MEMORANDUM OF UNDERSTANDING BETWEEN

THE NEW YORK CITY ADMINISTRATION FOR CHILDREN'S SERVICES AND

THE NEW YORK CITY DEPARTMENT OF YOUTH AND COMMUNITY DEVELOPMENT

This Memorandum of Understanding ("MOU"), effective as of September 1, 2017 (the "Effective Date"), is made and entered into by the New York City Administration for Children's Services ("ACS"), located at 150 William Street, New York, New York 10038, and the New York City Department of Youth and Community Development ("DYCD"), located at 2 Lafayette Street, 21st Floor, New York, New York 10007.

WITNESSETH

WHEREAS, ACS is the agency of the City of New York ("City") dedicated to protecting the City's youth and strengthening families through the provision of various child welfare services, including preventive services and foster care services;

WHEREAS, DYCD supports the City's youth and their families by administering a variety of youth and community development programs including through a program in which DYCD provider agencies operate approximately ninety-one (91) school-based community centers that provide various educational, athletic, and recreational programming during non-school hours (the "Beacon Program");

WHEREAS, the Beacon Program, given the locations of program sites, availability during evening and weekends, and overall programmatic environment, provides the City a greater opportunity for outreach to families with children (a) at risk of foster care placement, or (b) that have been placed into foster care but where the family is working towards reunification or adoption;

WHEREAS, ACS wishes to provide DYCD funding for fifteen (15) Beacon Program sites to provide general preventive services to eligible children and their families where such services are designed to (a) ensure the safety of children at risk of foster care placement, reduce risks of foster care placement, and preserve, support and strengthen the family, and (b) promote family reunification or adoption for children that have been placed into foster care and prevent replacement into foster care (collectively, the "Foster Care Prevention Program"); and

WHEREAS, the parties are willing and able to perform their respective duties and responsibilities as set forth herein.

NOW THEREFORE, in consideration of the mutual covenants herein contained, the parties hereby agree as follows:

Article I. Term; Renewal; Termination

- A. The term of this Agreement is for the period beginning on the Effective Date through June 30, 2020.
- B. This Agreement may be renewed one (1) time by mutual written agreement of the parties for a period of three (3) years for the renewal.

C. Termination

- 1. Either party may terminate this Agreement without cause (a) upon thirty (30) days written notice to the other party, or (b) immediately by mutual written consent of the parties.
- 2. Any party may terminate this Agreement immediately if, in such party's reasonable judgment, just cause exists.
- 3. This Agreement is funded by funds secured from the federal, New York State, and/or City governments. Should there be a reduction or discontinuance of such funds by action of the federal, New York State, and/or City governments, ACS shall have, in its sole discretion, the right to terminate this Agreement in whole or in part, or to reduce the funding and/or level of services of this Agreement caused by such action by the federal, New York State, and/or City governments. ACS shall notify DYCD of any such termination as soon as reasonably practicable. Any reduction in funds pursuant to this Article I.C.3 shall be accompanied by an appropriate reduction in the services contemplated by this Agreement.

Article II. Scope of Services; Funding

A. Foster Care Prevention Program

- 1. In accordance with the Scope of Work attached hereto as Appendix B:
 - a. DYCD shall cause its Beacon Program providers to operate the Foster Care Prevention Program; and
 - b. ACS shall provide program support to Beacon Program providers.
- 2. Effective as of September 1, 2017, DYCD shall cause its Beacon Program providers to:
 - a. require all front line staff and supervisors to complete six (6) days, or forty-two (42) cumulative hours of training, annually as required by ACS. Such training may include the following topics (i) safety and risk investigation, synthesis and assessment, (ii) motivational interviewing, and (iii) building coaching competency.

- b. designate a staff person or persons whose primary role is conference facilitation and/or coordination of Family Team Conferences (each a "Conference Facilitator") and that will provide support to program case planners and case planner supervisors in scheduling and coordinating conference with families.
- 3. Effective as of January 1, 2018, DYCD shall cause its Beacon program providers to:
 - c. increase the level of supervisory contact for all Case Planners, which may include, but is not limited to: (i) limiting the supervisory span of responsibility for each Case Planner Supervisor to no greater than four (4) Case Planners; and (ii) increasing the frequency Case Record reviews of each open client case to at least every two (2) weeks.
 - d. designate one staff person to (a) assist in initial outreach and engagement efforts, provide in-home parent assistance, teach/demonstrate household management skills, advocate for parents and families, escort parents to service sites, and model appropriate behaviors in various situations (a "Parent Aide"), or (b) support Case Planners and Case Planner Supervisors with administrative tasks, scheduling, contacting service providers, accompanying Case Planners on visits, and other duties as needed (a "Case Aide").
 - e. designate one (1) staff member with responsibility for implementing and monitoring quality assurance/quality improvement ("QA/QI") standards within Contractor's agency.
 - f. create and implement an employee incentive program to enhance employee recruitment, engagement, and retention, which may include, but is not limited to:
 (i) longevity increases, and (ii) through incentive payments and/or differential payments for staff with special skills or experience (e.g., language skills, experience with specialized populations).

B. <u>Funding</u>

- 1. ACS shall reimburse DYCD for the cost of operating the Foster Care Prevention Program. The maximum reimbursable amount for this MOU shall not exceed thirty-three million six hundred sixty-three thousand seven hundred forty-one dollars (\$33,663,741.00) in accordance with the budget contained in the attached Exhibit A and incorporated herein. No liability shall be incurred by ACS beyond the amount of the maximum reimbursable amount.
- 2. DYCD shall submit invoices to ACS on a quarterly basis. The invoices shall be in a form established by ACS and shall be accompanied by appropriate supporting documentation and any other information reasonably deemed necessary by ACS. ACS may disallow for payment any expenses or charges which were not authorized or documented in accordance with the terms of this MOU.

Article III. Recordkeeping and Audit Requirements

- A. <u>Books and Records.</u> DYCD shall maintain separate and accurate books, records, documents and other evidence, and to utilize appropriate accounting procedures and practices, which sufficiently and properly reflect all direct and indirect costs of any nature expended in the performance of this MOU, for six years after the final payment or expiration or termination of this MOU, or for a period otherwise prescribed by law, whichever is later.
- B. <u>Maintenance of Records</u>. DYCD agrees to maintain any and all books, records, documentation, justifications and other evidence relevant to this Agreement, including those required pursuant to <u>Article III.C</u>, for six years after the final payment or expiration or termination of this MOU, or for a period otherwise prescribed by law, whichever is later. In addition, if any litigation, claim, or audit concerning this MOU has commenced before the expiration of the six-year period, the records must be retained until the completion of such litigation, claim, or audit.

C. <u>Inspection</u>

- 1. At any time during the MOU or during the record retention period set forth in Article III.B, ACS, as well as City, state and federal auditors and any other persons duly authorized by ACS shall, upon reasonable notice, have full access to and the right to examine and copy all books, records, and other documents maintained or retained by or on behalf of DYCD pursuant to this Article III.
- 2. ACS shall have the right to have representatives of ACS or the State of New York or federal government present to observe the services being performed pursuant to this MOU.

D. Audit

- 1. This MOU and all books, records, documents, and other evidence required to be maintained or retained pursuant to this MOU, including all invoices presented for payment and the books, records, and other documents upon which such invoices are based (e.g., reports, cancelled checks, accounts, and all other similar material), are subject to audit by (a) ACS, (b) the State of New York, (c) the federal government, and (d) other persons duly authorized by the City, for six years after the final payment or expiration or termination of this MOU, or for a period otherwise prescribed by law, whichever is later.
- 2. DYCD shall submit any and all documentation and justification in support of expenditures or fees under this MOU as may be required by ACS.
- 3. DYCD shall not be entitled to final payment until DYCD has complied with the requirements of this Article III.D.

Article IV. Miscellaneous

- A. <u>Compliance with Law</u>. DYCD is responsible for ensuring that any service provided pursuant to this MOU, or by any sub-contract, affiliation or grant hereunder, complies with all pertinent provisions of federal, state or local statutes, rules and regulations, and that all necessary approvals hereunder have been obtained.
- B. <u>Notice</u>. Notices required herein shall be in writing and shall be deemed to have been given when sent by certified mail, return receipt requested, and shall be delivered to the other party at the following address:

To DYCD:

2 Lafayette Street, 21st Floor New York, New York 10007 Attention: General Counsel

To ACS:

150 William Street
New York, NY 10038

Attention: Assistant Commissioner, Community-Based Services

- C. <u>Modification</u>. This Agreement may only be modified through the mutual written agreement of the parties.
- D. <u>Survival</u>. Except for subsection 2 of section D, <u>Article III</u> shall remain in full force and effect following the expiration or termination of this MOU.
- E. <u>Entire Agreement</u>. This MOU contains all the terms and conditions agreed upon by the parties hereto, and no other agreement, oral or otherwise, regarding the subject matter of this MOU shall be deemed to exist or to bind any of the parties hereto, or to vary any of the terms contained herein. Any change, amendment, or extension of this Agreement shall be made in writing by mutual agreement of the parties and made part of this Agreement.

[Signature Page Follows]

IN WITNESS WHEREOF, the parties have duly executed this MOU effective as of the date first above written.

City of New York	City of New York
Administration for Children's Services	Administration for Children's Services
Morgand	Jacquelippat
Signature	Signature
Lisa Parrish	Jacqueline Martin
Name	Name
Financial Services	Preventive Services
Division	Division
4/5/18	3.27.18
Date	Date
City of New York	
Department of Youth and Community Dev	velopment
Signature	
Caroline Press	
Name	
General Counsel	
Division	
Date	

Exhibit A Budget

Beacons MOU Budget Summary

	FY18		FY19	FY20
1	Phase 1 Sept 1, 2017 (10 months) Phase 2 Jan 1, 2018 (6 months)			
Base CT	\$	7,176,343.00	8,611,617.00	8,611,617.00
Ongoing DOE Opening Feed	\$	386,816.00	386,816.00	386,816.00
TOTAL BASE	\$	7,563,159.00	8,998,433.00	8,998,433.00
Training	\$	90,953.00	719,100.00	719,100.00
CONF Facilitator	\$	599,253.00	109,140.00	109,140.00
TOTAL PHASE 1	\$	690,206.00	828,240.00	828,240.00
Supervisory Ratio	\$	172,156.00	344,312.00	344,312.00
Staff Support	\$.	260,528.00	521,056.00	1,006,876.00
Case Aides	\$	340,200.00	680,400.00	680,400.00
QA/QI	\$	263,088.00	526,176.00	617,526.00
TOTAL PHASE 2	\$	1,035,972.00	2,071,944.00	2,649,114.00
TOTAL ACS FUNDING	\$	9,289,337.00	11,898,617.00	12,475,787.00

Exhibit B Scope of Work

A. Foster Care Prevention Program Goals and Objectives

The goals and objectives for the Foster Care Prevention Program are to:

- 1. prevent child abuse and neglect;
- 2. reduce the number and percentage of placements into foster care for youth receiving preventive services;
- 3. reduce the number and percentage of youth who are the subject of subsequent abuse and neglect reports;
- 4. serve youth and their families in their neighborhood of origin;
- 5. promote the optimal health, well-being, and development of youth; and
- 6. strengthen families.

B. Foster Care Prevention Program Approach

1. Contractor Qualifications

- a. DYCD Beacon Program providers (each a "<u>Contractor</u>") shall provide preventive services to families with youth at risk of foster care placement in a manner which ensures the safety of the youth and seeks to preserve, support and strengthen the family, when appropriate.
- b. The design and delivery of all preventive services would be family-focused and inclusive of the needs and culture of the community. Services would address the individual needs of the youth and the family members residing with the youth.
- c. The Contractor shall employ a holistic approach to child welfare services and engage in ongoing efforts to bring about the necessary changes in service delivery culture.
- d. The Contractor shall provide preventive services in accordance with all existing Federal, State, and City laws, rules, and regulations, and consistent with policies, procedures, and standards promulgated by ACS. This includes the ACS Preventive Services Quality Assurance Standards and Indicators.
- e. The Contractor shall maintain a program utilization level of one hundred percent (100 %).
- f. The Contractor shall provide support services and counseling to at-risk youth and families within their own neighborhood or as close to their own neighborhood as possible, when appropriate.

- g. The Contractor shall ensure that culturally and linguistically competent services are provided through a staff that is representative of the community served and fluent in the languages spoken by participating youth and family members. To the extent possible, the Contractor shall also recruit and hire appropriately qualified staff from the community served.
- h. Whenever possible, the Contractor shall employ social work staff who have a Masters in Social Work or equivalent levels of education and/or experience.

2. <u>Staff Qualifications</u>

- a. The Contractor shall review prospective staff members' qualifications and make hiring decisions in the context of the size of the program. A small program needs a higher proportion of staff with strong child welfare (child protective, foster care or preventive services) experience than does a large program because of its lack of managerial/supervisory depth.
- b. The program director shall have a Masters in Social Work or an equivalent human services graduate degree as approved by ACS, and significant experience in an administrative or supervisory position in a community-based public or private agency doing related work with a similar position.
- c. The supervisor shall have a Masters in Social Work or an equivalent human service graduate degree as approved by ACS, and at least two years of documented satisfactory experience working with a similar population. Supervisory experience is required, although not necessarily in a formal supervisory position.
- d. Intake worker(s) shall have a Bachelor of Arts, Bachelor of Science, Bachelor of Social Work and supervisory experience.
- e. The case planner shall have a Bachelor of Arts, Bachelor of Science, Bachelor of Social Work, or Masters in Social Work or equivalent human services graduate degree and at least two (2) years of documented satisfactory experience working with similar populations.
- f. Other professional staff and consultants shall have degree/professional accreditation/licensure and experience appropriate to the particular position. Psychologists, nurses, and others requiring licensure must document each year a current New York State license/registration.
- g. Parent aides shall have at least one (1) year of appropriate experience working with a similar population or successful completion of and

- graduation from an ACS family treatment/rehabilitation program or similar program.
- h. Childcare worker(s) shall have one (1) year of appropriate experience working with a similar population or successful completion of and graduation from an ACS Family Rehabilitation Program or similar program.
- i. Other paraprofessionals shall have at least a high school diploma/general equivalency diploma and training and experience appropriate to the particular position.
- j. Social work staff shall have demonstrated experience and skill with, and commitment to, the practices and concept of family treatment, as well as knowledge of and experience with domestic violence issues. Social work staff shall also have experience and skill with substance abuse, domestic violence, and mental health issues.
- k. Caseload/Supervisory Ratios. Actual ratios may vary with an average annual caseload of twelve (12) for case planners. New York State Office of Children and Family Services regulations require that a preventive services provider would assign a family to not more than one case planner at a time. Individual caseloads significantly higher than twelve (12) are not recommended because of the level of services families require. A supervisory caseload is not to exceed four (4) case planners.

3. Program Accessibility of Services

- a. Participants shall have access to all services in the Beacon Program.
- b. The Contractor shall operate during hours that reflect the needs of the youth and families to be served, including after school and evening availability.
- c. The Contractor shall assess the communication skills of each youth and family to be served.
- d. The Contractor shall make services accessible to youth with physical disabilities, including but not limited to, TDD service, large print informational reading materials, and establishing referral protocols to programs serving families who have one or more members with a disability.
- e. The Contractor shall assist each parent in obtaining appropriately supervised child care services.

C. Program Design

1. Core Service Areas

a. Social Work Services and Advocacy

- i. Case planners shall identify and provide those specific services that address those issues placing a youth at risk of foster care placement or delaying successful discharge and family reunification.
- ii. Case planners shall prioritize assessment of the safety of youth in each household and take all necessary and appropriate measures to ensure their safety, including, but not limited to, all actions required of mandated reporters.
- iii. In their initial assessments, the case planners shall consider youth and family history information available from individuals significantly involved in the youth's life, including, but not limited to the youth's parents, extended family members, teachers, friends, and recreational personnel. The Contractor shall incorporate these individuals into the youth's and family's support network, to the extent that such inclusion is deemed appropriate. In addition, the Contractor shall conduct domestic violence, substance abuse, and mental health screenings during initial case assessments and establish protocols for addressing such issues when indicated.
- iv. Case planners shall be responsible for case planning and ensure that youth and parents and primary caretakers are actively involved in goal setting and service planning. Youth participation shall be assumed appropriate for youth aged ten (10) and older unless deemed inappropriate and supporting reasons for such a determination are documented. Case planners must review the service plans with the family and adjust the goals and services as needed to meet the needs of the family.
- v. The Contractor shall promote and support frequent and positive parent-child interactions, such as family counseling, parent-child homework groups, and recreational and socialization activities.
- vi. During the initial stages of participation in the program, case planners shall schedule weekly casework contacts, including extensive home-based casework contact with the youth and family members living in the home, and with nonresident family members to the extent appropriate to achieve the family's agreed upon goals as indicated in the approved service plan. Casework contacts must meet or exceed the recommended minimums specified in ACS Preventive Services Quality Assurance Standards and Indicators and other applicable policies.

- vii. Case planners shall serve as advocates on behalf of the youth and families, with activities including, but not limited to, coordinating services for the family, assisting youth and their resident family members in navigating governmental and private sector systems to the extent required to successfully address the individual's needs, including, but not limited to, interactions with the managed care plans, Department of Education, Human Resources Administration, and the New York City Housing Authority.
- viii. The Contractor shall perform outreach and engage non-custodial and/or incarcerated parents to the extent necessary to successfully implement the youth's and family's approved service plan.

Alcohol and Substance Abuse

- i. Within thirty (30) days of referral, qualified key staff members shall assess and screen for alcohol and substance abuse issues affecting youth and their resident family members using formal assessment instruments.
- ii. The Contractor shall provide counseling services, advocacy, and referrals to address substance abuse issues.

c. Domestic Violence

- i. Within thirty (30) days of referral, qualified key staff members shall assess and screen for domestic violence.
- ii. The Contractor shall provide counseling services, advocacy, and referrals to address domestic violence issues.

d. Health Services

- i. Within thirty (30) days of referral, whenever appropriate and necessary, the Contractor shall assess the youth's eligibility for Medicaid, or for Child Health Plus and assist families in obtaining health services coverage when eligible.
- ii. The Contractor shall obtain a youth's health history and assess the youth's health and well-being within the first ninety (90) day Family Assessment and Service Plan (FASP) period. This includes obtaining immunization history and information about the health service providers involved with the family in compliance with applicable policies and law. The Contractor shall encourage parent/caretaker cooperation in the collection of such data, and

educate and assist families in recording and maintaining their own health records/histories.

- iii. Case plans and goals shall include a full comprehensive medical examination for each youth in the household, if one has not been performed within the last year. The Contractor shall work with parents to facilitate the scheduling of appointments and follow-up visits to ensure the updating of youth immunizations.
- iv. The Contractor shall educate parents on preventive care, make educational materials available on-site and for discussion during group/individual counseling. Educational materials shall include but not be limited to information on HIV/AIDS, substance abuse, good prenatal care, domestic violence (including partner abuse, teen relationship violence and elder abuse), smoking and good nutrition. The Contractor shall also provide information about how to access health services in the community.
- v. The Contractor shall assist the youth's parent(s) in the selection of a neighborhood-based primary care physician, if one is needed, and making appointments with the physician, where necessary.
- vi. The Contractor shall recognize indicators of mental health issues and provide necessary counseling and treatment referrals.
- vii. Within thirty (30) days of referral, and whenever appropriate and necessary, the Contractor shall use a screening tool to recognize indicators of mental health issues and provide necessary counseling and treatment for youth and family members.
- viii. The Contractor shall assist pregnant clients with obtaining quality, neighborhood-based prenatal and postnatal counseling and services or pregnancy termination counseling and services where such services are appropriate and available.
- e. <u>Parenting Skills</u>. The Contractor shall provide parenting skills training in a manner that is sensitive and responsive to the needs of specific parent categories, such as teen parents, non-English speaking parents, or terminally ill parents. The Contractor shall also provide individualized parenting skills training in cases where group participation is not appropriate.

f. Housing and Housing Subsidies

i. The Contractor shall assist clients in obtaining appropriate housing where housing issues, including those arising from domestic violence situations, are a presenting problem for the family and

stand in the way of the youth's safety, or health, or delay reunification.

ii. The Contractor shall promote and monitor its staff's appropriate use of housing subsidy services targeted to the eligible preventive service population.

g. Education Employment and Job Training Services

- i. The Contractor shall promote parent/caretaker involvement in their youth's education program, such as assuring youth's enrollment and attendance in school, monitoring homework, attending parent-teacher meetings and school open houses, participating in parent advocacy groups, and communicating their youth's educational needs to teachers, guidance counselors and school administrators.
- ii. The Contractor shall provide up-to-date information on vocational and college preparatory programs and assist with enrolling in such programs.

2. Program Elements

a. Outreach

- i. The Contractor shall receive referrals from ACS, the school where the Contractor operates, other schools, community-based organizations (including DYCD), and other Beacon Program providers.
- ii. The Contractor shall reach out to referred youth and families to ensure family participation and retention in preventive programs.
- iii. The Contractor shall identify families resistant to services and develop and implement a strategy for addressing the particular challenges posed by such families.

b. Discharge/Termination/Transition

i. The Contractor shall create a "community of care" by actively coordinating the planning of services between preventive service agencies, foster care agencies and local neighborhood providers in a manner that ensures the continuous provision of supervision, services and support to a youth and her/his family during the critical point of transition between foster care placement and family reunification. Specifically, the Contractor shall interact with foster

care agencies prior to the youth's final discharge home in cases where the foster care agency has identified the need for preventive services after final discharge, made a formal referral for services, and received ACS approval for such services.

- ii. The mechanism for coordination between the foster care agency and the preventive service agencies as described above would be a formal referral from the foster care agency to the preventive service agencies. Upon referral, the preventive service agency would participate in discharge planning to the extent necessary and appropriate.
- iii. The Contractor shall facilitate and encourage a Family to Family approach when providing preventive services to youth, their families and foster parents who have participated in foster care services and where it is appropriate to continue the relationship between the birth family and foster family.
- iv. Service Termination Conferences. ACS Child and Family Specialists will facilitation Service Termination Conferences for families in preventive services who are moving toward service termination prior to closure of the prevention services case.

c. <u>Staff Development and Training</u>

- i. Training for all staff shall include, but not be limited to, motivational interviewing and communications skills, assessment and goal setting, cultural and language competency, mandated reporting. safety and risk assessment, case planner and supervisor common core, family therapy, mediation, recognizing indicators of developmental delays, substance and alcohol abuse, stress management, client outreach, engagement and retention skills, application procedures for public assistance programs and Medicaid or Medicare, working with physically and developmentally disabled clients, indicators of mental health issues and appropriate actions to take upon indication, indicators of domestic violence (including partner abuse, teen relationship violence, and elder abuse) and appropriate actions to take upon indication, working with HIV/AIDS populations, and range of crisis intervention services available to address clients' needs, as well as Connections and PROMIS systems.
- ii. The Contractor shall ensure that all appropriate staff receive training specific to the provision of neighborhood-based services, including training on community characteristics, resources, and needs, and on

- how to successfully negotiate services for youth within a neighborhood-based environment.
- iii. The Contractor shall ensure that training includes the participation of representatives from community-based service providers, such as local hospitals, police precincts, and drug treatment centers, as well as community residents.
- iv. The Contractor shall ensure that all appropriate staff receive training about the Family to Family service philosophy, including training about how to facilitate the foster parent's role as mentor to the birth parents or caretakers in appropriate areas of youth behavior and management, as well as in various aspects of daily living.
- v. The Contractor shall educate staff and clients about welfare reform work requirements and demonstrate how it will assist clients in complying with participation requirements and setting goals.

d. Partnerships/Linkages

- i. The Contractor shall meet the full range of client needs either directly or through linkages with other neighborhood-based service providers. The Contractor shall access specialized services outside of the community in instances in which the youth's or family's needs cannot be addressed by providers within the community.
- The Contractor shall establish a referral and treatment arrangement ii. and coordinate service delivery with at least three (3) community partnerships in the following areas: (1) health - comprehensive, coordinated/integrated, timely, continuous, high quality, youthfocused and family-friendly services; (2) substance abuse treatment (drug and alcohol free services) from providers who are licensed by the New York State Office of Alcoholism and Substance Abuse Services (OASAS) or part of the Health and Hospitals Corporation (HHC); (3) mental health treatment – formal referral and treatment neighborhood-based; arrangements. preferably employment/vocational training; (5) chronic physical, mental or developmental disabilities; and/or (6) community college education. Note that community partnerships must be unique to the ACS Prevention Program, i.e., the Contractor cannot use community partnerships utilized by the Beacon Program.
- iii. The Contractor shall establish linkages to appropriate self-help groups, such as Alcoholics Anonymous, Narcotics Anonymous and Al-anon for those youth with substance abuse issues and their family

members. The Contractor shall also encourage and facilitate client participation in such services.

iv. Contractor shall ensure that the ACS Prevention Program has a solid relationship with the Beacon's host school. The Prevention Program shall accept referrals from the school and provide resources to ensure effective delivery of ACS services. The ACS Prevention Program shall establish a presence at the school to aid recruitment and encourage participation by families and ensure they are aware of all available support services.

e. <u>Monitoring, Evaluation and Quality Improvement</u>

- i. The Contractor shall conduct interviews with youth to assess services on an ongoing basis and ascertain the effectiveness and satisfaction with the services which have been provided. The Contractor shall develop its own interview and written survey instruments, which will be subject to ACS approval.
- ii. The Contractor shall cooperate with ACS assessment and evaluation systems and provide all information necessary to allow ACS to fulfill these responsibilities.
- iii. The Contractor shall maintain adequate case files and fiscal records, and shall ensure that staff follow appropriate record-keeping practices and procedures in a manner which is in compliance with and supports all existing Federal, State and City laws, rules and regulations, and is consistent with policies, procedures and standards promulgated by ACS.
- iv. At both the case and program level, Contractor shall collect and report data requested by ACS in the PROMIS and Connections management information systems so that ACS may assess critical service activities and ensure that the stated goals of the child welfare system are effectively and appropriately being met.
- v. The Contractor shall provide sufficient information to ACS to enable it to collect data and monitor additional performance indicators as appropriate and as part of a full evaluation process.
- vi. The Contractor shall conduct exit interviews with each youth and her/his parent(s) or caretakers upon discharge from preventive services to ascertain the effectiveness of the Foster Care Prevention Program and to learn more about the youth's and family's experience. When appropriate, exit interviews shall also be conducted with members of the youth's household. The Contractor

shall develop its own interview instruments which will be subject to ACS approval.

- **D.** <u>Program Support</u>. The ACS Division of Preventive Services (DPS) shall provide the Contractor with the following new resources:
 - 1. A Beacon Prevention liaison within DPS to support ACS Beacon Prevention Programs to engage families, develop meaningful collaborative relationships with host schools, and build community referrals to the program.
 - 2. Training from ACS on the Center for the Study of Social Policy's Strengthening Families Protective Factors Framework in order to help guide case practice to support family stability and well-being in the context of community and primary prevention.
 - 3. Inclusion in DPS Community Prevention initiatives focused on building collaboration at the neighborhood level among providers serving similar target populations.