



David A. Hansell
Commissioner

Jacqueline Martin
DSL, LMSW
Deputy Commissioner
Division of Preventive
Services

150 William Street
18th Floor
New York, NY 10038

212-341-9802 tel
212-341-3219 fax

TO: Prevention Provider Agencies

FROM: Jacqueline Martin JM
Division of Prevention Services

DATE: December 23, 2020 (Supersedes April 2, 2020)

RE: Guidance for Prevention Referrals, Transition Meetings and 2921 Signatures
During the COVID-19 Pandemic

In light of the current COVID-19 pandemic, we are providing the following updated guidance to promote the safety and wellbeing of families and children, as well as CPS staff and provider agency staff. This guidance will be updated as necessary during this health crisis.

Referrals, Transition Meeting Process and Expectations

ACS expects all prevention service agencies to accept referrals of families regardless of suspected, possible or known history of contact with COVID-19.

During the COVID-19 pandemic transition meetings (Joint Home Visits) can be done via videoconference or telephone, except in cases of severe abuse/neglect allegations such as sex/ physical abuse and domestic violence.

In cases with allegations of severe abuse/neglect, or if the CPS determines it is not safe to conduct a transition meeting via videoconference or telephone based on their interaction with the family during the investigation, then the transition meeting must be held face to face.

When a face to face meeting is required and if it is determined that the family is experiencing health risk factors associated with COVID-19, the CPS and prevention agency team must work together to determine the safest course of action. In such cases, CPS should develop a course of action with their borough and central office leadership in collaboration with supervisor and/or director leadership from the prevention provider agency. If a videoconference or telephone transition meeting indicates that the case is high risk based on child welfare concerns, refer to the ACS Guidance for Prevention Providers: Home Visits and Casework Contacts (Updated 12/23/20) and use the decision-making framework for continued family engagement.

If a transition meeting is held via telephone, the provider needs to specify in CONNECTIONS progress notes the reason for using phone rather than a video conference and why it was not a customary phone call.

When scheduling a transition meeting, both the case planner and CPS assigned to the family must make diligent efforts to contact the family to pre-screen for any potential risk of COVID-19. For guidance on advance screening for face to face casework contacts, refer to “ACS GUIDANCE FOR PREVENTION PROVIDERS: HOME VISITS AND CASEWORK CONTACTS” (Updated 12/23/20)

Obtaining Consent for Services (2921)

During the time of this public health crisis, Prevention Services providers are not required to have the client’s signature on the physical/hard copy of the 2921.

The submission of the electronic Local Equivalent 2921 (LE-DSS-2921) by the provider will suffice for ACS’ Systems Support Office (SSO) to proceed with processing the full case opening. The case planner should note on the 2921 signature line that, due to COVID-19, a signature could not be obtained, but that services were discussed with the family, who have agreed to accept services. The case planner should also note the same circumstances in the intake progress note. The client’s signature may be obtained at a later date.

In order to complete the referral in PROMIS, the provider should use the LE-DSS-2921 submission date as 2921 signature date.

When feasible, the provider will obtain a physical LE-DSS-2921 signed by the family to consent for services and maintain it in the case record.

Case Transfer Process and Expectations

Effective immediately, transfers between prevention programs do not need prior approval from OPTA.