



## Office of Children and Family Services

ANDREW M. CUOMO  
Governor

SHEILA J. POOLE  
Commissioner

April 23, 2021

Dear Chief Executive Officer,

Thank you for submitting Rensselaer County's Supervision and Treatment Services for Juveniles Program (STSJP) plan for Program Year (PY) 2020-2021. Your entire STSJP plan, including any amounts listed for PY 2020-2021 STSJP-RTA, has been **approved.**

The County is eligible to receive 62% State reimbursement for STSJP expenditures up to the capped STSJP allocation amount. Your municipality will continue to receive 49% State reimbursement for eligible detention services expenditures up to the capped allocation amount. If your municipality shifts a portion of its detention allocation into its STSJP plan, your municipality will receive 62% State reimbursement, up to the capped allocation, if such shifted funds are spent on STSJP eligible expenditures. A municipality may make a detention allocation shift at the time of the STSJP plan submission or up until June 30, 2021, unless otherwise approved by the Office of Children and Family Services.

If the County plans to shift its detention allocation for STSJP eligible expenses, please submit a request on official letterhead to Lynn Tubbs and email it to [stsjp@ocfs.ny.gov](mailto:stsjp@ocfs.ny.gov) outlining

1. the amount that will be shifted and
2. the type of programming or services the re-purposed detention funds will be used for under STSJP

Once the shift is approved, an amended STSJP plan will need to be submitted.

As a reminder, to access RTA reimbursement that a municipality may be eligible for, the expenditures must be specifically included in a locality's comprehensive RTA plan.

All STSJP claims, inclusive of STSJP-RTA, must be submitted electronically via the Juvenile Detention Automated System (JDAS) for the service period of October 1, 2020 to September 30, 2021. Questions on all aspects of the claiming process should be directed to the STSJP mailbox at [stsjp@ocfs.ny.gov](mailto:stsjp@ocfs.ny.gov) with the subject line: "STSJP Claiming Questions".

If you have any STSJP plan questions, please also email us at [stsjp@ocfs.ny.gov](mailto:stsjp@ocfs.ny.gov) and write "STSJP Plan Questions" in the subject line or reach out to Geneva Hilliard at (518) 486-1819 or Lynn Tubbs at (518) 473-9116.

Thank you for your continued partnership as we reform the juvenile justice practices in New York State by safely engaging youth and their families through innovative programming to reduce out of home placement and detention of youth.

Sincerely,



Nina Aledort, Ph.D., LMSW  
Deputy Commissioner  
Division of Youth Development and Partnerships for Success

cc: Derek Holtzclaw, OCFS Deputy Commissioner for Administration  
Lynn Tubbs, Director of Cross-System Supports, YDAPS  
OCFS Child Welfare and Community Services Regional Office Directors  
Municipality STSJP Lead

NEW YORK STATE  
OFFICE OF CHILDREN AND FAMILY SERVICES  
**SUPERVISION AND TREATMENT SERVICES FOR JUVENILES PROGRAM (STSJP)**  
**ANNUAL PLAN FOR PROGRAM YEAR OCTOBER 1, 2020 – SEPTEMBER 30, 2021**

### SUBMITTING MUNICIPALITY CONTACT INFORMATION

Name of applicant county, counties, or jurisdiction: Rensselaer		
Lead agency for STSJP submission: Rensselaer County DSS		
Contact Person's Name: Cara Brown	Title: Children and Family Services Manager	
Phone: (518) 833-6051	Ext:	Email: Cara.Brown@dfa.state.ny.us

### PLAN SUBMISSION INSTRUCTIONS

**STSJP plans are due to the Office of Children and Family Services (OCFS) by 10 / 20 / 2020**

1. Once you have opened this form on your computer, please use the "Save As" function to save a copy with the following file name: "STSJP 2020-2021 Annual Plan – [Municipality Name]."
2. Work from the copy saved in Step 1 as you record your municipality information. Save your work as you complete each section.
3. Email the completed application to OCFS at [stsjp@ocfs.ny.gov](mailto:stsjp@ocfs.ny.gov). Use the subject line "STSJP 2020-2021 Annual Plan – [Municipality Name]" to facilitate timely review of your plan.

**Please direct any STSJP plan questions to Geneva Hilliard 518-486-1819 or Lynn Tubbs 518-473-9116.**

**NOTE:**

**Cooperative Applications Submitted Jointly by Two or More Counties**

Two or more eligible local jurisdictions (counties) may join together to establish, operate and maintain STSJP programs, and may enter into agreements in connection therewith. Counties submitting such applications must provide additional information under **Part I - Municipality Level Details, Section A. Cooperative Application.**

### PART I – MUNICIPALITY LEVEL DETAILS

#### A. Cooperative Application (Complete this section only if this is a joint application.)

1. Describe the provisions for the proportionate cost to be borne by each county.
  2. Describe how personnel will be compensated across and between counties in the cooperative:
  3. Will a single fiscal officer be the custodian of the funds made available for STSJP?  
 Yes (If yes, please provide their contact details below.)  
 No (If no, skip to Q4.)
- |                 |                                  |
|-----------------|----------------------------------|
| Officer's Name: | Title:                           |
| Phone: ( )      | Ext:                      Email: |
4. Describe who will be responsible for collecting and submitting STSJP data for joint-funded programs:

#### B. Municipality Level Analysis

1. (a) Identify communities or neighborhoods from which the highest number of Youthful Offenders (YO), Adolescent Offenders (AO), Juvenile Offenders (JO), Juvenile Delinquents (JD), and Persons in Need of Supervision (PINS) enter the youth justice system, are remanded to detention, and/or are residentially placed; then (b) Discuss what factors may be contributing to these high numbers:

Our plan targets zip codes 12180, 12182 and 12144. Rensselaer County is in the eastern part of New York State. The eastern boundary of Rensselaer County runs along the New York-Vermont and New York-Massachusetts borders. The U.S Census Bureau estimated Rensselaer County's population at 158,714 in 2019. In 2019, the racial makeup of

the county was 86.2% white, 8.1% black or African-American, .3% Native American, 2.8% Asian and 2.6% from other races. Between 2014 and 2018, the median income for a household in the county was \$65,851. The county is served by sixteen school districts.

Troy is a city located in Rensselaer County. As of 2019, the population in Troy was approximately 49,154 with a racial makeup of 69.5% white, 17.4% black or African American, .1 % Native American, 4.1% Asian and 8.9% from other races.

Approximately 25.4% of the population in Troy is below the poverty level.

Crimes in Troy are concentrated in the western side of the city and are particularly dense north of Hoosick Street. This is the area where the largest number of youths on probation or placed residentially live with their families.

The largest number of youths placed in detention and out of home placements continues to be in the City of Troy. In 2019, 17 out of 28 youth remanded to Non-Secure Detention were from Troy. 12 out of 21 youth remanded to Secure Detention were from Troy and 5 out of 7 youth remanded to Specialized Secure Detention were from Troy.

2. (a) Compare the racial/ethnic distributions among your local system's detention and/or residential placements with the racial/ethnic distributions in your municipality's general population; then (b) Discuss any racial/ethnic disparities you identified and how this plan will address the disparities:

A total of 18 families with 44 youth including siblings were served by the Stepping Stones program in 2019. There were 7 Caucasian families; 4 Bi-Racial families and 7 African American families. Youth ages ranged from 0-17 and 94% of youth served were between the ages of 13-17 years old. Ethnicity Breakdown of the households served by Stepping Stones: 39% Caucasian, 22% Bi-Racial and 39% African American. Total Non-Secure Detention admissions in 2019 was 28 with 29% being Caucasian, 57% being African-American, 11% Bi-Racial and 3% unreported. Total Secure Detention admissions in 2019 was 21 with 38% being Caucasian, 52% being African-American and 10% being Bi-Racial. Total Specialized Secure Detention Admissions in 2019 was 7 with 29% being Caucasian, 57% being African-American and 14% not reported. Total Residential placements for the JD/PINS population in Rensselaer County either in DSS custody or OCFS custody in 2019 is 17 with 65% being Caucasian and 35% being African-American. Since at least 2017, the highest percentage of youth being served falls into the 13-17 age category. We have also noticed a trend with respect to residential placements or OCFS custody with the majority of the youths placed being Caucasian; however the majority of the youths being remanded to detention (Non-Secure, Secure and Specialized Secure) are African American or Bi-Racial.

The Family Specialist and teams associated with the programs have an excellent understanding of the family dynamics, as well as any cultural differences, to assist the family in forming plans to resolve identified issues. Currently, the Stepping Stones Family Specialist works with every family that is referred to them for services and to break down cultural barriers to get a successful outcome. The Family Specialist and Program Coordinator secured translation services through All Language Translations and interpreters from this agency were utilized for weekly home visits and family meetings to successfully conduct assessments and engage the family in treatment planning and interventions. As stated above, the majority of the youths placed are Caucasian; while the majority of the youths being remanded to detention (Non-Secure, Secure and Specialized Secure) are African American or Bi-Racial. The Family Specialist and team will provide culturally sensitive and trauma focused services in the home and school in order to reduce the number of youth entering detention or placement. Assessments are completed in order to provide recommendations for the youth/family for the least restrictive level of care that would be needed to support the youth and family safely and productively.

### **C. Local Collaboration**

1. STSJP legislation requires local collaboration. Please describe your municipality's activities in developing this year's STSJP plan in collaboration with local agencies responsible for probation, law enforcement, detention, diversion, social services, courts, service providers, schools, and youth development programs:

Since 2010, Rensselaer County has contracted with Berkshire Farms' Stepping Stones Program to reduce the county's need to place youth in detention or other out of home placements. The staff from Stepping Stones have partnered with probation and social services in order to best plan and provide the necessary services to meet the needs of the youth and their family. The Family Specialist at Berkshire meets with DSS and probation bi-weekly in an effort to keep the children in the program safe at home while addressing at risk behaviors. The Family Specialist also attends Family Court appearances, school meetings and mental health appointments with the youth and families served.

The Transitions Program will be comprised of a team of licensed MH professionals that serve the child/youth and families for 6-8 weeks of intensive in home evidence based treatment. In addition to these clinicians, the team will also include a skill builder, parent/peer partner, youth mentor, care manager and community specialist. Referrals can be made to the program by Rensselaer County Probation and regular meetings will be held between service providers that are involved with the family to discuss progress with projected goals.

**PART II – PROGRAM LEVEL DETAILS**

<b>PROGRAM</b>		<b>1</b>																					
<b>A. Program 1 Contact Information</b>																							
Program 1 Name: Berkshire Farm Stepping Stones																							
Operating Agency: Berkshire Farm Center and Services for Youth																							
Program Mailing Address: 945 Palmer Avenue																							
Address Line 2:																							
City: Schenectady	State: <b>NY</b>	Zip Code: 12309																					
Program Contact's Name: Joanne Bedell		Title: Administrative Asst. to VP of Community Services																					
Phone: (518) 346-6201	Ext: 221	Email: jbedell@berkshirefarm.org																					
<b>B. Program 1 Description and Target Population</b>																							
1. This program meets the legal definition of a <b>Family Support Services (FSS) program (Social Services Law Section 458-m)</b> and will operate in this capacity for PY 2020-2021. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																							
2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2020-2021:																							
<table border="1"> <thead> <tr> <th>STSJP</th> <th>STSJP-RTA</th> <th></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Prevention (P)</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Early Intervention (EI)</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP)</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Alternative to Placement (ATP)</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Reentry / Aftercare (R / A)</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Indirect Services</td> </tr> </tbody> </table>			STSJP	STSJP-RTA		<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)	<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)	<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)	<input type="checkbox"/>	<input type="checkbox"/>	Reentry / Aftercare (R / A)	<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services
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3. Please list the zip codes this program will target: 12180, 12182, 12144																							
4. Describe the program, including how it is family focused. If you answered "yes" to Q1 (FSS), be sure to demonstrate how your program meets the definition. Also, please explain how each of the service types selected in Q2 will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them.  The Stepping Stones program will be used as an ATP program by providing families and youth with intensive services to reduce the likelihood that the youth will commit a crime including but not limited to immediate																							

assessments and recommendations, home and community-based services, 24/7 crisis intervention and support to the family and youth. The target population for this program is male and female youths between the ages of 0-17 with the majority of the youths ranging in the 13-17 year old age range. The program will be serving youth that have been adjudicated as a JD or PINS with the goal to prevent residential placements through identifying therapeutic options and proceeding with treatment and services such as those listed above.

5. Is the program capable of being replicated across multiple locations?  Yes  No

**C. Program 1 Performance History** (Refer to your municipality's STSJP data files.)

1. What funding did this program receive in PY 2019-2020?  
 None (If none, skip to section D.)  STSJP  STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type								Total
	P	EI	ATD/ATPDP				ATP	R/A	
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP							44		44
STSJP-RTA									
<b>Total</b>							44		44

3. Based on the program's record of youth served (Q2), do you anticipate this program being over or under its budgeted capacity on 9/30/2020? Please explain:  
 We do not anticipate that the program will be over OR under it's budgeted capacity on 9/30/20. The Family Specialist carries a case load of 6 at all times. Once a youth is discharged, the Family Specialist begins to work with the next family on the referral list.

4. Please use the table to record the **average lengths of service (days)** for youth who exited the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type							
	P	EI	ATD/ATPDP				ATP	R/A
			(PINS)	(JO/JD)	(JD-RTA)	(AO)		
STSJP							100.57	
STSJP-RTA								

5. How do the average lengths of service (Q4) compare to what you would expect for that point? For ATD/PDP and ATP points, compare with the average lengths of stay for youth who were in detention and residential placements during the same time period.  
 It is expected that the average length of service would be around 90-100 days for the Stepping Stones program which is longer than the average length of stay for youth who were in detention during the 10/1/19 to 3/31/20 time from (17 days). The average length of stay for youth placed residentially is 9 months.

6. Will this program's outcomes meet the PY 2019-2020 projected goals by 9/30/2020?  
 Yes (If yes, skip to section D.)  Partially  No

7. (a) What outcomes are on track to meet the goals set for PY 2019-2020? (b) How will they be met?  
 85% of the youth will avoid remand to detention. 2019 Performance: 100% of the identified youth avoided a remand to detention. The Family Specialist is available directly to families via phone and in person during the regular business day, and maintains flexibility in scheduling emergency appointments with families in urgent need. Berkshire Farm Center & Services for Youth has an After-Hours On-Call system, which allows families to access a Community Services Leader twenty-four hours per day, seven days a week year-round. In 2019, there were nine (9) critical incidents that occurred with families, in which one or more risk factors were addressed. In

all of these incidents, the Family Specialist was able to follow up with family around safety planning, and assist families in times of crisis to avoid a higher level of intervention.

8. (a) What outcomes are not on track to meet the goals set for PY 2019-2020? (b) Please describe any contributing barriers.

Performance outcomes regarding an increase in parental involvement and aversion to placement were not met. Barriers included an increase in youths negative behaviors, truancy, suspensions, runaways, family functioning issues, substance abuse and mental health issues to name a few, as well as the COVID-19 pandemic. Due to the pandemic, there was lack of consistency with the Stepping Stones program and the Family Specialist in particular due to turnover.

9. What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2020-2021?

A new Family Specialist has been hired who is working consistently/intensively with the the families the Stepping Stones program is serving. This will show an increase in percentages with respect to these performance outcomes.

**D. Program 1 Service Projections for PY 2020-2021**

1. Please use the table to indicate the **projected # youth to be served** by the program for PY 2020-2021. Enter zero (0) if not applicable.

Approved Funding	Program Type								Total
	P	EI	ATD/ATPDP				ATP	R/A	
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP							20		20
STSJP-RTA									
<b>Total</b>							20		20

**PROGRAM 2**

**A. Program 2 Contact Information**

Program 2 Name: Rensselaer County Dept. of Mental Health Transitions Program

Operating Agency: Rensselaer County Department of Mental Health

Program Mailing Address: 1600 7th Avenue

Address Line 2:

City: Troy

State: **NY**

Zip Code: 12180

Program Contact's Name: Michelle Marte

Title: Director of Children's Services

Phone: (518)

Ext:

Email: MMarte@renesco.com

**B. Program 2 Description and Target Population**

1. This program meets the legal definition of a **Family Support Services (FSS) program (Social Services Law Section 458-m)** and will operate in this capacity for PY 2020-2021.  Yes  No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2020-2021:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry / Aftercare (R / A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

3. Please list the zip codes this program will target:  
12180, 12182, 12144

4. Describe the program, including how it is family focused. If you answered “yes” to Q1 (FSS), be sure to demonstrate how your program meets the definition. Also, please explain how each of the service types selected in Q2 will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them.

The Transitions Program will work with Probation, Rensselaer County DSS, school personnel, medical staff, families and other service providers to identify children that they feel are at the highest risk of out of home placement. Once appropriate youth are identified, evidence based treatment models will be used to meet the unique needs of each child and family (ability to provide therapy, skill building, referrals to community supports and mentoring). The target population for this program are male and female youth in the 13-17 age group that have been listed on an initial PINS complaint or a complaint to petition. The petitioner must have the ability to withdraw the complaint/petition upon successful completion of the program. The youth's issues must be caused or exacerbated by an underlying/untreated mental health issue and the youth must not currently consistently engaged in mental health treatment. The family must be willing to try the program as an alternative to Probation involvement. The Transitions Program did not come to fruition in the 2019-2020 PY, therefore funding was not utilized.

5. Is the program capable of being replicated across multiple locations?  Yes  No

**C. Program 2 Performance History** (Refer to your municipality's STSJP data files.)

1. What funding did this program receive in PY 2019-2020?  
 None (If none, skip to section D.)  STSJP  STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type								Total
	P	EI	ATD/ATPDP				ATP	R/A	
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP							0		0
STSJP-RTA									
<b>Total</b>							0		0

3. Based on the program's record of youth served (Q2), do you anticipate this program being over or under its budgeted capacity on 9/30/2020? Please explain:  
We expect the program to be under it's budgeted capacity as the program did not come to fruition during the 2019-2020 PY.

4. Please use the table to record the **average lengths of service (days)** for youth who exited the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type							ATP	R/A
	P	EI	ATD/ATPDP						
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP							0.00		
STSJP-RTA									

5. How do the average lengths of service (Q4) compare to what you would expect for that point? For ATD/PDP and ATP points, compare with the average lengths of stay for youth who were in detention and residential placements during the same time period.

The Transitions Program did not come to fruition during the 2019-2020 PY, therefore there was no average length of stay to be compared.

6. Will this program's outcomes meet the PY 2019-2020 projected goals by 9/30/2020?

Yes (If yes, skip to section D.)     Partially     No

7. (a) What outcomes are on track to meet the goals set for PY 2019-2020? (b) How will they be met?

The Transitions Program did not come to fruition during the 2019-2020 PY, therefore the goals will not be met.

8. (a) What outcomes are not on track to meet the goals set for PY 2019-2020? (b) Please describe any contributing barriers.

The Transitions Program did not come to fruition during the 2019-2020 PY, therefore there are no contributing barriers.

9. What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2020-2021?

The Transitions Program did not come to fruition during the 2019-2020 PY, therefore no changes have been made to overcome barriers as there were none.

**D. Program 2 Service Projections for PY 2020-2021**

1. Please use the table to indicate the **projected # youth to be served** by the program for PY 2020-2021. Enter zero (0) if not applicable.

Approved Funding	Program Type							ATP	R/A	Total
	P	EI	ATD/ATPDP							
			(PINS)	(JO/JD)	(JD-RTA)	(AO)				
STSJP							16		16	
STSJP-RTA										
Total							16		16	

**PROGRAM 3**

**A. Program 3 Contact Information**

Program 3 Name: Dept of Employment & Training- Youth Dev Specialist (STSJP-RTA)

Operating Agency: Dept Rensselaer County Department of Employment

Program Mailing Address: 1600 7th Avenue Floor 4

Address Line 2:

City: Troy

State: NY

Zip Code: 12180

Program Contact's Name: Brian Williams

Title: Commissioner  
Rensselaer County One Stop Career Center at the  
Department of Employment and Training

Phone: (518) 2702878

Ext:

Email: Brian@capreg.org

**B. Program 3 Description and Target Population**

1. This program meets the legal definition of a **Family Support Services (FSS) program (Social Services Law Section 458-m)** and will operate in this capacity for PY 2020-2021.  Yes  No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2020-2021:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry / Aftercare (R / A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

3. Please list the zip codes this program will target:  
12180, 12182, 12144

4. Describe the program, including how it is family focused. If you answered “yes” to Q1 (FSS), be sure to demonstrate how your program meets the definition. Also, please explain how each of the service types selected in Q2 will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them.

The Youth Development Specialist work with youth that are 16 and 17 years of age to bridge the gap between the youth workforce development and the juvenile justice reform systems by helping youth obtain employment. Helping youth obtain employment should decrease the likelihood that they will become involved with the juvenile justice system. No funding was used towards this program for the 2019-2020 PY as it did not come to fruition.

5. Is the program capable of being replicated across multiple locations?  Yes  No

**C. Program 3 Performance History (Refer to your municipality’s STSJP data files.)**

1. What funding did this program receive in PY 2019-2020?  
 None (If none, skip to section D.)  STSJP  STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type							Total	
	P	EI	ATD/ATPDP				ATP		R/A
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA	0							0	
Total	0							0	

3. Based on the program’s record of youth served (Q2), do you anticipate this program being over or under its budgeted capacity on 9/30/2020? Please explain:  
We expect the program to be under it's budgeted capacity as the program was not utilized during the 2019-2020 PY.

4. Please use the table to record the **average lengths of service (days)** for youth who exited the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type							
	P	EI	ATD/ATPDP				ATP	R/A
			(PINS)	(JO/JD)	(JD-RTA)	(AO)		
STSJP								
STSJP-RTA	0.00							

5. How do the average lengths of service (Q4) compare to what you would expect for that point? For ATD/PDP and ATP points, compare with the average lengths of stay for youth who were in detention and residential placements during the same time period.

The program was did not come to fruition during the 2019-2020 PY.

6. Will this program's outcomes meet the PY 2019-2020 projected goals by 9/30/2020?

Yes (If yes, skip to section D.)     Partially     No

7. (a) What outcomes are on track to meet the goals set for PY 2019-2020? (b) How will they be met?

The program did not come to fruition during the 2019-2020 PY, therefore there are no goals to be met.

8. (a) What outcomes are not on track to meet the goals set for PY 2019-2020? (b) Please describe any contributing barriers.

The program did not come to fruition during the 2019-2020 PY, therefore there are no contributing barriers.

9. What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2020-2021?

The program did not come to fruition during the 2019-2020 PY, therefore no changes have been made to overcome barriers as there were none.

**D. Program 3 Service Projections for PY 2020-2021**

1. Please use the table to indicate the **projected # youth to be served** by the program for PY 2020-2021. Enter zero (0) if not applicable.

Approved Funding	Program Type								Total
	P	EI	ATD/ATPDP				ATP	R/A	
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA	150								150
Total	150								150

**PROGRAM 4**

**A. Program 4 Contact Information**

Program 4 Name: Functional Family Therapy (STSJP- RTA )

Operating Agency: Berkshire Farm Center and Services for Youth

Program Mailing Address: 945 Palmer Avenue

Address Line 2:

City: Schenectady

State: NY

Zip Code: 12309

Program Contact's Name: Joanne Bedell

Title: Administrative Asst. to VP of Community Services

Phone: (518) 346-6201

Ext: 221

Email: jbedell@berkshirefarm.org

**B. Program 4 Description and Target Population**

1. This program meets the legal definition of a **Family Support Services (FSS) program (Social Services Law Section 458-m)** and will operate in this capacity for PY 2020-2021.  Yes  No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2020-2021:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry / Aftercare (R / A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

3. Please list the zip codes this program will target:  
12180, 12182, 12144

4. Describe the program, including how it is family focused. If you answered “yes” to Q1 (FSS), be sure to demonstrate how your program meets the definition. Also, please explain how each of the service types selected in Q2 will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them.

The program is an evidence based family intervention program for RTA-JD adjudicated youth and their families. The Functional Family Therapist works intensively with stakeholders to reduce the need for out-of-home placement, as well as shorten the length of placement and dependence upon the social services system. This is accomplished by identifying risk factors, then creating safety and treatment plans that focus on empowering and strengthening families to problem solve, plan for safety, increase independence, productivity and family functioning within their home community. The Functional Family Therapist also works with parents to increase their involvement in their children’s schools and community resources. The ages of youth served will be 16-17. No funding was used for this program as it did not come to fruition during the 2019-2020 PY.

5. Is the program capable of being replicated across multiple locations?  Yes  No

**C. Program 4 Performance History** (Refer to your municipality’s STSJP data files.)

1. What funding did this program receive in PY 2019-2020?  
 None (If none, skip to section D.)  STSJP  STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type								Total
	P	EI	ATD/ATPDP				ATP	R/A	
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA							0		0
Total							0		0

3. Based on the program’s record of youth served (Q2), do you anticipate this program being over or under its budgeted capacity on 9/30/2020? Please explain:  
The program will be under budget as it did not come to fruition during the 2019-2020 PY.

4. Please use the table to record the **average lengths of service (days)** for youth who exited the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type							ATP	R/A
	P	EI	ATD/ATPDP						
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA							0.00		

5. How do the average lengths of service (Q4) compare to what you would expect for that point? For ATD/PDP and ATP points, compare with the average lengths of stay for youth who were in detention and residential placements during the same time period.

The program was did not come to fruition during the 2019-2020 PY

6. Will this program's outcomes meet the PY 2019-2020 projected goals by 9/30/2020?

Yes (If yes, skip to section D.)     Partially     No

7. (a) What outcomes are on track to meet the goals set for PY 2019-2020? (b) How will they be met?

The program did not come to fruition during the 2019-2020 PY, therefore there are no goals to be met.

8. (a) What outcomes are not on track to meet the goals set for PY 2019-2020? (b) Please describe any contributing barriers.

The program did not come to fruition during the 2019-2020 PY, therefore there are no outcomes or goals to be met or contributing barriers.

9. What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2020-2021?

The program did not come to fruition during the 2019-2020 PY, therefore no changes have been made to overcome barriers as there were none.

**D. Program 4 Service Projections for PY 2020-2021**

1. Please use the table to indicate the **projected # youth to be served** by the program for PY 2020-2021. Enter zero (0) if not applicable.

Approved Funding	Program Type							ATP	R/A	Total
	P	EI	ATD/ATPDP							
			(PINS)	(JO/JD)	(JD-RTA)	(AO)				
STSJP										
STSJP-RTA							40		40	
Total							40		40	

**PROGRAM 5**

**A. Program 5 Contact Information**

Program 5 Name: Berkshire - Stepping Stones (STSJP- RTA)

Operating Agency: Berkshire Farm Center and Services for Youth

Program Mailing Address: 945 Palmer Avenue

Address Line 2:

City: Schenectady

State: NY

Zip Code: 12309

Program Contact's Name: Joanne Bedell

Title: Administrative Assistant to VP of Community Services

Phone: (518) 346-6201

Ext: 221

Email: jbedell@berkshirefarm.org

**B. Program 5 Description and Target Population**

1. This program meets the legal definition of a **Family Support Services (FSS) program (Social Services Law Section 458-m)** and will operate in this capacity for PY 2020-2021.  Yes  No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2020-2021:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry / Aftercare (R / A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

3. Please list the zip codes this program will target:  
12180, 12182, 12144

4. Describe the program, including how it is family focused. If you answered “yes” to Q1 (FSS), be sure to demonstrate how your program meets the definition. Also, please explain how each of the service types selected in Q2 will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them.

The Enhanced Stepping Stones program is an intensive home based prevention program that works with high risk RTA-JD adjudicated youth to prevent out of home placement and works intensively to reduce the need for dependence upon DSS. The program’s goals are: to reduce the risk of out of home placement; increase family preservation; provide services to support the least restrictive environment for youth needing placement; reduce the risk of future contact with the juvenile justice system; and prevent return to placement. The program will aid in the reduction of youth detained and residentially or otherwise placed by utilizing rapid engagement, Strength based Family Assessments, Treatment planning that focuses on skills and behaviors necessary for youth and families to function safely and appropriately, therapeutic/clinical services, vocational support, education support and advocacy, skill building, crisis intervention, service coordination and collaboration as well as creating an individualized Youth Support Team. No funding was used for this program as it did not come to fruition during the 2019-2020 PY.

5. Is the program capable of being replicated across multiple locations?  Yes  No

**C. Program 5 Performance History** (Refer to your municipality’s STSJP data files.)

1. What funding did this program receive in PY 2019-2020?  
 None (If none, skip to section D.)  STSJP  STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type							Total	
	P	EI	ATD/ATPDP				ATP		R/A
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA							0	0	
Total							0	0	

3. Based on the program’s record of youth served (Q2), do you anticipate this program being over or under its budgeted capacity on 9/30/2020? Please explain:

The program will be under budget as it did not come to fruition during the 2019-2020 PY.

4. Please use the table to record the **average lengths of service (days)** for youth who exited the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type							ATP	R/A
	P	EI	ATD/ATPDP						
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA							0.00		

5. How do the average lengths of service (Q4) compare to what you would expect for that point? For ATD/PDP and ATP points, compare with the average lengths of stay for youth who were in detention and residential placements during the same time period.

The program was did not come to fruition during the 2019-2020 PY

6. Will this program's outcomes meet the PY 2019-2020 projected goals by 9/30/2020?

Yes (If yes, skip to section D.)  Partially  No

7. (a) What outcomes are on track to meet the goals set for PY 2019-2020? (b) How will they be met?

The program did not come to fruition during the 2019-2020 PY, therefore there are no goals to be met.

8. (a) What outcomes are not on track to meet the goals set for PY 2019-2020? (b) Please describe any contributing barriers.

The program did not come to fruition during the 2019-2020 PY, therefore there are no outcomes or goals to be met or contributing barriers.

9. What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2020-2021?

The program did not come to fruition during the 2019-2020 PY, therefore no changes have been made to overcome barriers as there were none.

**D. Program 5 Service Projections for PY 2020-2021**

1. Please use the table to indicate the **projected # youth to be served** by the program for PY 2020-2021. Enter zero (0) if not applicable.

Approved Funding	Program Type							ATP	R/A	Total
	P	EI	ATD/ATPDP							
			(PINS)	(JO/JD)	(JD-RTA)	(AO)				
STSJP										
STSJP-RTA							20		20	
Total							20		20	

**PROGRAM 6**

**A. Program 6 Contact Information**

Program 6 Name: Rensselaer County Mental Health Transitions Program (STSJP-RTA)

Operating Agency: Renssealer County Department of Mental Health

Program Mailing Address: 1600 7th Avenue

Address Line 2:

City: Troy

State: NY

Zip Code: 12180

Program Contact's Name: Michelle Marte

Title: Director of Children's Services

Phone: (518) 270-2836 Ext:

Email: MMarte@rensco.com

**B. Program 6 Description and Target Population**

1. This program meets the legal definition of a **Family Support Services (FSS) program (Social Services Law Section 458-m)** and will operate in this capacity for PY 2020-2021.  Yes  No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2020-2021:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry / Aftercare (R / A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

3. Please list the zip codes this program will target:  
12180, 12182, 12144

4. Describe the program, including how it is family focused. If you answered “yes” to Q1 (FSS), be sure to demonstrate how your program meets the definition. Also, please explain how each of the service types selected in Q2 will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them.

The Transitions Program will work with Probation, Renssealer County DSS, school personnel, medical staff, families and other service providers to identify children that they feel are at the highest risk of being residentially placed. Once appropriate adjudicated RTA-JD youth are identified, evidence based treatment models will be used to meet the unique needs of each child and family (ability to provide therapy, skill building, referrals to community supports and mentoring). The program will work with youth that are 16 and 17 years of age. No funding was used for this program as it did not come to fruition during the 2019-2020 PY.

5. Is the program capable of being replicated across multiple locations?  Yes  No

**C. Program 6 Performance History** (Refer to your municipality’s STSJP data files.)

1. What funding did this program receive in PY 2019-2020?

None (If none, skip to section D.)  STSJP  STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type								Total
	P	EI	ATD/ATPDP				ATP	R/A	
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA							0		0
Total							0		0

3. Based on the program’s record of youth served (Q2), do you anticipate this program being over or under its budgeted capacity on 9/30/2020? Please explain:

The program will be under budget as it did not come to fruition during the 2019-2020 PY.

4. Please use the table to record the **average lengths of service (days)** for youth who exited the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type							ATP	R/A
	P	EI	ATD/ATPDP						
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA							0.00		

5. How do the average lengths of service (Q4) compare to what you would expect for that point? For ATD/PDP and ATP points, compare with the average lengths of stay for youth who were in detention and residential placements during the same time period.

The program was did not come to fruition during the 2019-2020 PY

6. Will this program's outcomes meet the PY 2019-2020 projected goals by 9/30/2020?

Yes (If yes, skip to section D.)     Partially     No

7. (a) What outcomes are on track to meet the goals set for PY 2019-2020? (b) How will they be met?

The program did not come to fruition during the 2019-2020 PY, therefore there are no goals to be met.

8. (a) What outcomes are not on track to meet the goals set for PY 2019-2020? (b) Please describe any contributing barriers.

The program did not come to fruition during the 2019-2020 PY, therefore there are no outcomes or goals to be met or contributing barriers.

9. What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2020-2021?

The program did not come to fruition during the 2019-2020 PY, therefore no changes have been made to overcome barriers as there were none.

**D. Program 6 Service Projections for PY 2020-2021**

1. Please use the table to indicate the **projected # youth to be served** by the program for PY 2020-2021. Enter zero (0) if not applicable.

Approved Funding	Program Type							ATP	R/A	Total
	P	EI	ATD/ATPDP							
			(PINS)	(JO/JD)	(JD-RTA)	(AO)				
STSJP										
STSJP-RTA							16		16	
Total							16		16	

**PROGRAM 7**

**A. Program 7 Contact Information**

Program 7 Name: Dept of Employment & Training- Youth Dev Specialist (STSJP-RTA)- Equipment

Operating Agency: Rensselaer County Department of Employment and Training

Program Mailing Address: 1600 7th Avenue

Address Line 2:

City: Troy

State: NY

Zip Code: 12180

Program Contact's Name: Brian Williams

Title: Commissioner  
Rensselaer County One Stop Career Center at the  
Department of Employment and Training

Phone: (518) 270-2878    Ext:

Email: Brian@capreg.org

**B. Program 7 Description and Target Population**

1. This program meets the legal definition of a **Family Support Services (FSS) program (Social Services Law Section 458-m)** and will operate in this capacity for PY 2020-2021.  Yes  No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2020-2021:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry / Aftercare (R / A)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Indirect Services

3. Please list the zip codes this program will target:  
12180, 12182, 12144

4. Describe the program, including how it is family focused. If you answered “yes” to Q1 (FSS), be sure to demonstrate how your program meets the definition. Also, please explain how each of the service types selected in Q2 will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them.

The Youth Development Specialist work with adjudicated RTA-JD youth that are 16 and 17 years of age to bridge the gap between the youth workforce development and the juvenile justice reform systems by helping youth obtain employment. Helping youth obtain employment should decrease the likelihood that they will become involved with the juvenile justice system. A lap top is needed for the Youth Development Specialist in order for the YDS to utilize while in the office as well as in the field while meeting with businesses and youth at various sites. Funding was not utilized for this indirect service during the 2019-2020 PY.

5. Is the program capable of being replicated across multiple locations?  Yes  No

**C. Program 7 Performance History** (Refer to your municipality’s STSJP data files.)

1. What funding did this program receive in PY 2019-2020?  
 None (If none, skip to section D.)  STSJP  STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type								Total
	P	EI	ATD/ATPDP				ATP	R/A	
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA	0								0
Total	0								0

3. Based on the program’s record of youth served (Q2), do you anticipate this program being over or under its budgeted capacity on 9/30/2020? Please explain:  
The program will be under budget as it did not come to fruition during the 2019-2020 PY.

4. Please use the table to record the **average lengths of service (days)** for youth who exited the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type							ATP	R/A
	P	EI	ATD/ATPDP						
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA	0.00								

5. How do the average lengths of service (Q4) compare to what you would expect for that point? For ATD/PDP and ATP points, compare with the average lengths of stay for youth who were in detention and residential placements during the same time period.

The program was did not come to fruition during the 2019-2020 PY

6. Will this program's outcomes meet the PY 2019-2020 projected goals by 9/30/2020?

Yes (If yes, skip to section D.)  Partially  No

7. (a) What outcomes are on track to meet the goals set for PY 2019-2020? (b) How will they be met?

The program did not come to fruition during the 2019-2020 PY, therefore there are no goals to be met.

8. (a) What outcomes are not on track to meet the goals set for PY 2019-2020? (b) Please describe any contributing barriers.

The program did not come to fruition during the 2019-2020 PY, therefore there are no outcomes or goals to be met or contributing barriers.

9. What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2020-2021?

The program did not come to fruition during the 2019-2020 PY, therefore no changes have been made to overcome barriers as there were none.

**D. Program 7 Service Projections for PY 2020-2021**

1. Please use the table to indicate the **projected # youth to be served** by the program for PY 2020-2021. Enter zero (0) if not applicable.

Approved Funding	Program Type								Total
	P	EI	ATD/ATPDP				ATP	R/A	
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA	0								0
Total	0								0

**PROGRAM 8**

**A. Program 8 Contact Information**

Program 8 Name: Dept of Employment & Training- Youth Dev Specialist (STSJP-RTA)- Travel

Operating Agency: Rensselaer County Department of Employment and Training

Program Mailing Address: 1600 7th Avenue

Address Line 2:

City: Troy

State: NY

Zip Code: 12180

Program Contact's Name: Brian Williams

Title: Commissioner  
Rensselaer County One Stop Career Center at the  
Department of Employment and Training

Phone: (518) 270-2878 Ext:

Email: Brian@capreg.org

**B. Program 8 Description and Target Population**

1. This program meets the legal definition of a **Family Support Services (FSS) program (Social Services Law Section 458-m)** and will operate in this capacity for PY 2020-2021.  Yes  No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2020-2021:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry / Aftercare (R / A)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Indirect Services

3. Please list the zip codes this program will target:  
12180, 12182, 12144

4. Describe the program, including how it is family focused. If you answered “yes” to Q1 (FSS), be sure to demonstrate how your program meets the definition. Also, please explain how each of the service types selected in Q2 will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them.

The Youth Development Specialist work with youth that are 16 and 17 years of age to bridge the gap between the youth workforce development and the juvenile justice reform systems by helping youth obtain employment. Helping youth obtain employment should decrease the likelihood that they will become involved with the juvenile justice system. The travel expenses would be to cover the mileage of the individual in the position as they travel to meet with various businesses, provide job coaching to the youth placed at businesses, and other coalition building meetings in the community. Funding was not utilized for this indirect service during the 2019-2020 PY.

5. Is the program capable of being replicated across multiple locations?  Yes  No

**C. Program 8 Performance History** (Refer to your municipality’s STSJP data files.)

1. What funding did this program receive in PY 2019-2020?  
 None (If none, skip to section D.)  STSJP  STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type						ATP	R/A	Total
	P	EI	ATD/ATPDP						
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA	0							0	
Total	0							0	

3. Based on the program’s record of youth served (Q2), do you anticipate this program being over or under its budgeted capacity on 9/30/2020? Please explain:

The program will be under budget as it did not come to fruition during the 2019-2020 PY.

4. Please use the table to record the **average lengths of service (days)** for youth who exited the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type							ATP	R/A
	P	EI	ATD/ATPDP						
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA	0.00								

5. How do the average lengths of service (Q4) compare to what you would expect for that point? For ATD/PDP and ATP points, compare with the average lengths of stay for youth who were in detention and residential placements during the same time period.

The program was did not come to fruition during the 2019-2020 PY

6. Will this program's outcomes meet the PY 2019-2020 projected goals by 9/30/2020?

Yes (If yes, skip to section D.)  Partially  No

7. (a) What outcomes are on track to meet the goals set for PY 2019-2020? (b) How will they be met?

The program did not come to fruition during the 2019-2020 PY, therefore there are no goals to be met

8. (a) What outcomes are not on track to meet the goals set for PY 2019-2020? (b) Please describe any contributing barriers.

The program did not come to fruition during the 2019-2020 PY, therefore there are no outcomes or goals to be met or contributing barriers.

9. What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2020-2021?

The program did not come to fruition during the 2019-2020 PY, therefore no changes have been made to overcome barriers as there were none.

**D. Program 8 Service Projections for PY 2020-2021**

1. Please use the table to indicate the **projected # youth to be served** by the program for PY 2020-2021. Enter zero (0) if not applicable.

Approved Funding	Program Type							ATP	R/A	Total
	P	EI	ATD/ATPDP							
			(PINS)	(JO/JD)	(JD-RTA)	(AO)				
STSJP										
STSJP-RTA	0								0	
Total	0								0	

**PROGRAM 9**

**A. Program 9 Contact Information**

Program 9 Name: \_\_\_\_\_

Operating Agency: \_\_\_\_\_

Program Mailing Address: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City: \_\_\_\_\_ State: **NY** Zip Code: \_\_\_\_\_

Program Contact's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Ext: \_\_\_\_\_ Email: \_\_\_\_\_

**B. Program 9 Description and Target Population**

1. This program meets the legal definition of a **Family Support Services (FSS) program (Social Services Law Section 458-m)** and will operate in this capacity for PY 2020-2021.  Yes  No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2020-2021:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry / Aftercare (R / A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

3. Please list the zip codes this program will target:

4. Describe the program, including how it is family focused. If you answered "yes" to Q1 (FSS), be sure to demonstrate how your program meets the definition. Also, please explain how each of the service types selected in Q2 will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them.

5. Is the program capable of being replicated across multiple locations?  Yes  No

**C. Program 9 Performance History** (Refer to your municipality's STSJP data files.)

1. What funding did this program receive in PY 2019-2020?  
 None (If none, skip to section D.)  STSJP  STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type							Total	
	P	EI	ATD/ATPDP				ATP		R/A
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA									
Total									

3. Based on the program's record of youth served (Q2), do you anticipate this program being over or under its budgeted capacity on 9/30/2020? Please explain:

4. Please use the table to record the **average lengths of service (days)** for youth who exited the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type							
	P	EI	ATD/ATPDP				ATP	R/A
			(PINS)	(JO/JD)	(JD-RTA)	(AO)		
STSJP								
STSJP-RTA								

5. How do the average lengths of service (Q4) compare to what you would expect for that point? For ATD/PDP and ATP points, compare with the average lengths of stay for youth who were in detention and residential placements during the same time period.

6. Will this program's outcomes meet the PY 2019-2020 projected goals by 9/30/2020?  
 Yes (If yes, skip to section D.)  Partially  No

7. (a) What outcomes are on track to meet the goals set for PY 2019-2020? (b) How will they be met?
8. (a) What outcomes are not on track to meet the goals set for PY 2019-2020? (b) Please describe any contributing barriers.
9. What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2020-2021?

**D. Program 9 Service Projections for PY 2020-2021**

1. Please use the table to indicate the **projected # youth to be served** by the program for PY 2020-2021. Enter zero (0) if not applicable.

Approved Funding	Program Type								Total
	P	EI	ATD/ATPDP				ATP	R/A	
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA									
Total									

**PROGRAM 10**

**A. Program 10 Contact Information**

Program 10 Name:

Operating Agency:

Program Mailing Address:

Address Line 2:

City: State: **NY** Zip Code:

Program Contact's Name: Title:

Phone: ( ) Ext: Email:

**B. Program 10 Description and Target Population**

1. This program meets the legal definition of a **Family Support Services (FSS) program (Social Services Law Section 458-m)** and will operate in this capacity for PY 2020-2021.  Yes  No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2020-2021:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry / Aftercare (R / A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

3. Please list the zip codes this program will target:

4. Describe the program, including how it is family focused. If you answered "yes" to Q1 (FSS), be sure to demonstrate how your program meets the definition. Also, please explain how each of the service types selected in Q2 will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them.

5. Is the program capable of being replicated across multiple locations?  Yes  No

**C. Program 10 Performance History** (Refer to your municipality's STSJP data files.)

1. What funding did this program receive in PY 2019-2020?  
 None (If none, skip to section D.)  STSJP  STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type								Total
	P	EI	ATD/ATPDP				ATP	R/A	
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA									
Total									

3. Based on the program's record of youth served (Q2), do you anticipate this program being over or under its budgeted capacity on 9/30/2020? Please explain:

4. Please use the table to record the **average lengths of service (days)** for youth who exited the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type							
	P	EI	ATD/ATPDP				ATP	R/A
			(PINS)	(JO/JD)	(JD-RTA)	(AO)		
STSJP								
STSJP-RTA								

5. How do the average lengths of service (Q4) compare to what you would expect for that point? For ATD/PDP and ATP points, compare with the average lengths of stay for youth who were in detention and residential placements during the same time period.

6. Will this program's outcomes meet the PY 2019-2020 projected goals by 9/30/2020?  
 Yes (If yes, skip to section D.)  Partially  No

7. (a) What outcomes are on track to meet the goals set for PY 2019-2020? (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2019-2020? (b) Please describe any contributing barriers.

9. What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2020-2021?

**D. Program 10 Service Projections for PY 2020-2021**

1. Please use the table to indicate the **projected # youth to be served** by the program for PY 2020-2021. Enter zero (0) if not applicable.

Approved Funding	Program Type							R/A	Total
	P	EI	ATD/ATPDP				ATP		
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA									
Total									

**PROGRAM 11**

**A. Program 11 Contact Information**

Program 11 Name: \_\_\_\_\_

Operating Agency: \_\_\_\_\_

Program Mailing Address: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City: \_\_\_\_\_ State: **NY** Zip Code: \_\_\_\_\_

Program Contact's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Ext: \_\_\_\_\_ Email: \_\_\_\_\_

**B. Program 11 Description and Target Population**

1. This program meets the legal definition of a **Family Support Services (FSS) program (Social Services Law Section 458-m)** and will operate in this capacity for PY 2020-2021.  Yes  No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2020-2021:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry / Aftercare (R / A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

3. Please list the zip codes this program will target:

4. Describe the program, including how it is family focused. If you answered "yes" to Q1 (FSS), be sure to demonstrate how your program meets the definition. Also, please explain how each of the service types selected in Q2 will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them.

5. Is the program capable of being replicated across multiple locations?  Yes  No

**C. Program 11 Performance History (Refer to your municipality's STSJP data files.)**

1. What funding did this program receive in PY 2019-2020?  
 None (If none, skip to section D.)  STSJP  STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type								Total
	P	EI	ATD/ATPDP				ATP	R/A	
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA									
Total									

3. Based on the program's record of youth served (Q2), do you anticipate this program being over or under its budgeted capacity on 9/30/2020? Please explain:

4. Please use the table to record the **average lengths of service (days)** for youth who exited the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type							
	P	EI	ATD/ATPDP				ATP	R/A
			(PINS)	(JO/JD)	(JD-RTA)	(AO)		
STSJP								
STSJP-RTA								

5. How do the average lengths of service (Q4) compare to what you would expect for that point? For ATD/PDP and ATP points, compare with the average lengths of stay for youth who were in detention and residential placements during the same time period.

6. Will this program's outcomes meet the PY 2019-2020 projected goals by 9/30/2020?  
 Yes (If yes, skip to section D.)     Partially     No

7. (a) What outcomes are on track to meet the goals set for PY 2019-2020? (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2019-2020? (b) Please describe any contributing barriers.

9. What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2020-2021?

**D. Program 11 Service Projections for PY 2020-2021**

1. Please use the table to indicate the **projected # youth to be served** by the program for PY 2020-2021. Enter zero (0) if not applicable.

Approved Funding	Program Type								Total
	P	EI	ATD/ATPDP				ATP	R/A	
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA									
Total									

**PROGRAM 12**

**A. Program 12 Contact Information**

Program 12 Name:

Operating Agency:

Program Mailing Address:		
Address Line 2:		
City:	State: <b>NY</b>	Zip Code:
Program Contact's Name:		Title:
Phone: ( )	Ext:	Email:

**B. Program 12 Description and Target Population**

1. This program meets the legal definition of a **Family Support Services (FSS) program (Social Services Law Section 458-m)** and will operate in this capacity for PY 2020-2021.  Yes  No

2. Please check all applicable boxes below to identify the service types that will be utilized for this program in PY 2020-2021:

STSJP	STSJP-RTA	
<input type="checkbox"/>	<input type="checkbox"/>	Prevention (P)
<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention (EI)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Detention / Pre-Dispositional Placement (ATD / ATPDP)
<input type="checkbox"/>	<input type="checkbox"/>	Alternative to Placement (ATP)
<input type="checkbox"/>	<input type="checkbox"/>	Reentry / Aftercare (R / A)
<input type="checkbox"/>	<input type="checkbox"/>	Indirect Services

3. Please list the zip codes this program will target:

4. Describe the program, including how it is family focused. If you answered "yes" to Q1 (FSS), be sure to demonstrate how your program meets the definition. Also, please explain how each of the service types selected in Q2 will address the unique needs of youth at that system point, and how those services will aid in the reduction of youth detained and residentially or otherwise placed. If you selected Indirect Services, please list them.

5. Is the program capable of being replicated across multiple locations?  Yes  No

**C. Program 12 Performance History (Refer to your municipality's STSJP data files.)**

1. What funding did this program receive in PY 2019-2020?  
 None (If none, skip to section D.)  STSJP  STSJP-RTA

2. Please use the table to record **how many youth (#) were served** by the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type							Total	
	P	EI	ATD/ATPDP				ATP		R/A
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA									
Total									

3. Based on the program's record of youth served (Q2), do you anticipate this program being over or under its budgeted capacity on 9/30/2020? Please explain:

4. Please use the table to record the **average lengths of service (days)** for youth who exited the program between 10/1/2019 and 3/31/2020. Enter zero (0) if not applicable.

Approved Funding	Program Type							ATP	R/A
	P	EI	ATD/ATPDP						
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA									

5. How do the average lengths of service (Q4) compare to what you would expect for that point? For ATD/PDP and ATP points, compare with the average lengths of stay for youth who were in detention and residential placements during the same time period.

6. Will this program's outcomes meet the PY 2019-2020 projected goals by 9/30/2020?  
 Yes (If yes, skip to section D.)     Partially     No

7. (a) What outcomes are on track to meet the goals set for PY 2019-2020? (b) How will they be met?

8. (a) What outcomes are not on track to meet the goals set for PY 2019-2020? (b) Please describe any contributing barriers.

9. What changes have been made to overcome the barriers identified in Q8, so that the program can achieve its desired goals for PY 2020-2021?

**D. Program 12 Service Projections for PY 2020-2021**

1. Please use the table to indicate the **projected # youth to be served** by the program for PY 2020-2021. Enter zero (0) if not applicable.

Approved Funding	Program Type								Total
	P	EI	ATD/ATPDP				ATP	R/A	
			(PINS)	(JO/JD)	(JD-RTA)	(AO)			
STSJP									
STSJP-RTA									
Total									

**PART III – Goals for PY 2020-2021**

Please set the municipality's goals for its programs to achieve in PY 2020-2021. State-required outcomes have been included with space for you to add any locally collected outcomes. Goals are focused by service type and should reflect the percentage of youth expected to achieve the outcome described. Note: Outcomes are only recorded for youth once they have left the program; this may represent a subset of all the youth served during the period.

**Prevention**

STSJP	STSJP RTA	Outcomes
%	85	% of youth will have no PINS referrals during service engagement
%	85	% of youth will have no trancies during service engagement
%	85	% of youth will have no school suspensions during service engagement
%	85	% of youth will have no arrests or probation intakes during service engagement
%	90	% of youth will be able to identify at least one accessible, positive adult connection <b>*(new)</b>
%	85	% of youth will be engaged in at least one positive community activity <b>*(new)</b>
%	85	% of youth will comply with program rules
%	85	% of youth will attend at least 90 percent of programming

<b>Other, locally collected outcomes:</b>				
<b>Early Intervention</b>				
<b>STSJP</b>		<b>STSJP RTA</b>		<b>Outcomes</b>
	%		%	of youth will have no PINS referrals during service engagement
	%		%	of youth will have no truancies during service engagement
	%		%	of youth will have no school suspensions during service engagement
	%		%	of youth will have no arrests or probation intakes during service engagement
	%		%	of youth will have their cases successfully adjusted/diverted during service engagement
	%		%	of youth will be able to identify at least one accessible, positive adult connection * <b>(new)</b>
	%		%	of youth will be engaged in at least one positive community activity * <b>(new)</b>
	%		%	of youth will comply with program rules
	%		%	of youth will attend at least 90 percent of programming
<b>Other, locally collected outcomes:</b>				
<b>Alternative to Detention / Pre-Dispositional Placement</b>				
<b>STSJP</b>		<b>STSJP RTA</b>		<b>Outcomes</b>
	%		%	of youth will have no missed court appearances during service engagement
	%		%	of youth will have no warrants issued during service engagement
	%		%	of youth will have no arrests or probation intakes during service engagement
	%		%	of youth will have no detention or jail admissions during service engagement
	%		%	of PINS will have no pre-dispositional placements during service engagement
	%		%	of youth will be able to identify at least one accessible, positive adult connection * <b>(new)</b>
	%		%	of youth will be engaged in at least one positive community activity * <b>(new)</b>
	%		%	of youth will comply with program rules
	%		%	of youth will attend at least 90 percent of programming
<b>Other, locally collected outcomes:</b>				
<b>Alternative to Placement</b>				
<b>STSJP</b>		<b>STSJP RTA</b>		<b>Outcomes</b>
90	%	90	%	of youth will have no warrants issued during service engagement
85	%	85	%	of youth will have no arrests or probation intakes during service engagement
85	%	85	%	of youth will have no detention or jail admissions during service engagement
90	%	0	%	of PINS will have no pre-dispositional placements during service engagement
85	%	85	%	of youth will have no violations of probation filed during service engagement
85	%	85	%	of youth will have no new placements during service engagement
90	%	90	%	of youth will be able to identify at least one accessible, positive adult connection * <b>(new)</b>
85	%	85	%	of youth will be engaged in at least one positive community activity * <b>(new)</b>
85	%	85	%	of youth will comply with program rules
85	%	85	%	of youth will attend at least 90 percent of programming
<b>Other, locally collected outcomes:</b>				
<b>Reentry / Aftercare</b>				

STSJP		STSJP RTA		Outcomes
	%		%	of youth will have no warrants issued during service engagement
	%		%	of youth will have no arrests or probation intakes during service engagement
	%		%	of youth will have no detention or jail admissions during service engagement
	%		%	of PINS will have no pre-dispositional placements during service engagement
	%		%	of youth will have no new placements during service engagement
	%		%	of youth will have no returns to their previous placements during service engagement
	%		%	of youth will be able to identify at least one accessible, positive adult connection * <b>(new)</b>
	%		%	of youth will be engaged in at least one positive community activity * <b>(new)</b>
	%		%	of youth will comply with program rules
	%		%	of youth will attend at least 90 percent of programming
<b>Other, locally collected outcomes:</b>				

**PART IV – FUNDING**

**A. Anticipated Program Expenses and Funding Distribution**

Program Name & Service Types	STSJP					STSJP-RTA
	Detention Allocation Shifted	PY20-21 STSJP Allocation	Total Expenses (100%)	Local Share (38%)	State Share (62%)	State Share (100%)
<b>1</b> Berkshire Farm Stepping Stones		\$67,328.28	\$108,594.00	\$41,265.72	\$67,328.28	
Prevention						
Early Intervention						
ATD/ATPDP						
ATP		\$67,328.28	\$108,594.00	\$41,265.72	\$67,328.28	
Reentry/Aftercare						
Indirect						
<b>2</b> Rensselaer County Department of Mental Health Transitions Program		\$7,764.72	\$12,523.74	\$4,759.02	\$7,764.72	
Prevention						
Early Intervention						
ATD/ATPDP						
ATP		\$7,764.72	\$12,523.74	\$4,759.02	\$7,764.72	
Reentry/Aftercare						
Indirect						
<b>3</b> Dept of Employment & Training- Youth Dev Specialist (STSJP-RTA)						\$38,373.00
Prevention						\$38,373.00
Early Intervention						
ATD/ATPDP						
ATP						
Reentry/Aftercare						
Indirect						
<b>4</b> Functional Family Therapy (STSJP- RTA )						\$120,760.00
Prevention						
Early Intervention						
ATD/ATPDP						
ATP						\$120,760.00
Reentry/Aftercare						
Indirect						
<b>5</b> Berkshire - Stepping Stones (STSJP- RTA)						\$121,559.00
Prevention						

Early Intervention						
ATD/ATPDP						
ATP						\$121,559.00
Reentry/Aftercare						
Indirect						

Program Name & Service Types	STSJP					STSJP-RTA
	Detention Allocation Shifted	PY20-21 STSJP Allocation	Total Expenses (100%)	Local Share (38%)	State Share (62%)	State Share (100%)
<b>6</b> Rensselaer County Mental Health Transitions Program (STSJP-RTA)						\$20,000.00
Prevention						
Early Intervention						
ATD/ATPDP						
ATP						\$20,000.00
Reentry/Aftercare						
Indirect						
<b>7</b> Dept of Employment & Training- Youth Dev Specialist (STSJP-RTA)-Equipment						\$1,500.00
Prevention						
Early Intervention						
ATD/ATPDP						
ATP						
Reentry/Aftercare						
Indirect						\$1,500.00
<b>8</b> Dept of Employment & Training- Youth Dev Specialist (STSJP-RTA)-Travel						\$1,073.00
Prevention						
Early Intervention						
ATD/ATPDP						
ATP						
Reentry/Aftercare						
Indirect						\$1,073.00
<b>9</b>						
Prevention						
Early Intervention						
ATD/ATPDP						
ATP						

Reentry/Aftercare						
Indirect						
<b>10</b>						
Prevention						
Early Intervention						
ATD/ATPDP						
ATP						
Reentry/Aftercare						
Indirect						

Program Name & Service Types	STSJP					STSJP-RTA
	Detention Allocation Shifted	PY20-21 STSJP Allocation	Total Expenses (100%)	Local Share (38%)	State Share (62%)	State Share (100%)
<b>11</b>						
Prevention						
Early Intervention						
ATD/ATPDP						
ATP						
Reentry/Aftercare						
Indirect						
<b>12</b>						
Prevention						
Early Intervention						
ATD/ATPDP						
ATP						
Reentry/Aftercare						
Indirect						
<b>Sum of Program Totals:</b>		\$75,093.00	\$121,117.74	\$46,024.74	\$75,093.00	\$303,265.00

B. STSJP Reimbursement Summary	
STSJP Allocation Amount	\$75,093.00
Locally Approved Amount of PY 2020-2021 STSJP Allocation	\$75,093.00
Approved Detention Allocation Shifted	
<b>Total Approved for State Reimbursement</b>	<b>\$75,093.00</b>

C. STSJP-RTA Reimbursement Summary	
STSJP-RTA Approved Plan Amount	\$303,265.00
<b>Total Approved for State Reimbursement</b>	<b>\$303,265.00</b>

**PART V – PLAN APPROVAL**

<b>A. Municipality Level Approval – Chief Executive / Administrative Official</b>		
As STSJP Lead for Rensselaer County, I certify that the Chief Executive/Administrative Official, [Name and Title] Steven F. McLaughlin- County Executive, has reviewed and approved the 2020-2021 STSJP Plan.		
User ID: 38A894	Print Name: Cara Brown	Date: 12/29/2020
<b>B. State Level Approval – OCFS Program Reviewer</b>		
As OCFS STSJP reviewer, I certify that I approve of this STSJP plan for Choose an item. for 2020-2021.		
User ID: IT1619	Print Name: Geneva Hilliard	Date: 1/4/2021