

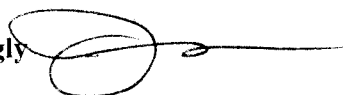
**City of New York  
Administration for Children's Services**

**Procedure 2010/ 04**

**ACS POLICY**

**SUBJECT: Transferring a PINS/DAS Case to a Community-Based Preventive Service Program**

**APPROVED: John B. Mattingly**



**DATE: March 5, 2010**

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**IMPLEMENTATION RESPONSIBILITY:  
Children's Services: Family Support Services;  
Family Assessment Program, and Preventive  
Provider Agency Staff**

**PURPOSE:** This procedure clarifies the process for case transfers to community-based preventive services for families involved with Persons In Need of Supervision Designated Assessment Services (PINS/DAS).

**SCOPE:** This procedure applies to Children's Services staff in Family Support Services (FSS), the Family Assessment Program (FAP) and preventive provider agency staff when transferring a PINS/DAS case to a community-based preventive services program.

**POLICY:** Families who are seeking services for child(ren) by way of a Person In Need of Supervision (PINS) petition will be referred to their borough's Family Assessment Program (FAP). FAP can provide information, assistance and service referrals to families in order to help resolve issues and keep teens safely at home.

For families and teens needing additional assessment or services, the FAP program may refer the family to the Persons in Need of Supervision (PINS) Designated Assessment Services (DAS) program. Once the young person and their family accept the PINS/DAS services, PINS/DAS will assess the service needs of the family and make appropriate referrals to meet these needs.

When the family's service needs require community-based services, PINS/DAS may make a referral to a preventive services program. Once the family accepts the preventive services, the case planner will provide information to the family about the preventive service program and depending on the program, the PINS/DAS case planner will schedule a

transition meeting with the preventive services provider so that the provider can further explain the services that will be offered to the family.

The PINS/DAS program must ensure that the appropriate documentation is forwarded to the preventive services provider so that the family can transition to the preventive services without delay.

## **PROCEDURE:**

### **I. General Requirements for any PINS/DAS Transfer to a Preventive Program:**

1. Family Assessment Program refers case to PINS/DAS.
2. Family signs LDSS -2921 with PINS/DAS for the purpose of assessment and services.
3. PINS/DAS conducts a CONNECTIONS (CNNX) clearance and then creates a Family Services Intake (FSI) only if the family is not involved in an active CNNX case. The CNNX Case ID is generated when the FSI is created.
4. The FSI is submitted to the Children's Services Intake Unit along with the signed 2921.
5. The Intake Unit will clear and progress the case to a Family Services Stage (FSS) within 3 days. If the FSI is rejected or the PINS/DAS provider wants a role on an existing case, the PINS/DAS provider should contact the preventive CNNX mailbox for assistance ([acs.sm.cnnx.b18cases.prev@dfa.state.ny.us](mailto:acs.sm.cnnx.b18cases.prev@dfa.state.ny.us)).
6. PINS/DAS enters the CNNX case ID into PROMIS.
7. The FSS is then assigned by the Central Team to the workload of the PINS/DAS agency case planner.
8. After assessment, if it is determined that the family is in need of ongoing services, PINS/DAS refers the case to an appropriate level community based preventive program.
9. PINS/DAS initiates the referral via PROMIS to the receiving preventive provider agency once the preventive provider has agreed to engage the family.
10. Preventive provider agency has 30 days to engage the family after receiving the referral.
11. If the family accepts the services, the family signs a new LDSS-2921 with the receiving agency. The receiving agency then enters the date the 2921 was signed in PROMIS in both the "date LDSS-2921 signed" field and the "disposition" field.
12. Once the preventive program accepts the case in PROMIS, an alert will automatically be generated for the Central Team. The Central Team will then assign the new program a case planner role in CNNX. If the receiving program would like a role in CNNX before the LDSS-2921 is signed, they should reach out to the preventive CNNX mailbox to request a case worker role.

**NOTE-** A PINS/DAS case that was referred and accepted by a preventive services provider will close in the PINS/DAS program as of the date that the LDSS-2921 was signed. This means that once the date is entered in PROMIS by

the receiving agency, it will be effective retroactive to the signature date. If the family refuses services, or the receiving provider agency rejects the referral in PROMIS, the case remains active in the PINS/DAS program until another agency takes the case or until it is deemed safe to close the case.

## **II. Transition Meeting Requirements for any PINS/DAS transfer to a Preventive Program:**

- A. From PINS/DAS to General Preventive (GP)/Family Rehabilitation Program (FRP)- Transition meetings are encouraged but not required. When circumstances of a particular case warrant an individual transfer meeting, efforts should be made to conduct a transfer meeting with the receiving agency and the family.
- B. From PINS/DAS to Enhanced Preventive- A transition meeting is required between the PINS/DAS program, the Enhanced Preventive program and the family. In addition, the Youth Specialist or CASAC and relevant consultants from these programs should participate in the transfer meeting.
- C. From PINS/DAS to Intensive Preventive- A transition meeting is required between the PINS/DAS program, the Intensive Preventive program and the family. The meeting can take place during a joint home visit or in the office with the family present so that the Intensive Program representative can explain the services offered and have the identified child and the parents agree to participate in services.

**NOTE-** Anyone with a role in a preventive service case should regularly check their CNNX To Do's to see if a new investigation has opened on the case. During the open investigation, providers are required to document their progress notes in CNNX.

## **III. Documentation Requirements for any PINS/DAS Transfer to a Preventive Program**

- A. In order for the receiving program to make a comprehensive assessment of the family, the DAS program is required to share the following with the receiving program:
  - DAS Report
  - Psychosocial Assessment
  - ADVPO Comprehensive FASP template (if applicable)This list is not comprehensive, but represents the minimum requirements.
- B. If necessary, the PINS/DAS provider may request a copy of the signed LDSS-2921 form from the receiving agency. Referring programs should consider whether they possess any additional documents, other than those contained in the electronic record, which may be important for the new program to receive.  
**Documents that the referring agency/program obtained through parental**

**consent or authorization cannot be shared with the receiving program without written parental consent for re-disclosure.** Receiving program staff must document, in progress notes, the receipt of all documentation that is not part of CNNX.

For additional information about record sharing, please see ACS Guidance#2008/01 entitled "Sharing Child Case Record Information between Children's Services, Foster Care and Preventive Provider Agencies."

For additional information or assistance, contact the Office of Preventive Technical Assistance at 212-676-7667.