

Out-of-State Placement Committee

2010 Annual Report to the Governor and Legislature

June 2011

Submitted by: New York State Council on Children and Families

Pursuant to: Chapter 392 of the Laws of 2005

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Deborah Benson, Executive Director

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Introduction

The Council on Children and Families is required to submit an annual report on behalf of the Out-of-State Placement Committee (hereinafter referred to as the Committee) to the Governor and the Legislature. This sixth annual report begins with a brief background on the establishment, past and current work of the Committee, and outlines the status of out-of-state residential placements by the New York State Education Department (SED) and the New York State Office of Children and Family Services (OCFS), and other activities addressing services and placement issues for New York's children and youth.

During 2010, the Commissioners' Committee on Cross-Systems Services for Children and Youth continued to meet quarterly. Additionally, under the leadership of the Council, senior staff and family and youth partners met each month to continue the work of the Commissioners' Committee; this group is referred to as the Commissioners' Senior Staff & Family/Youth Partners Workgroup. Also, in April 2010, the ENGAGE e-Newsletter was created and launched by the Council to deliver pertinent and current information on the work of the New York State Children's Plan; the Commissioners' Committee, systems of care and the Coordinated Children's Services Initiative (CCSI). These efforts all further the goal of providing more effective integration approaches for delivering services and supports for children, youth and families. Given the ongoing interagency work and efforts, as coordinated by the Council and described in this report, the Committee was not convened in 2010. The work of the Committee is conducted and advanced through these interagency initiatives and structures.

As discussed below, since the reporting of out-of-state placements data in 2005 (Snapshot Data, June 30, 2004), out-of-state placements have been reduced by 57 percent - from 1,400 children and youth in 2005 to 597 children and youth placed in out-of-state residential schools and programs in 2010. In the 2009 Annual Report, it was reported that a total of 676 children and youth were placed in out-of-state residential schools and facilities. This reflects a 13 percent decrease for the same time period from 2009 to 2010.

Background

The Out-of-State Placement Committee was established in statute (Chapter 392 of the Laws of 2005) to accomplish the following:

- Develop a monitoring and accountability structure to address the health and safety of children served by out-of-state schools and facilities;
- Enhance New York's service system infrastructure to allow for the children most at risk of being referred and placed in out-of-state schools and facilities to be served within New York in the most appropriate, least restrictive and safest setting; and
- Strengthen in-state mechanisms that enhance service delivery across agencies.

- The Committee is chaired by the Executive Director of the Council on Children and Families and comprises the Commissioners of seven state agencies [the Office of Children and Family Services (OCFS), the State Education Department (SED), the Office of Mental Health (OMH), the Office for People with Developmental Disabilities (OPWDD), the Office of Alcoholism and Substance Abuse Services (OASAS), the Department of Health (DOH), and the Office of Probation and Correctional Alternatives (OPCA) within the Division of Criminal Justice Services.]

2010 Out-of-State Placements - Updates

A. Reduction in Out-of-State Placements

Activities of SED Non-district Unit (NDU) and OCFS Out-of-State Placement Oversight Office

As of December 1, 2010, there were 597 children and youth placed in out-of-state residential schools and facilities. Of these 597 children and youth, 477 were placed by local school districts and 120 by local departments of social services (LDSS). In the 2009 Annual Report, it was reported that a total of 676 children and youth were placed in out-of-state residential schools and facilities, with 521 being placed by local school districts and 155 by LDSS. This reflects a 13 percent decrease for the same time period from 2009 to 2010. Specifically, local school districts decreased out-of-state placements by 9 percent (reversing the 9 percent increase experienced in 2009), and LDSS placements decreased by 23 percent. Overall, there has been a 57 percent reduction in out-of-state placements since 2005 (when the Committee initially began collecting this data).

SED reports that ongoing monitoring at the State level by SED of requests for out-of-state placements by Committees on Special Education (CSEs) continued during 2010. SED also established additional administrative review and approval of placements in Emergency Interim Placements (EIP's). These residential placements are made on a student-specific basis when a CSE has provided justification that there are no available placements in New York State (NYS) approved private in-state and out-of-state residential schools.

The OCFS policy communicated to LDSS requiring them to make every effort to identify appropriate in-state placement options before referring a child or youth in foster care to out-of-state residential programs continued to result in declining numbers of out-of-state placements during 2010. Overall, it is notable that, for OCFS, the year-to-year reductions in LDSS out-of-state placements numbers have continued since 2005.

B. Development of Monitoring and Accountability Structure

Interagency Review of Out-of-State Schools and Residential Programs

The SED Non-district Unit (NDU), created in 2005, has responsibility for quality assurance and oversight functions for all SED approved in-state and out-of-state residential schools. During March 2010, administrative staff from in-state private schools accompanied SED NDU staff on visits made to Woods Services and Melmark School, both in Pennsylvania. The purpose of these site visits was for these NYS providers, who were expanding to serve students returning to New York, to observe the programming and operations of these out-of-state residential schools.

In 2009-10, SED conducted program reviews in four approved out-of-state residential schools: Devereux-Connecticut; Devereux-Pennsylvania; Easter Seals-New Hampshire; and Hillcrest Educational Center-Massachusetts.

As a result of the death of a NYS student on July 24, 2010 at Woods Services, Pennsylvania, the Department of Child Welfare in Pennsylvania, the agency that licenses the residential component of the school, closed the school to new admissions on August 5, 2010. Since NYS' approval of Woods Services is contingent upon approval by the appropriate oversight agencies in Pennsylvania, no new referrals to Woods Services from NYS school districts were permitted. The Pennsylvania Department of Child Welfare re-opened Woods Services to new admissions effective October 12, 2010. Pursuant to a Memorandum of Agreement between SED and the NYS Commission on Quality of Care and Advocacy for Persons with Disabilities (CQCAPD), an investigation of the student's death was conducted. As a result of this investigation, SED required Woods Services to implement corrective actions.

In June 2010, SED issued a self-review protocol to all NYS approved residential schools: *Behavior Management and Support for School-age Students in Residential Schools*. The Protocol focuses on compliance with SED program standards for behavioral interventions for students with disabilities related to: (1) Functional Behavioral Assessments; 2) Behavioral Intervention Plans; (3) use of time out rooms; (4) emergency interim interventions; as well as (5) required procedures for the protection of children from abuse, maltreatment and neglect.

All SED-approved residential schools were required to complete the Protocol, in the five areas identified above, by November 30, 2010 for the time period of July 1, 2009 through June 30, 2010. Additionally, using the protocol, each school reviewed whether its policies, procedures and practices were in compliance with State and federal law, and identified any corrective actions and improvement activities needed to address compliance issues.

In October 2010 and February 2011, SED provided all residential schools with two professional development opportunities, the first on requirements for completing the Protocol, and the second on the regulatory requirements associated with the Protocol and research-based behavioral intervention practices. In addition, SED's Regional Special Education Technical Assistance Support Centers have nondistrict specialists that provide targeted technical assistance and regional training to residential schools statewide, many of which are focused on the five areas of the protocol.

By June 1, 2011, all residential schools must provide an update of school improvement activities as a result of its initial assessment in November 2010, and ensure that all compliance issues are corrected. All residential schools must keep the Protocol on file, and it must be made available to SED for review upon request.

In 2010, OCFS conducted three on-site visits to the following out-of-state residential programs: Stetson School, Whitney Academy and Hillcrest Center, all of which are located in Massachusetts. In 2011, OCFS plans to conduct site visits to Devereux Residential Treatment Centers-Pennsylvania, Devereux Residential Treatment Center-Massachusetts, and Germaine Lawrence-Massachusetts.

During 2010, OCFS sent out desk reviews to 29 out-of-state residential programs in 10 different states. In responding to these reviews, out-of-state residential programs were requested to provide to OCFS the following documents, or to update the information if it had changed from the previous year:

- Residential and school licensure
- Policies and procedures on room isolation and confinement
- Last 6 months of restraint reports on NYS youth, discipline and restraint methods as well as reasons for restraints
- Resident rights, grievances and complaint procedures
- Resident handbooks and procedures that are given upon admission
- Agency Accreditation

The OCFS review of responses and information collected from the out-of-state residential programs reflected no health and safety concerns. This is the second year that OCFS has requested this desk review information, which will continue to be requested by OCFS on an annual basis from the out-of-state residential programs. OCFS continues to monitor restraint reports submitted by out-of-state residential programs for children and youth placed by LDSS from NYS.

Development of Out-of-State Registry

SED has operated its registry of approved out-of-state schools since July 2005. A link on the Council's website currently directs the user to the approved out-of-state schools registry on SED's website.

In the Fall of 2009, the OCFS Residential Care Registry became operational, but access was available only via OCFS' internal website. In 2010, OCFS reported that the OCFS Residential Care Registry is on the *internet*, but is only available to OCFS employees and partners with a Username and password. In 2011, OCFS plans to develop a new site for in-state congregate care programs. This new Registry will be easy to use and will allow the public to search for voluntary agencies that offer the desired programs and services in a given area. The out-of-state residential programs that provide residential services to NYS foster care youth will continue to be maintained on the OCFS Geographical Information Center (GIC) site. As with the SED registry, when the OCFS Residential Care Registry becomes available to the public, a link will be placed on the Council's website to direct users to the OCFS registry.

The OCFS Residential Care Registry contains information on all Voluntary Agencies (in-state and out-of-state) that provide congregate care to youth placed by LDSS. The Registry includes the following:

- Agency name, location and basic information on programs and populations served.
- A mapping feature that allows the user to determine the closest available program for placing children and youth.
- Hyperlink capability so that the user can access an Agency's website for additional information.
- A search capacity that will allow a user to search for a specific service provision (*currently under development*).

The Registry also has data available that may be useful for New York State local planning purposes. Data currently available on the Registry includes:

- Bed Utilization
- County Care Days

- Foster Care Admissions and Discharges
- LDSS Out-of-State Residential Placement numbers

C. Data Collection and Surveys

Children and Youth Discharged from Out-of-State Schools and Residential Programs

SED reports that, at the conclusion of the 2009-10 school year, a total of 174 children and youth were discharged from out-of-state residential schools. At the end of the 2008-09 school year, a total of 135 children and youth were discharged, and in the 2007-08 school year, 167 children and youth were discharged from out-of-state residential schools. The following data is reported by SED for all children and youth returning from out-of-state local school district CSE placements during the 2009-10 school year (the most recent data currently available).

All NYS Students Discharged from Out-of-State Schools

June 30, 2010

(where they went upon return)

<i>In-State Public</i> -----	21
<i>In-State Private</i> -----	23
<i>Aged Out (students who have reached 21 years of age without a diploma)</i> -----	73
<i>Graduated (students between the ages of 18 - 21, who have received their diploma)</i> -----	15
<i>Home Instruction – (Medical)</i> -----	0
<i>Institution (psychiatric or developmental center, correctional facility)</i> -----	1
<i>Other: Deceased</i> -----	1
<i>Dropped Out</i> -----	13
<i>Moved</i> -----	13
<i>Unknown</i> -----	14
<i>Total</i> -----	174

Children and Youth Profiles and Surveys

SED reports that it continues to employ a slightly revised student profile developed several years ago. The profile is completed by the school district as part of the application process for a student to be placed in an out-of-state residential school. Aggregate data from the student profiles allows SED to describe and quantify information on students placed out-of-state. Individual student profiles are shared with in-state private schools that may be able to serve students returning to New York. The following data is reported by SED regarding disabilities for all out-of-state placements made by local school districts from 2005 to 2010.

Students with Disabilities Going Out-of-State

(2005/06, 2006/07, 2007/08, 2008/09, 2009/10, 2010/11)

Disability	2005-06 (as of 12/1/05)	2006-07 (as of 12/1/06)	2007-08 (as of 12/1/07)	2008-09 (as of 12/1/08)	2009-10 (as of 12/1/09)	2010-11 (as of 12/01/10)
Autism	181	181	152	142	162	138
Deafness	21	20	20	26	31	25
Emotional Disturbance	567	385	187	146	136	137
Learning Disability	30	29	26	6	6	7
Mental Retardation*	49	66	48	51	42	59
Multiple Disabilities	153	140	85	85	102	77
Speech Impairment	28	20	16	0	0	0
Traumatic Brain Injury	17	10	11	6	6	3
Visual Impairment	2	2	2	1	0	2
Other Health Impaired	28	17	19	15	33	24
Deaf/Blind	0	0	0	0	1	0
Orthopedically Impaired	0	0	0	0	1	3
Hearing Impaired	0	0	0	0	0	2
Total	1076	870	566	478	521	477

* Effective 3/30/2011, the term "mental retardation" was changed to "intellectual disability."

In 2009 and 2010, OCFS sent Youth Profile Surveys to all out-of-state programs where New York State LDSS youth were placed. The following chart summarizes the OCFS data collected, which was shared with appropriate state agencies on the bed-planning committees.

Disability	2009 (as of 2/27/09)	2010 (as of 6/28/10)
Autism	15	17
Deafness	2	0
Emotional Disturbance	101	107
Learning Disability	25	22
Mental Retardation	53	45
Multiple Disabilities *	75	65
Speech Impairment	3	4
Traumatic Brain Injury	4	2
Visual Impairment	7	3
Blind	1	0
Other Health Impaired	21	15
Orthopedically Impaired	1	2
Hearing Impaired	4	2

** If a youth had more than one classification, they were counted as multiply disabled.*

SED and OCFS have developed a unified format and process to collect all the necessary data elements to create a statewide database on New York children and youth placed residentially out-of-state. Efforts by OCFS and SED to develop a financial database (for rate-setting) for students placed by local school districts and foster care children and youth placed by LDSS in out-of-state schools and residential programs are currently on hold because funding is not available.

During 2010, at monthly interagency meetings held between OCFS, OPWDD and SED, out-of-state placement data and numbers were shared and distributed among the agencies.

D. Residential Bed Development

SED, OCFS and OPWDD continue to coordinate the implementation of a 5-Year Interagency Plan to develop in-state residential capacity. The target for bed development for students with developmental disabilities is 311 [255 in Children's Residential Projects (CRP's) and 56 approved in-state private schools (known as 853 schools)].

Students with Emotional Disturbance – The bed development for students with emotional disturbance has, to date, primarily been a conversion of existing residential capacity. The bed development for students with emotional disturbance was 106 beds, and the need continues to be evaluated. For the 2011-12 school year, 52 beds are scheduled to open.

Students with Developmental Disabilities – In New York City, 106 of the 311 residential beds for students with developmental disabilities will be developed. Fifty of these beds in New York City have opened in the 2010-11 school year. Of the 205 beds being developed for students with developmental disabilities in Long Island and the Upstate region, 81 are available and are currently being filled. The remaining 124 beds are projected to open during the 2011-12 school year.

SED reports that, since July 2010, an average of 6 students per month requiring initial out-of-state residential programs are placed out-of-state, which totals to approximately 72 students per year. For the same time period for OCFS, an average of 3 students per month requiring initial out-of-state residential programs are placed out-of-state, resulting in approximately 36 students per year. Current bed development for students with developmental disabilities is designed to reduce the rate of placement of students out-of-state.

E. Other Interagency Work to Support the Efforts of the Committee

The Commissioners' Committee on Cross-Systems Services for Children and Youth

As reported in previous annual reports, a key high-level development in cross-systems coordination is the Commissioners' Committee on Cross-Systems Services for Children and Youth (hereinafter referred to as the Commissioners' Committee). Under the leadership of the Council on Children and Families, in December 2007, nine state agency heads, along with family and youth partners, convened to articulate a vision and strategies for change, and to provide much needed leadership to effectively address barriers to meeting the complex needs of children, youth and families who require services from multiple agencies. Ever since, the Council has led quarterly meetings of this Committee, and monthly meetings with senior staff and family and youth partners to advance cross-systems work. Three issues currently being addressed are: regulatory impediments, respite care and services, and cross-systems training.

Regulatory Impediments Workgroup – working to identify state and federal laws and regulations that impede efficient planning between service systems; present obstacles in the development and provision of needed services and supports for children, youth and families; and produce wasteful state and local practices.

Respite Care and Services Workgroup – working to define respite care (from a cross-systems perspective) and improve access to respite care. The most common types of respite are hourly; half/full day; overnight and emergency/crisis. In 2010, the various systems were conducting surveys within their operations to better understand the scope of the issue.

Cross-Systems Training Workgroup – working to navigate multiple systems in order to create an online video series to help train and inform service coordinators, case managers, educators, parents and youth on how to obtain services and supports for children and youth with complex needs, and their families, from multiple child-serving systems. The series will provide presentations on each of the child-serving systems, offering information about the services and supports, eligibility requirements, application process. Additionally, the series will offer separate segments for youth and family members regarding guidance on obtaining emotional and technical support from other youth and families, advocates and other members of the community. The series will be 13 episodes to be offered free of charge.

The work of the Commissioners' Committee continues to build on the efforts of the ***Coordinated Children's Services Initiative (CCSI)*** – a statewide cross-system initiative grounded in a set of core principles and organized by a multi-tiered governance structure at the local, regional and state levels. Additionally, the Commissioners' Committee builds on the efforts of ***Systems of Care*** – a philosophy that incorporates a broad array of services and supports that are organized into a coordinated network, integrated care planning and management across multiple levels, are culturally and linguistically competent, and builds meaningful partnerships with families and youth at service delivery and policy levels. CCSI and Systems of Care in the state support localities in the provision of integrated systems of care that help children and youth, and their families, who have needs that cross administrative and service delivery lines. Concomitantly, the work of the Commissioners' Committee remains focused and committed to the ***Children's Plan***, developed in October 2008, which embodied a truly collaborative effort among State agencies and stakeholders. The ***Children's Plan*** serves as the blueprint for the work of the Commissioners' Committee and provides the framework for engaging all New Yorkers in supporting the social and emotional development of children and youth. The Commissioners' Committee assumes the lead role at the state level for achieving for achieving cross-systems coordination and outcomes improvement. The Statewide Children's Plan Director serves as the liaison to the Commissioners' Committee, in accomplishing the work involved with strengthening CCSI and Systems of Care, along with implementing the recommendations of the Children's Plan.

As reported in the last annual report, in 2009, the Commissioners' Committee hosted a statewide video conference for State and regional staff leadership, and youth and family representatives, to affirm its cross-systems mission and discuss State and regional-level expectations. Additionally in 2009, Regional Forums were held throughout the state for members of the Commissioners' Committee to engage in "leadership-to-leadership" dialogue with members of the regional and local leadership teams to develop strategies for strengthening New York's cross-systems, multi-leveled system of care structure for children, youth and families. Key issues from the 2009 statewide video conference and the regional forums were collected by the state leadership to better inform the Commissioners' Committee for planning and policy direction. One of the most common themes communicated to the Commissioners' Committee during the statewide video conference and regional forums was the need for better and more frequent communication between principals and stakeholders at the state, regional and local levels. In an effort to address this communication need, the ENGAGE e-Newsletter was created and

launched by the Council in April 2010 to deliver pertinent and current information on The Children's Plan; work of the Commissioners' Committee; Systems of Care and CCSI. The public is able to remain apprised of ENGAGE information and updates on cross-systems collaboration throughout the state by subscribing to the ENGAGE e-Newsletter at: www.ENGAGE.ccf.state.ny.us. Additionally, an interactive ENGAGE mailbox is available on this same website at: ENGAGE@ccf.state.ny.us, thus facilitating an easy way for the public to communicate with staff.

Joint Activities of the Children's Plan

Interagency work continues to support a number of joint initiatives of the Children's Plan, some of which are identified as follows:

Youth Power! Establishes Regional Youth Partners - In recognition of the important role of youth in helping to strengthen recovery-oriented services and supports, through OMH grant funding to Families Together in New York State, young people were hired to serve as "Regional Youth Partners." The Regional Youth Partners will create capacity and youth leadership through grass roots efforts to provide a youth voice to government, provider agencies and organizations. In 2010, the Regional Youth Partners received training on cross-system structures, youth leadership and engagement, and core skills necessary to help young people develop their peer and systems advocacy competencies. Regional Youth Partners bring their own unique experiences with receiving mental health services, and use them in developing as peer support specialists for children and youth engaged in services.

New York Promise Zones for Urban Education – Nationally recognized practices for school success are being piloted in New York State via the Promise Zones initiative. Through targeted delinquency prevention funding from the New York State Division of Criminal Justice Services, the Promise Zones Initiative promotes school engagement and success for high-risk youth. This action strategy works toward achieving goals regarding student engagement, academic achievement, dropout prevention, social and emotional competence, positive school culture and school safety. This collaboration, spearheaded by OMH, SED and the Council aims to mitigate the powerful risk factors for time out of school due to truancy, suspension, expulsion, or arrest, and poor school performance. Promise Zones have been implemented in Syracuse, New York City, and Buffalo. The sites have each completed a planning process focused on obtaining an external change partner to coach participating schools and facilitate access to community resources, ensuring that the right services are available at the right time for students with behavioral, academic, and/or socio-emotional challenges.

Integrating Treatment for Youth with Co-Occurring Disorders through Research, Practice and Training - Co-occurring substance abuse and mental health disorders are highly prevalent in adolescents and are difficult to treat. Without effective interventions, youth with co-occurring disorders generally have poor outcomes and are at greater risk for medical problems, contact with the criminal justice system, school difficulties and dropout, unemployment, poor relationships, and suicide. In 2010, work continued with implementing recommendations from the March 2009 OMH and OASAS Task Force on Co-occurring Disorders Subcommittee on Youth and Adolescents Report. Since issuing this report, OMH has continued its partnership with OASAS, facilitating use of an evidence-based substance use screening tool in outpatient settings. It has also held joint statewide train-the-trainer training for clinicians on adolescence and co-occurring disorders with a cadre of chemical dependency and mental health providers. Future activities include ongoing training to promote integrated care across systems, consideration of motivational enhancement training, and opportunities to advance the Task Force recommendations.

Project TEACH: Supporting Primary Care Physicians in Treating Children and Their Families - Through funding provided under the Children’s Plan, and in collaboration with DOH, the Conference of Local Mental Hygiene Directors, the American Academy of Pediatrics and the New York State Academy of Family Physicians, psychiatric consultation is being made available to primary care physicians (pediatricians and family physicians) who treat children and youth. Project TEACH aims to link primary care physicians with child mental health experts across the State. The goals of Project TEACH are to provide: (1) ongoing training and consultation services to better meet the mental healthcare needs of children seen in primary care practices; and (2) a mechanism for systematic referrals to specialists for treatment or supports for children requiring complex care and their families. Project TEACH services are being provided by the University of Buffalo’s University Psychiatric Practice (UPP) and the Four Winds Foundation. The UPP represents an innovative and unprecedented partnership of academic medical centers to support this initiative: the psychiatry departments from the University of Buffalo, University of Rochester, Columbia University, State University of New York Upstate Medical University, and Long Island Jewish/North Shore University Health System. The partnership also includes the Resource of Advancing Children’s Health (REACH) Institute, which is supporting the training component for this Project. From these academic centers, consultation and training is being provided to physicians in their respective geographic regions.

NY ACTS: A Comprehensive Resource for Individuals with Autism Spectrum Disorders (ASD) and their Families - Individuals with ASD and their families now have a single comprehensive resource to go to for information: www.NYacts.org. New York ACTS (An Initiative for Adults and Children on the Spectrum) is a website developed by the New York State Interagency Task Force on Autism, a partnership of eleven New York State agencies, the majority of which are members of the Commissioners’ Committee.

NY Project LAUNCH - Aligned with the State’s Early Childhood Advisory Council, this project is a collaborative effort led by the Council, DOH, OMH, and OCFS, along with several partner organizations in Westchester County. NY Project LAUNCH is a collaborative project with Westchester County’s Community Network—a unique countywide wraparound service system for children and families—to strengthen and enhance early childhood systems in three county locations: Yonkers (a large city), Port Chester (a small city), and Ossining (a village). This approach is enabling New York to see how municipalities of different sizes, with different infrastructures and resources, can support a holistic approach to childhood wellness. The three target areas comprise significant immigrant and minority populations that include diverse cultural and linguistic communities. Families are often medically underserved, with parents often holding two or three jobs and struggling with acculturation issues, especially when English is their second language. A public health approach is helping to engage the health, mental health, education, child care, and Head Start communities via intensive promotion, prevention, and social marketing activities. The aim is to integrate programs that together provide a complete range of developmentally supportive services to families with young children. Health care, home visiting, parenting education, and early care and education programs are being expanded to locations where they are missing, strengthened where they exist, and integrated across disciplines to achieve the vision articulated in two State plans—the Early Childhood Plan and the Children’s Plan.

Promoting Wellness in the Early Years - The Children’s Plan highlights the growing need to comprehensively support young children. Historically, the children’s mental health system has not played an active role in early childhood programs and services for children under the age of five, and their families. To address young children’s social-emotional development/mental health issues, a Social Emotional Development Consultation Work Group was formed to develop recommendations for social

and emotional development consultation in early childhood settings. The Work Group includes staff from the Council, DOH, OCFS and OMH. In October 2010, the Work Group published recommendations that endorsed the adoption of a *“Framework for Supporting the Social Emotional Development of Young Children”* for all young children across the state. This report led to the Work Group working with the Early Care and Learning Council, along with several local child-serving agencies on a community demonstration project to support training and implementation of social and emotional development consultation in early childhood programs in four communities in the State.

To respond to the federal requirement to establish or designate State Advisory Councils on Early Childhood Education and Care, New York State established a new body— ***the Early Childhood Advisory Council (ECAC)***. The ECAC includes individuals with early childhood expertise who represent early care and education, health care, child welfare, and mental health programs, as well as state agencies, advocacy organizations, foundations, higher education, unions, and others involved in the provision of services to young children and their families. The ECAC focuses its efforts on addressing the structural issues that impede the development of a comprehensive system of early childhood supports and services.

Building Bridges Initiative (BBI) – In New York State, this initiative builds on a growing national effort to advance a set of values, principles, and practices for comprehensive, coordinated, strategic, and collaborative approaches for residential and community programs to better respond to and serve children and youth with emotional and/or behavioral health challenges, and their families. Focusing on smoothing children’s transitions across levels of care, with increased attention to the roles each stakeholder will assume in serving the child and supporting the family, BBI is organized under the auspices of the Child, Adolescent and Family Branch of the Center for Mental Health Services within the United States Substance Abuse and Mental Health Services Administration (SAMHSA). BBI recently held its third Summit, which was attended by approximately 170 youth, family members, advocates, residential and community services providers, as well as public agency staff. The New York BBI effort is under the purview of the Council and the Children’s Plan.

Finding Community Solutions in Brooklyn - OMH and OCFS announced a comprehensive solution to address the chronic need for community based mental health alternatives in Brooklyn for children and their families. The overall plan includes a response to a lack of intensive residential treatment in New York City for court-involved youth who have mental health problems. The plan is designed to dramatically improve mental health care for children and youth, creating the first-of-its kind State-operated comprehensive mental health center to serve 600 children, youth and their families each year, thereby avoiding disruptions to families caused by the overuse of institutional care. Located at the Brooklyn Children’s Center, the new center offers clinic services, counseling and family therapy, community-based brief crisis care for youth, intensive day treatment and family and home-based support. The plan also calls for the first residential treatment facility in the State, dedicated to serving youth in the juvenile justice system with major mental health needs. In the past, the practice has been to serve these youth in upstate facilities, generally a distance away from their homes and communities.

The new 24-bed residence will be located on the campus of Brooklyn Children’s Center, in a distinct space separate from the outpatient mental health programs. Finally, the plan will expand the overall mental health services’ capacity in the other boroughs of New York City. It will create a new State-operated mental health clinic at the Bronx Children’s Psychiatric Center, to serve 250 children. Additionally, it will expand intensive case management services in Queens, and in the Bronx. It will also

add eight beds at the Bronx Children’s Psychiatric Center, two beds at Queens Children’s Psychiatric Center, and two at South Beach Psychiatric Center on Staten Island. This initiative, to be implemented in 2011, is being hailed as bringing New York City and New York State in closer alignment with the Children’s Plan, and will serve as an example of the systems change that has long been advocated— mental health services that are accessible, better, integrated, and provided close to the homes and in the communities of the children and families being served.

Strengthening Regional Technical Assistance Teams (RTAT) and Other Regional Initiatives - Regional Technical Assistance Teams (RTATs) serve as a training and resource link between the State and localities. The RTAT’s four primary objectives are to: act as a liaison between the Commissioners’ Committee and county teams; assist with resolution of cross-systems barriers; provide cross-systems training and technical assistance on a local and regional level; and promote services that are family-driven, youth-guided, and culturally and linguistically-competent. To bolster the presence of activity, the Council and Families Together in New York State have initiated monthly telephone meetings with RTAT leaders. A retreat and strategic planning session was held in June 2010 to help energize RTAT leaders and enhance coordination of interagency and implementation activities under the Children’s Plan.

Single Point of Access (SPOA)- The SPOA concept was developed by OMH to help coordinate mental health services across the State. The intent of the SPOA process is to identify those children and youth with significant mental health needs, and develop appropriate supports (both formal and informal), with the goal of maintaining them in their home communities. The OMH Statewide SPOA Coordinator, and each OMH Regional Field Office, continue to monitor the implementation of SPOA within each county and borough in the State.

In 2010, the day to day functions and total number of referrals to the SPOA remained consistent with previous years. Throughout 2010, OMH, with input from families, youth, providers and sister agencies, formulated recommendations for improving access to intensive mental health services/supports through the SPOA process. The recommendations were developed within the context of the larger Ambulatory Restructuring Initiative that the OMH Division of Children and Family Services has been spearheading. Recommendations for the SPOA process include:

- the standardization of a universal referral application and accompanying clinical documentation across all SPOA’s in NYS,
- the development of a common assessment instrument (Multi-Systems Child and Adolescent Needs and Strengths -CANS) with OCFS that will assist in determining a level of care that will meet the unique needs of each child and their family,
- the development of a CANS algorithm to assist in determining the aforementioned level of care/need,
- ensuring timely access to services/supports within specific timeframes,
- a utilization review process for all youth enrolled in services that are accessed through the SPOA.
- In calendar year 2011, OMH will be incorporating these recommendations within the context of the system of care processes’ that communities have established.

III. Improving the Coordination of Children and Youth Services in 2011

The Council will continue to work with SED and OCFS in monitoring out-of-state residential placements for New York's children and youth for appropriate utilization options when less intensive supports, and in-state residential alternatives, have been exhausted.

The Council will continue its interagency work and focus on exploring and promoting more effective integration approaches for delivering services and supports for New York's children, youth and families, thereby preventing any unnecessary residential placements, whether in-state or out-of-state. Additionally, the Council will continue to focus on achieving optimal delivery of cross-systems services and supports for children and youth with complex needs, and their families, through ongoing work with regional and local service networks, and family and youth partners.

SED and OCFS will continue the on-site monitoring of out-of-state residential programs (as available with existing resources), and the work associated with increasing in-state residential capacity in accordance with the implementation of the 5-Year Interagency Plan.

Through the efforts and activities of the Commissioners' Committee and its Senior Staff & Family/Youth Partners Workgroup, the commitment to work collaboratively in developing and implementing joint solutions through the implementation of the Children's Plan, along with exploring and promoting more effective integration approaches for delivering services and supports for New York's children, youth and families will be the focus for 2011.

The ENGAGE e-Newsletter will be instrumental in ensuring ongoing communication regarding salient information and updates to the regional and local service networks, and to the general public, on the Children's Plan; work of the Commissioners' Committee on Cross-Systems Services for Children and Youth, Systems of Care and CCSI.