

City of New York
Administration for Children's Services

Procedure 2009/02

ACS POLICY

SUBJECT: Streamlined Intake for Advocates Preventive Cases

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DATE: April 28, 2009

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IMPLEMENTATION RESPONSIBILITY:
Children's Services Systems Implementation
Program Office Intake Unit, and Preventive
Provider Agencies

PURPOSE: The purpose of this procedure is to introduce a streamlined process for the opening of Advocates Preventive (ADVPO) cases. These changes are intended to benefit families in need of preventive services by expediting the opening of an ADVPO case, thus enabling families to promptly receive preventive services.

SCOPE: These new procedures apply to the Systems Implementation Program Office (SIPO) Intake Unit in Children's Services, and to preventive service provider agency staff when stage progressing an ADVPO case that is in the Family Services Intake (FSI) stage. This procedure is effective immediately and replaces the Streamlined Intake for Advocates Preventive Cases, signed on February 13, 2008.

POLICY: In order to expedite the FSI stage progression process for ADVPO cases, Children's Services has requested and received New York State Office of Children and Family Services (OCFS) approval to eliminate the requirement for provider agencies to mail in the original DSS-2921 Common Application to the Children's Services Intake Unit. Therefore there is no need to mail the original completed application. However, provider agencies must maintain the original, completed, signed, and dated DSS-2921 in the family's external case file and make it available to Children's Services or OCFS upon request, for audit purposes.

In lieu of mailing a complete application, agencies can now fax pages 1-3 and page 16, the signature page, from the program location to Children's Services as follows:

Program Location	To	Fax Number
Manhattan, Staten Island, Bronx	Preventive Services Intake Unit (SIPO)	212-442-2205
Brooklyn, Queens	Preventive Services Intake Unit (SIPO)	212-442-2204

At the same time, the FSI must be electronically submitted and the demographic information on the FSI and the DSS 2921 must be consistent. Provider agencies are responsible for completing the Relationship Matrix within the FSI. Provider agencies are no longer responsible for completing the DSS-3316, CCRS Supplemental Information form.

When faxing the required pages, include a cover page indicating the program name, contact person and telephone number with a list of each applicant's name for whom you are faxing the required forms. This will assist us in ensuring that we have received all of the forms that you have faxed and will allow us to contact you immediately should that be necessary. If there is a need to contact the Preventive Services Intake Unit directly, the unit can be contacted by e-mail at: acs.sm.cnnx.b18cases.prev@dfa.state.ny.us

Upon receiving the faxed forms and the FSI, the Children's Services Intake Unit will be able to immediately conduct its required systems clearances, establish the case initiation date (CID), and stage progress the case to the Family Services Stage (FSS). Note that both the FSI and faxed documents should be received by the Intake Unit at the same time (on the same day) to establish the CID and to stage progress to an FSS. If the faxed material and the electronic FSI arrive on different dates, Children's Services will establish the CID based on the fax date of the DSS-2921.

PROCEDURE:

Summary of Application Submission Requirements:

1. Complete the Family Service Intake (FSI) Template which includes: Narrative of the type of service being requested and the reason for involvement with the family; Programmatic Eligibility for preventive services; and Behavioral Concerns and Family Issues (Attachment 1). This template must be completed and filed in the hard copy case record before proceeding to Step 2.
2. Electronically submit the FSI to the Applications Unit. **The FSI should not be submitted without a completed Relationship Matrix.**
3. Fax the following documents to the appropriate Applications Unit fax number, based on the borough in which your program is located:
 - **Cover Page**, indicating your program name, contact person's name and telephone number, followed by names of the applicant(s) for whom you are submitting documents within that fax.
 - **DSS-2921, Common Application**, pages 1-3 and page 16. The data on pages 1-3 of DSS-2921 is used to open the case in WMS; page 16 includes the applicant's signature and date. Note: All relevant sections of the DSS-2921 applicable to preventive services need to be completed and maintained in the paper case record at the preventive agency.
 - **On page 1 of the DSS 2921**, in the field labeled, "Agency Helping Applicant/Contact Person," write:
 - (a) your agency name, agency ID, Vendor (program) ID
 - (b) the CONNECTIONS Case Number
 - (c) The word "Preventive"

Attachment 1

FAMILY SERVICES INTAKE

******WARNING****
CONFIDENTIAL
INFORMATION
AUTHORIZED
PERSONNEL ONLY**

Case Name:

Stage ID:

Case ID:

Stage Name:

Case Initiation Date:

Report Date:

District With Case Management: ACS

Agency With Case Planning:

Report Completed By:

I. ATTACH FAMILY SERVICES INTAKE REPORT FROM CONNECTIONS

II. INTAKE NARRATIVE

Type of Services Being Requested: ADVPO

Record the Reasons for Involvement with This Family:

III. PROGRAMMATIC ELIGIBILITY FOR PREVENTIVE SERVICES (MANDATED)

Need for Mandated Preventive Services to Clients at Risk of Placement or Replacement:

- Parental refusal
- Parent unavailability
- Parent service needs
- Child service needs
- Pregnancy
- Family Court-Ordered Services
- Unplanned Discharge

Describe the relevant behaviors and /or circumstances for selected eligibility factors. Identify the person(s) to whom they apply.

IV. BEHAVIORAL CONCERNS AND FAMILY ISSUES

1. Check the first box for all behavioral concerns and/or family issues, which require services, interventions and/or referrals. Comments are required for identified concerns/issues.

Child Issues

- Aggressive or defiant behavior
- Alcohol misuse
- Destruction of personal or community property
- Developmental status or cognitive ability impaired
- Drug misuse
- Fire setting
- Illegal activity, harmful relationships or groups
- Medical or mental health concerns exist
- Physically threatening or harming animals
- Physically threatening or harming family or non-family members
- Runaway or current whereabouts unknown
- Sexually acting out
- Sexually offending
- Suicidal or self-destructive behavior
- Supervision needs are unmet.
- Truancy
- Victim of a criminal assault; may include sexual assault

Specify all relevant behaviors and/or circumstances and identify the child(ren) to whom they apply.

Caretaker Issues

- Alcohol misuse
- Developmental status or cognitive ability impaired
- Domestic violence
- Drug misuse
- Illegal activity, harmful relationships or groups
- Medical or mental health concerns exist
- Suicidal or self-destructive behavior

Specify all relevant behaviors and/or circumstances. If there are two caretakers, identify the caretaker to whom they apply.

Family Issues

- Appearance or reappearance of a dangerous individual in the household
- Food, clothing or shelter needs unmet.
- Family crisis; death of a family member, fire or other catastrophic event
- Income inadequate to meet family's basic needs
- Multiple family stressors affecting care of child.
- Unsafe or unsanitary living conditions/substandard housing
- Other, specify: _____

Specify all relevant behaviors and/or circumstances.

2. Critical Concerns and Issues

Review the list of identified issues and check the second box if any issues are critical concerns and require emergency services.

3. Emergency Services Required

Check appropriate emergency services to address identified issues.

- Adoption Surrender
- Crisis Response Services
- Detox Services
- Domestic Violence Services
- Emergency Food, Cash, Goods
- Emergency Health Related Services
- Emergency Housing
- Emergency Mental Health Services/Evaluation
- Family Preservation Services (Intensive Home based)
- Foster Care Services for Children
- Order of Protection
- Respite Care
- Other (Specify in narrative)

II. Actions Taken

Document emergency services offered and immediate actions taken, including Family and Community resources.