Close to Home – Year One Overview

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New York State
Office of
Children & Family
Services

Close to Home Year One Report

Overview - First Year Implementation September 2012 - August 2013

Reform of Juvenile Justice in the State of New York

In April 2012, the New York State Legislature passed landmark legislation authorizing the Close to Home (CTH) initiative. Recognizing that the well-being of youth, families, and their communities would be best served by "minimizing the dislocation of youth from their families and building on positive connections between young people and their communities," the new law required the shifting of responsibility for the residential care of New York City (NYC) youth adjudicated as juvenile delinquents (JDs), into local, rather than state custody. The proposed transfer of responsibility from state to local authorities was to take place in two phases, with NYC required to submit two separate plans outlining the system of care that would be developed to serve youth in non-secure and limited secure settings.

OCFS' role in this new system was threefold. As the state regulatory agency charged with promoting the safety, permanency, and well-being of New York State's children, the agency is responsible for overseeing and monitoring: 1) NYC's overall implementation of the CTH non-secure plan, 2) NYC's Administration for Children's Services' (ACS) direct provision of case management and aftercare services, and 3) the licensing and functioning of the voluntary agencies providing residential care. To accomplish this, OCFS created the Office of Close to Home Oversight and System Improvement (CTHO).

Jointly administered by the OCFS Divisions of Child Welfare and Community Services and Juvenile Justice and Opportunities for Youth, the Office merges child welfare and juvenile justice perspectives into a single, integrated oversight entity, and includes representatives from the Office of the Ombudsman (OOTO) to protect and promote the rights of the youth in care.

This report reviews the implementation of the first year of Phase One of the CTH initiative, and details the efforts undertaken by both ACS and OCFS to establish a non-secure system of care for JDs within NYC.

Implementation Planning and Capacity Building Efforts

Passage of the legislation required significant planning steps between OCFS and ACS. Pursuant to the law, ACS was required to submit a plan to OCFS for approval. ACS and OCFS worked collaboratively to refine elements of the plan, and it was formally accepted on July 5, 2012 with an approved start date of September 1, 2012, as requested by the City.

ACS conducted a competitive process resulting in 11 agencies selected to provide 303 non-secure beds. ACS assumed direct responsibility for matching youth to a specific non-secure provider (NSP). In addition, an ACS worker, referred to as the Placement and Permanency

Specialist (PPS), would provide case management services throughout a youth's residential stay and would assume primary responsibility for supervising youth upon community release.

OCFS and ACS partnered on many of the changes needed to make the initiative a success both before and after the final approval of the non-secure plan by OCFS. Below are some of the activities that were taken in this regard:

State Administrative Procedures Act (SAPA) Waiver: Social Services Law §404(10) required that ACS implement the non-secure phase of the CTH initiative in accordance with all applicable federal and state laws and regulations relating to *foster care*. During the planning process, ACS sought an exemption from the OCFS foster regulations related to searches of JDs in CTH residential care to allow for routine searches under specified circumstances. To effectuate these changes to allow for routine searches, ACS was required, under the State Administrative Procedures Act (SAPA), to file a petition for approval of an alternate method of implementation of the regulatory mandate. The SAPA petition was requested only for the regulations related to searches; in all other instances ACS agreed that the providers would follow the established foster care regulations.

In addition to the SAPA Waiver, OCFS provided significant support to ACS in the following areas:

- Policy and Regulation
- Claiming and Data Systems Changes
- Rate Setting
- Legal Training for ACS Attorneys
- Building the Residential Infrastructure/Licensing of Programs

Shrinking the System, Moving Youth Home

New York City, which contributed the majority of youth to OCFS' central system of care, was one of only a few major metropolitan areas in the State that were not already providing the majority of care for youth adjudicated as delinquent within the custody of the local social services district. On December 31, 2007, the State had 1,317 youth in custody from New York City. Through a concentrated effort at the City and State level, this number had dropped to 757 youth on December 31, 2011, making it possible for the City and State to realistically plan for the creation of a local infrastructure for these youth and their families.

The reduction in the type and number of youth placed in State custody has allowed OCFS to focus on the youth statewide who pose the most significant risk to communities, and to continue to refine the NY Model of Care.

As part of the first phase of Close to Home, NYC youth who were in the custody of OCFS on September 1, 2012 were to be transferred to the custody of ACS. The process of transferring youth was projected to end by December 1, 2012. However, multiple barriers prevented this benchmark from being attained. Barriers included a lack of operational personnel at ACS, delays in opening all programs by September 1, Super Storm Sandy, and court processing time requirements. By June 2013, the transfer process was complete, with a total of 238 youth

moved from OCFS custody to ACS.

The enacted CTH legislation required that OCFS file petitions seeking the transfer of custody of youth identified for transfer to ACS within the first 90 days of the effective date (September 1, 2012) of the Non-Secure Plan, and provided for an expedited court process for the youth who consented to the transfer. For petitions that sought transfer following the first 90 days, the court was required to hold a full hearing on whether to grant the transfers.

To facilitate the filing of the petitions for the hundreds of youth identified for possible transfer to ACS under the initiative, OCFS worked with the Administrative Judge and the supervising judges for the Family Court of the City of New York, the Office of Court Administration (OCA), the Legal Aid Society's Juvenile Right's Project and the attorneys in charge of the 18-b panels in the First and Second Judicial Departments. Procedures were established for notifying the attorneys for the children of OCFS' intent to transfer custody of youth to ACS, the proposed placement facility, and the youth's PPS worker, so they could discuss the matter with their clients and determine whether their clients consented to the transfer, as well as providing notice of the actual filing and calendaring of the transfer petitions in each borough. To protect the due process rights of the youth, this process entailed several steps. While the process worked well overall, some challenges were encountered including:

- Some judges required full hearings on the transfer of youth for each petition filed, and requiring that the youth be produced for such hearing instead of using the expedited process provided for in the CTH statute;
- Delays in attorneys connecting with the youth and then notifying OCFS as to whether the youth would consent to the transfers;
- Attempts by the NYC Corporation Counsel to intervene in the proceedings;
- Delays in scheduling CTH petitions being heard by the courts; and,
- Changes to proposed placements made by ACS after consents to transfer had been obtained or the filing of the petitions.

Table 1 shows the number of youth transferred from OCFS to ACS custody each month, beginning in September 2012 and ending on March 31, 2013.

Table1: Number of OCFS Youth Transferred to ACS Custody between 9/1/12 - 5/31/13 by Transfer Type

Source	Q1 (Sep-Nov 2012)	Q2 (Dec 2012-Feb 2012)	Q3 (March-May 2013)	TOTAL
OCFS Community	4	70	13	87
OCFS VA	26	39	6	71
OCFS Facility	34	28	12	74
Transfer total	64	137	31	232

The transfer of youth from facilities and aftercare enabled OCFS to further downsize facility operations, and re-deploy aftercare workers to other parts of the agency, including oversight and

monitoring. Although somewhat later than anticipated, OCFS closed its directly operated NYC non-secure facilities effective March 27, 2013.

OCFS Oversight and System Improvement Infrastructure

Monitoring of the CTH initiative is both a local and state responsibility. As the entity directly responsible for the coordination and provision of foster care services in NYC, ACS provides immediate oversight to the individual programs and agencies that make up the CTH non-secure system of care. At the state level, OCFS monitors the implementation and functioning of the overall CTH system. This entails checking to see that CTH implementation activities are consistent with the approved CTH plan, conducting direct, first level oversight of the functions carried out directly by ACS (e.g., case management, aftercare services), and monitoring the performance of individual voluntary providers. As the statutory agency charged with licensing all foster care programs, OCFS routinely monitors voluntary agencies for compliance with state foster care regulations and policies. The following sections provide a brief overview of OCFS' oversight infrastructure and highlight the monitoring and technical assistance activities performed by OCFS during the first year of CTH implementation.

Office of Close to Home Oversight and System Improvement (CTHO)

At the center of OCFS' oversight model is the Office of Close to Home Oversight and System Improvement (CTHO). Located in NYC, CTHO engages in all three levels of oversight delineated above and provides both ACS and CTH voluntary agency providers with technical assistance.

By spring of 2013, 20 full-time CTHO staff members were in place, including a licensed psychologist to provide content expertise regarding behavioral health needs and approaches. The staff has backgrounds in juvenile justice and child welfare: direct facility work, preventive services, community supervision/aftercare and case management. To prepare workers for their oversight and technical assistance responsibilities, staff received training in child welfare and juvenile justice principles, program monitoring, CONNECTIONS (the statewide automated system of record), evidence-based behavior management models, skills building techniques, and working with young women in residential settings.

MONITORING ACS IMPLEMENTATION OF CLOSE TO HOME

OCFS has undertaken several steps to monitor ACS' adherence to the overall CTH plan, as well as its provision of direct services. These include:

- Monitoring ACS bed capacity and daily census reports;
- Reviewing critical incident reports for evidence of systematic issues and ACS' response to these challenges;
- Conducting desk audits of ACS' case management and after care supervision files;
- Discussing ACS performance and communication with voluntary agency providers, youth and families;
- Attending ACS program development meetings;
- Observing intake/assessment meetings convened by ACS staff;
- Auditing ACS entries into data systems of record; and,
- Participating in heightened monitoring and ongoing review meetings of agencies with ACS.

In addition, OCFS and ACS have made a concerted effort to provide coordinated and consistent messages to the voluntary agencies they both are tasked with overseeing. Joint meetings, both with and without voluntary agency providers, are routinely held to discuss systemic issues and individual program concerns. OCFS and ACS coordinate site visits and CTHO staff attends ACS' program development meetings for the voluntary agencies. ACS confers with OCFS when considering placing a voluntary agency on heightened monitoring status, and OCFS alerts ACS prior to issuing a corrective action plan to a voluntary agency.

MONITORING VOLUNTARY AGENCY PERFORMANCE

OCFS licensing and site visits to CTH residential programs began in September 2012, with visits initially conducted by OCFS' NYC Regional Office (NYCRO) child welfare staff. As the CTHO came online, CTHO staff joined NYCRO in this monitoring task, and eventually assumed sole responsibility for oversight in January 2013. During the early months of implementation, each CTH agency was visited at least bi-weekly. CTHO staff conducted a total of 329 visits between December 2012 and August 30, 2013. During these visits, OCFS staff engaged in the following activities:

- Review program log books, policies, human resources and youth files;
- Conduct a physical plant walk-through;
- Interviews with staff;
- Interviews with youth;
- Fire safety reviews;
- Reviews of institutional abuse allegations and significant incidents[1];
- Review of mental health protocols, staffing, assessments, interventions; and,
- Technical assistance and support.

Staff conduct on-the-ground conversations with agency staff to address any issues identified during the visits, and send monthly summary reports to agencies to reiterate any concerns, strengths or areas that might need attention in the future.

Site visits continue to take place, with the frequency of the visitation schedule determined by program need. Programs reporting greater numbers of critical incidents are typically visited on a bi-weekly basis, while programs with fewer issues are visited monthly. In addition, intensive desk audits of youth records began in February 2013.

The strengths and challenges of the first year of implementation of this important initiative are discussed in detail in the subsequent sections of this report.

[1] In July of 2013, the Justice Center for the Protection of People with Special Needs, a new law enforcement agency, was established. This agency operates the state's centralized incident reporting system called the Vulnerable Persons Central Register (VPCR). Incidents that do not rise to the level of abuse/neglect are investigated and monitored by CTHO and are known as "significant incidents."

CTH OMBUDSMEN

OCFS places a very high value on the role of the Office of the Ombudsman (OOTO) within the juvenile justice system, and reaffirmed that value by assigning OOTO staff with training and experience in child welfare, juvenile justice and youth interactions to be part of the oversight of the CTH initiative. CTH Ombudsmen have two primary responsibilities. The first is to lend a voice to youth in care by talking to them about their placement experiences and the conditions of their care. To facilitate this, OOTO staff visit all settings where youth are housed during the late afternoon, evening and weekend hours when youth are most available and are not typically participating in school and other programs. Youth placed under CTH will also have the option of contacting OOTO staff directly by calling its hotline. This hotline, which has been in existence since 2007, is serviced after hours and on weekends. The second task is to bring the information learned during these encounters to the attention of key system players. OOTO staff alert CTHO workers to areas requiring monitoring and/or follow-up, and advise key voluntary agency personnel of their concerns, and send regular reports with detailed findings to CTHO, ACS and voluntary agency staff.

The Ombudsman's Office began visits to agency programs in April 2013. Initial visits were announced to introduce staff and residents to the purpose of the Ombudsman's office, but within a month the visits were unannounced. From April 1 - August 30, 2013, OOTO staff made 87 visits to programs. The ombudsmen met with youth in each program and catalogued concerns ranging from medical issues to complaints regarding staff and property issues. The most prevalent types of interactions were ones in which the youth voiced no concerns or no new concerns. In Appendix A, which itemizes the types of issues and numbers for the reporting period in detail, these interactions are identified by the issues Wellness Check (a contact with a youth which does not result in an issue being raised by the youth, or is not based on a prior complaint), Case Follow-Up and Positive Feedback. The most prevalent concerns identified by youth were issues with programs and services, food, education and recreation.

DATA SYSTEMS AND IMPLEMENTATION MONITORING

In addition to the staffing infrastructure described above, OCFS routinely uses data systems maintained at both the state and city level to monitor the conditions of care within the CTH system. The following section describes the population of youth served by ACS during this first transitional year, their in-care experiences, and the activities undertaken by OCFS to support the newly developing system of care. All data is derived from reports supplied ACS.

In year one of CTH, ACS provided services to 585 young people (see Table 2).

Table 2: Demographics of CTH Youth Served Between 9/1/12-8/31/13	
Gender	
Male	75.2%
Female	24.8%
Race/ethnicity	
African American	57.4%
Hispanic	27.5%
White	3.1%
Asian	2.2%
Other	.7%
Unknown	9.1%
Age	
11	.2%
12	0%
13	4.1%
14	15.2%
15	30.8%
16	34.2%
17	12.8%
18	2.1%
19	.3%
20	.2%
Borough of Origin	
Brooklyn	26.5%
Bronx	23.1%
Manhattan	14.7%
Queens	28.4%
Staten Island	7.0%
Unspecified	.3%

ACS requires that all incidents involving CTH youth, staff and residences be reported by the provider agency to ACS Movement Control and Communications Unit. ACS summarizes this information on a regular basis and submits a report to OCFS detailing the number and type of incidents occurring during each report period. To facilitate cross time comparisons an incident rate, reflecting the number of incidents per 100 care days, is calculated. Table 3 summarizes the ACS data for CTH Year One and displays the incident rates for key indicators by quarter.

Table 3: Incident Data by Quarter for Youth Served Between 9/1/12 - 8/31/13

Incident Metrics	Q1 (Sept-Nov)	Q2 (Dec-Feb)	Q3 (March-May)	Q4 (June-Aug)	Total
Care Days	6711	15514	18469	17214	57908
# of Arrests	24	35	50	25	134
Arrest rate*	0.4	0.2	0.3	0.1	0.2
# AWOL incidents	103	324	450	237	1114
AWOL incident rate	1.5	2.1	2.4	1.4	1.9
# Youth on Youth Assault/ Altercation w/ injury	10	18	15	16	59
Youth on Youth with injury rate	0.1	0.1	0.1	0.1	0.1
# Youth on Staff Assault/Altercation with injury	6	7	17	1	31
Youth on Staff with injury rate	0.09	0.05	0.09	0.01	0.05
#Child Abuse Allegations Indicated	1	1	1	0	3
Child Abuse rate	0.01	0.01	0.01	0.0	0.01
# Restraints	91	173	157	127	548
Restraints rate	1.4	1.1	0.9	0.7	1.0

This data reflects the first year of a system transformation and the numbers and rates should be viewed as providing a baseline for these programs going forward. Programs that become operational within short time frames and which employ new techniques for behavior improvement, safety, staff training and theories of change can be expected to have an initial period of instability and 'norming' that can last up to two years. The landscape around placement of youth for delinquencies has shifted dramatically in the last five years, thus data above cannot be compared easily to previous OCFS youth or youth from NYC placed in voluntary agencies. Rather, as discussed below, CTHO uses these data and the information gathered during its site visits, case reviews, and audits to inform its work with ACS and the NSP provider agencies.

AREAS OF CONCERNS

INTAKE AND ASSESSMENT

The Close to Home intake process, created by ACS in consultation with the Vera Institute for Justice, has presented some challenges to the system. The process consists of a review of existing assessments including the probation investigation and report, court mental health assessments, mental health and behavioral information from detention, and interviews with the youth and family where practicable. The process does not have the capacity to identify youth with intellectual disabilities or who may have problematic sexual behavior and are not adjudicated for a sexual offense. Therefore, youth were sometimes not matched with a program

that was best suited to meet their needs. OCFS has been providing technical assistance regarding best practices and system integration for several months, and ACS is undertaking a review of the intake process in the upcoming year which will be monitored by OCFS.

CAPACITY TO SERVE YOUNG WOMEN

ACS and the provider agencies were not initially adequately capacitated for the number of young women admitted to CTH non-secure. ACS had to change the designation of some CTH programs from males to females to address the shortage of female beds within the first few weeks of the initiative. The percentage of young women coming into the CTH beds (25 percent) was significantly higher than the national in-care average of around 15 percent, and is more than the system had anticipated. Additionally, the programs designated for females were not fully prepared for the range of challenges these young women presented. As has been widely documented throughout the US and other jurisdictions, female offenders require gender-responsive approaches and interventions to competently address their needs. Overwhelmingly, trauma and family strife drive young women into the juvenile justice system, and often have higher rates of significant behavioral and mental health needs than their male counterparts. ACS and voluntary agencies were not entirely prepared to address the root causes of female delinquency, or the behavioral challenges the young women presented.

Early on, females in CTH were going AWOL and engaged in assaultive behavior at higher rates than males, and were not responding to gender-neutral programming. OCFS provided significant input to providers regarding programming and behavioral and mental health interventions shown to have good outcomes with young female delinquents and their families. OCFS took a leadership role in calling together, with ACS, all providers of young women's programs to form a "learning collaborative" in early 2013. The group included providers of young women's placement, ACS and OCFS, as well as some community-based programs that provide reentry services to young women in New York City. In the last quarter of the first year, most of the young women's programs reached stabilization, and programs continue to work together to improve the quality and range of gender-specific programming in the homes and community.

SAFETY AND SECURITY

Most programs faced challenges providing an environment free from numerous altercations, AWOLS and incidents of contraband in the first six months. These challenges were to be expected in the initial stages of implementation, but required collaborative creative problem solving on the parts of OCFS, ACS and the providers to address. Programs were building their culture and staff was learning skills and approaches to providing supervision and intervention to placed youth. The full continuum of programs, including several specialized programs, was not operational until several months into the first year. The last program was opened in early spring, 2013. Thus, some youth who needed more intensive services were housed in general beds. Youth were being transferred from OCFS beginning in September of 2012, and were coming into the new placements after a period of time in a different setting. The mismatch of needs for some youth, combined with the mix of youth strained the system's early stability.

OCFS provided significant technical assistance to ACS and the voluntary agencies, including the development and implementation of a safety assessment for the programs. These efforts,

combined with developmental growth of the programs reduced many of the impediments to safety and security. For example, the rate of the use of restraints decreased over the course of the year from a high of 1.4 in Quarter 1 to a low of 0.7 by the end of year one (Table 3).

Similarly, school settings for NSP struggled to provide consistent and safe environments through the first half of the first year. Youth were engaged in fights with one another and staff, and AWOLed from program. Through a coordinated effort between DOE and ACS, the school was stabilized and as is described in the next section, students began to achieve positive educational outcomes.

AWOLS

Non-secure environments that are close to youth's home communities provide many advantages for contact and connection to community. One of the recognized vulnerabilities of these placements is that youth have the ability to leave program without permission—otherwise referred to as away without leave or AWOL. As shown in Table 3, NYC programs struggled with very high levels of AWOLs through the spring of 2013—a challenge that was not surprising but nonetheless of concern. With support and technical assistance from OCFS, ACS and the voluntary agencies were able to bring down the rate of AWOLs and improve the ways in which agencies were responding. The rate of AWOLS began to decline by the end of the first year, dropping to 1.4 in Quarter 4.

BEHAVIORAL HEALTH

Strong treatment approaches are one of the lynchpins for helping delinquent youth turn a corner on their behavior and experiences. Many youth who have been adjudicated have significant mental health issues and require targeted individual and group services. In the early months of CTH, programs struggled with either a lack of clarity of the level of need of the population they were to serve, or program and intervention models that were geared toward a more generalized child welfare population. Not all agencies were prepared initially for the level of mental health needs and the programs have since adapted to the needs of the youth, brought on clinical staff with the required credentials, or added innovative services such as creative arts therapies to address the significant need. In response to feedback from agencies, OCFS has formed a behavioral health workgroup that meets monthly with the agencies, the state Office of Mental Health (OMH) and other stakeholders.

OCFS continues to monitor the behavioral health services and infrastructure. CTHO is providing support and guidance to both ACS and the voluntary agencies, in partnership with OMH.

STAFF STABILITY

CTH represented a significant shift in program approach and required staff to have training different from the traditional child welfare residential programs. NYC providers had not previously provided this level of care. Hundreds of staff members were required to be brought online across over 30 programs within a short period of time. Many programs discovered that the initial round of staff that were hired and trained did not have the requisite skills or orientation.

Maintaining a stable group of properly trained and highly motivated staff has continued to present challenges to a number of agencies. In the first year, three agencies were on Heightened Monitoring status, and two of those agency's contracts were terminated due in large part to challenges with staffing. OCFS continues to work closely with ACS and the agencies to address the staffing challenges.

AFTERCARE SERVICES

Aftercare services and community supervision were inconsistent for the first year of the initiative. Specific evidence-based models of services for youth in the community were not procured by ACS until the middle of 2013, and did not begin late summer of 2013. ACS case managers were unable to meet youth and families in their homes and communities, in part due to case distribution, and in part due to organizational challenges with ACS to support these critical functions.

OCFS required a corrective action plan from ACS for deficiencies in case planning, record keeping, and case management of youth in aftercare services. ACS responded to concerns identified by adding aftercare staff, addressing concerns related to case record keeping and internal auditing of staff. OCFS continues to monitor progress in this area.

DATA

Timely and accurate reporting within the various systems of record used to monitor CTH youth has also been problematic. CTH youth are tracked through multiple state and city-based data systems, many of which were not specifically designed to capture CTH programming. Recognizing the challenges this poses to acquiring consistent and comprehensive system level data, OCFS and ACS established a work group to discuss data collection issues, identify potential system based solutions, and provide guidance. Meetings have generated methods for improving data collection, entry, and reporting practices, and continue to be used to inform and improve data practice on an ongoing basis.

AREAS OF STRENGTH

FAMILY ENGAGEMENT

One of the pillars of the CTH initiative is to increase family contact and involvement for youth who were placed, particularly during the out-of-home residential stay. The proximity of the placements to families and communities has increased contact between youth and their families. Data from ACS indicates that nearly all (97 percent) of youth who were released home had at least two home visits prior to release—those who did not have home visits did not have any community resources. All NSP residential programs are required to support youth and families during residential stays. Some programs provide family therapy while youth are in out-of-home care; programs have family programs at the houses and provide supervised home visits and debriefing and support with both the youth and families during and after home visits.

EDUCATIONAL GAINS

Educational achievement is recognized as an important support for successful reentry into the community. One of the drivers for the Close to Home legislation was the desire to improve the educational outcomes for youth placed on delinquencies. Most of the youth in placement are

educated in schools that are part of the New York City Department of Education (DOE) through District 79 which specializes in providing education in jails, detention centers, substance abuse programs and other alternative settings. Passages Academy provides education to youth in multiple settings within the non-secure placement system. Over the course of the year, youth have accrued credits which will transfer seamlessly upon release to their home schools in NYC; 31 youth passed regent exams in the course of the 2012-2013 School Year. Data from DOE indicates that youth who are released from Passages are attending school at higher rates for the first 90 days post-release than they were attending prior to placement. These are promising trends.

EVIDENCE-BASED/EVIDENCE-INFORMED APPROACHES

All of the CTH general population programs have adopted either an evidence-based or an evidence-informed approach to residential treatment. Some of the agencies are working to implement a group-oriented system of change based on the Missouri Youth Service Institute (MYSI), known as the Missouri approach, which had initially been piloted in New York State by OCFS in "Brooklyn 4 Brooklyn." This program has been nationally recognized as a promising approach for reducing recidivism, and offers child welfare providers an opportunity to expand their skills set for working with adolescents. Some of the CTH agencies have had extensive coaching and training through MYSI. Additionally, DOE staff has been included in these trainings, and ACS has been working closely with model developers and OCFS to support the system of care. Adherence to and adaptation of the Missouri approach is in process-some agencies have the principles well embedded in their program core while others are still working through adaptation.

Other agencies are utilizing evidence-informed or promising practices approaches such as Boys Town or the LaSallian Model utilized by Martin De Porres.

In addition, ACS has expanded its Multi-Dimensional Treatment Foster Care program to offer slots to youth otherwise slated for non-secure care, creating an option for non-congregate care while simultaneously providing an intervention shown to have positive outcomes for delinquent youth.

COMMUNICATION AND COORDINATION

Implementation of phase one of CTH initiative required the creation of a model of collaborative planning, policy review, joint oversight and information sharing between multiple layers of system stakeholders that has strengthened implementation efforts, promoted system resiliency, and laid a strong foundation for the implementation of Limited Secure Placement (LSP) which is anticipated to begin in the fall of 2014. OCFS, ACS and the 11 voluntary agencies currently serving non-secure youth meet regularly with each other to discuss program progress and concerns. OCFS also meets regularly with ACS staff and has frequent conference calls regarding system capacity to troubleshoot areas of concern and to problem solve. These meetings have resulted in the creation of one learning collaborative on females, and the identification of concerns related to adequate mental health services in one program and staffing capacity in another.

FLEXIBILITY AND RESPONSIVENESS

The development of a communication infrastructure and working relationships between OCFS, ACS and the voluntary agencies, has enabled system partners to respond to immediate needs in a collaborative manner. For example, when it became apparent that ACS needed to increase the number of beds for males with serious emotional disturbances at a particular voluntary agency, the agency, OCFS and ACS were able to reconfigure the program to obtain those beds in a matter of weeks. Likewise, when system partners noticed that sending youth off-site to Passages, the DOE administered school, was not working for this group of young people or the program, ACS, with OCFS approval, changed the program plan and worked with the agency and DOE to provide schooling at the residential program site. Now several other programs are also looking at this as a potential option to enhance the model of change being used in their programs.

Year Two and Phase Two

OCFS will be working closely with ACS over the next year to continue to strengthen the system of care for youth placed in non-secure settings. OCFS has been working closely with ACS and the New York City Department of Probation to plan for Phase Two of Close to Home—the assumption of placement responsibility by the City of New York for youth placed in Limited Secure facilities. The City will be finalizing their plan for Limited Secure Placement and submitting it to OCFS for approval. OCFS will work with the City to implement their plan. The plan and the implementation will draw from lessons learned in the implementation of Phase One.

Conclusion

Close to Home is a new approach to care and treatment of youth adjudicated as juvenile delinquents for ACS and the voluntary agencies in NYC. The enormity of the system change in a very compressed time frame challenged ACS, the agencies and OCFS in predictable ways. The implementation is in the early stages of development, but is clearly moving forward and stabilizing. This report highlights the vision the State set out for juvenile justice, and describes the strengths and challenges experienced as a new system is taking root. Clearly the first year represents a period of adjustment and transition for the youth and the developing system; and the strains of implementing this initiative impacted the short term outcomes. The stress of the transition from OCFS facilities to new programs was difficult for some youth, and the pace of admissions impeded the progress of programs in developing therapeutic cultures. Despite the challenges mentioned in this report, there is evidence that youth are experiencing benefits of being closer to their homes and communities. Youth are having more regular contact with their families, and the programs are working diligently to repair frayed family ties.

As the initiative moves beyond initial implementation and stabilization, OCFS and ACS will continue to work with the agencies to support and strengthen the Close to Home programs. OCFS will deepen its monitoring of youth and family services, and will continue to provide technical assistance for placement, transition and aftercare services. As ACS prepares to expand the initiative to limited secure placements in 2014, areas of strengths and those needing improvement will be identified, and concrete systems of technical assistance will be enhanced.

Appendix A: Issues Identified and Types of Interactions in Ombudsman Visits

During each visit that an ombudsman makes, he or she assigns a category to issues raised by every youth that is spoken to. For any contact with a youth, there may be one or more issues identified by the ombudsman. The breakdown of these issues is here:

Issue	Totals
Positive Feedback	83
Programs & Services	59
Food	37
Education	34
Recreation	29
Release Planning/Release Issues	26
Placement Concerns	20
Staff Misconduct	18
Disciplinary Action	17
Quality of Life	17
Family Contact	16
Building & Plant Maintenance	15
Problems with Peers	14
Property Issues	11
Clothing	9
Other/Unlabeled	8
Problems with Staff	7
Dental	5
Safety Concerns	5
Access to Attorney	4
Access to Ombudsman	4
Regulation & Policy Issues	4
Stipend Programs	4
Telephone	4
Arrest of Resident	3
Parent/Staff Interaction	3
Mental Health	2
Physical Abuse	2
Legal Matters	1
Mail	1
Restraints/Strip Search	2
Vocational Programs	1
TOTAL	465
Types of Interactions	
Wellness Check	378
Case Follow-Up	49
TOTAL	427