be a review of the progress made on the service plan's goals and objectives to determine if services need to be modified or even continued.

TIER I REFERRAL CRITERIA

- ❑ Child has a current (within the past year) documented mental health diagnosis, which severely impairs daily functioning; or
- ❑ Child's behavior at home/school has currently (within the past year) required MCAT/Police intervention; or
- ❑ There is current service involvement through Supportive/Intensive Case Management, Kids Oneida or an Outpatient Mental Health Clinic; and
- ❑ The family is cooperative and willing to participate in the treatment planning and services; and
- ❑ The child and family are not in immediate crisis despite need for services.

* Please note if the child is evidencing acute crisis such as suicidal/homicidal ideation intent – MCAT intervention/Police intervention should be the first recourse. If a child is suspected to be abused/neglected, a report should be made to the New York State Central Registry. ***Tier I is not a crisis intervention alternative*** and is not a direct service treatment provider and therefore cannot assure the safety of the referred child and family in acute crisis.

If a child meets the following criteria forward this referral directly to:

Oneida County Department of Mental Health
235 Elizabeth Street
Utica, New York 13501

Appendices

- A. School Pre-PINS Diversion Services Referral Form
- B. Probation Department Authorization for School to Release Confidential Information
- C. Tier I Single Point of Access/Accountability District Liaison Role
- D. Child and Adolescent Service System Program (CASSP)

School Pre-PINS Diversion Services Referral Form

Oneida County Probation Department
Boehlert Center at Union Station
321 Main Street, 2nd Floor
Utica, New York 13501

Utica Office: Phone (315) 798-5914
FAX (315) 798-6467
Rome Office: Phone (315) 356-0797

Student Information

Student's Name: _____
 Mailing Address: _____

 Street Address: _____

 Phone: _____
 DOB: ___/___/___ Age: _____ Grade: _____

This box must be completed to make a referral:

Referral Date: ___/___/___
 Referrer's Name: _____
 Title: _____
 School: _____
 Address: _____

 Phone: _____ FAX: _____

Family Information

Mother's Name: _____
 Address: _____

 Phone Home: _____
 Work: _____
 Cell: _____

Father's Name: _____
 Address (if different): _____

 Phone Home (if different): _____
 Work: _____
 Cell: _____

If does not live with parents, adult(s) with whom student lives: (Legal Guardian? ___ Yes ___ No)

Name(s): _____
 Address: _____

Phone Home: _____
 Work: _____
 Cell: _____

Siblings (From oldest to youngest)

<u>Name</u>	<u>DOB</u>	<u>Remarks</u>
1. _____	___/___/___	_____
2. _____	___/___/___	_____
3. _____	___/___/___	_____
4. _____	___/___/___	_____

Reason for Referral

___ Truant Number of days truant this year: ___ Comments: _____

___ Incurrable Number of discipline referrals: ___ Number of in-school suspensions: ___
 Number of out-of-school suspensions: ___ Comments: _____

Release of Information Consent

Has parent signed the Release of Information Consent Form? ___ Yes ___ No (If no, please explain)

If the parent/guardian has not signed the Release of Information Consent Form, do not supply the information below or include the accompanying documentation; instead, just sign this form at the end.

School Information

IEP? ___ Yes ___ No (If yes, please attach copy)

Special Ed? ___ Yes ___ No
(If yes, date of Manifestation Hearing: ___/___/___ ; and attach copy of letter of determination.)

Remarks: _____

Was the case referred to SPFY? ___ Yes ___ No If yes, date referred: ___/___/___, and what was the outcome? _____

School Intervention Steps

<u>Student Contacts:</u>	<u>Dates</u>	<u>Outcomes</u>
1. Teacher	___/___/___	_____
2. Guidance Counselor	___/___/___	_____
3. Attendance Officer	___/___/___	_____
4. Other: _____	___/___/___	_____

<u>Parent Contacts:</u>	<u>Dates</u>	<u>Outcomes</u>
5. Phone	___/___/___	_____
6. In-School Conference	___/___/___	_____
7. Home Visit	___/___/___	_____
8. Other: _____	___/___/___	_____
9. Superintendent's Hearing	___/___/___	_____

Social Service Agency Information (If child/family accessed services) Attach available documents.

<u>Agency Name</u>	<u>Type of Service</u>	<u>Contact Person/Title</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

ALL INFORMATION AND DOCUMENTS MUST BE INCLUDED FOR THE ONEIDA COUNTY PROBATION DEPARTMENT TO TAKE ACTION.

Signature of Referrer ___/___/___
Date

Signature of Building Principal ___/___/___
Date

Oneida County Probation Department
Boehlert Center at Union Station
321 Main Street, 2nd Floor, Utica, New York 13501
Utica ~ Phone: (315) 798-5914 Fax: (315) 798-6467
Rome ~ Phone: (315) 337-0797

Authorization for School to Release Confidential Information

(Name of Child/Adolescent)

____/____/____
(Date of Birth)

I, _____, the undersigned, hereby authorize
_____ School District
(Name of School District Releasing Information)

to release written records and verbal information on the above named person to the following agencies:

1. Oneida County Probation Department
2. Oneida County Department of Social Services

Other: *(Name only if applicable)*

The information to be released is restricted to the following: *(Check () if applicable)*

- | | |
|---|---|
| _____ 1. Most current report card | _____ 10. Psychological evaluation |
| _____ 2. Current record of attendance | _____ 11. I.E.P. (I&II) |
| _____ 3. Permanent record card | _____ 12. Manifestation determination documentation |
| _____ 4. Achievement tests | _____ 13. Summation of parent contacts |
| _____ 5. Current discipline record | _____ 14. Child Study Team Report |
| _____ 6. Health record | Other: _____ |
| _____ 7. Social history | _____ |
| _____ 8. Social Worker/Counselor report | _____ |
| _____ 9. Psychiatric evaluation | _____ |

This information will be used to assess the service and treatment needs of the child and family, to coordinate services and educational planning programs and, if necessary, to enable judges, attorneys and probation officers to make legal decisions.

I, the undersigned, sign this Authorization willingly and voluntarily for the purposes specified above. I understand that I may withdraw my consent at any time except to the extent that action has already been taken in reliance upon this authorization. In any event, this authorization will expire when my child is no longer receiving services from the above noted agencies or one year from its signing, whichever comes first. , unless I specify a date, event or condition upon which it will expire sooner. I also understand the information to be released is confidential and protected from re-disclosure.

(Signature of Student)

____/____/____
(Date)

(Signature of Parent/Guardian)

____/____/____
(Date)

(Signature of Witness)

____/____/____
(Date)

Specify date, event or condition upon which this agreement will expire sooner: _____

Tier I
Single Point of Access/Accountability
District Liaison Role

Role: The District Liaison (DL) will be an individual who will be the clearinghouse for the district on referrals for Oneida County Single Point of Access/Accountability (SPOA/A). Oneida County's SPOA/A partners include: education, social services, mental health and juvenile justice. Any personnel in the various district buildings will consult with the liaison prior to making a referral to SPOA/A. The DL should have the following characteristics: (1) knows the district well; (2) familiar with the various district buildings; (3) familiar with K-12 Child Study Teams; (4) accustomed with district services; (5) familiar with community services; (6) understands the CSE process; (7) knowledge of pre-referral intervention strategies with regular education students; and (8) flexible schedule to attend monthly meetings.

Responsibilities:

1. DL to present his/her role and process to the student services personnel (i.e.: guidance counselors, school psychologists, school social workers, and outside agency personnel (i.e.: SPFY, Primary Therapist etc.) and administrators working within the school district.
2. DL to be trained in the use of the CANS Comprehensive Multi-system Assessment form. Before student services personnel make a referral, the DL will review to make sure that the presenting problem is above and beyond what the school can adequately address. The DL will ensure that behavioral plans have been attempted and that any necessary psychological, psychosocial and/or functional behavioral assessments have been completed to ensure school interventions have been tried and exhausted. The DL must make sure that any and all community based services such as counseling, case management etc. have also been accessed and utilized by the child and family. The service providers working directly with the child and family should be aware of the SPOA/A referral being made by school personnel and included in the completion of the CANS where appropriate.
3. DL determines whether to approve the referral to SPOA/A. If the referral is denied, the DL will provide recommendations to the referent to pursue for the child and/or family at the school district level.
4. Once approved, the DL will review the referral for thoroughness and accuracy. This includes: assuring that there is justification and case specific information where any "2's" or "3's" ratings are indicated, that case specific information is given, including, input from all providers working with the child and family, and that the Authorization for Release of Information is signed and dated by the parent/guardian prior to making a SPOA/A referral.
5. Once completed, the DL will sign off on the referral and consult with the SPFY Supervisor, if there is SPFY involvement, and assure that that Supervisor also signs off on the referral. The referral is then forwarded to:

Oneida County Department of Mental Health
Children & Youth SPOA/A
235 Elizabeth Street
Utica, NY 13501

To request a copy of the CANS, please contact –

**Oneida Co. Dept. of Mental Health
798-5903**

Things to Remember When Completing the CANS:

- * Write legibly**
- * Justify all 2's and 3's**
- * Contact other providers and document**
- * Identify previous services and interventions**
- * Empower parents to make informed decisions**
- * Be sure that the CANS is completed and signed by both the Supervisor and District Liaison (when applicable)**
- * Send original CANS with signed release from parent and keep a copy.**

Child and Adolescent Service System Program (CASSP)

Brief History

A national study in 1982 found that two-thirds of all children with severe emotional disturbances were not receiving appropriate services. These children were "unclaimed" by the public agencies responsible to serve them, and there was little coordination among the various child-serving systems. To address this need, Congress appropriated funds in 1984 for the Child and Adolescent Service System Program (CASSP), envisioned as a comprehensive mental health system of care for children, adolescents and their families.

CASSP Core Principles

CASSP is based on a well-defined set of principles for mental health services for children and adolescents with or at risk of developing severe emotional disorders and their families. These principles are summarized in six core statements.

- **Child-centered:** Services meet the individual needs of the child, consider the child's family and community contexts, and are developmentally appropriate, strengths-based and child-specific.
- **Family-focused:** Services recognize that the family is the primary support system for the child and participates as a full partner in all stages of the decision-making and treatment planning process.
- **Community-based:** Whenever possible, services are delivered in the child's home community, drawing on formal and informal resources to promote the child's successful participation in the community.
- **Multi-system:** Services are planned in collaboration with all the child-serving systems involved in the child's life.
- **Culturally competent:** Services recognize and respect the behavior, ideas, attitudes, values, beliefs, customs, language, rituals, ceremonies and practices characteristic of the child's and family's ethnic group.
- **Least restrictive/least intrusive:** Services take place in settings that are the most appropriate and natural for the child and family and are the least restrictive and intrusive available to meet the needs of the child and family.

