

Livingston County



REQUEST FOR PROPOSALS

LIVINGSTON COUNTY YOUTH BUREAU YOUTH DEVELOPMENT PROGRAMS

July 3, 2023

**Office of the Livingston County Administrator
Livingston County Government Center
6 Court Street, Room 302
Geneseo, New York 14454**

Proposals due July 28, 2023

RESPONSE CHECKLIST

Attention is especially called to the items listed below, which must be submitted in full as part of a Responder's proposal. Please check each item indicating your compliance.

THIS CHECKLIST MUST BE SUBMITTED WITH ALL PROPOSALS

Please submit one (1) original and (1) one copy of all items.

- RESPONSE CHECKLIST
- PROGRAM FUNDING APPLICATION (OCFS – 5001)
- PROGRAM PROFILE (OCFS – 5002)
- PROGRAM COMPONENTS (OCFS – 5003)
- PROGRAM BUDGET (OCFS-5005)
- STANDARD CONTRACT REQUIREMENTS APPENDICES A, B, AND C
- LIST OF CURENT BOARD OF DIRECTORS LIST
- EVIDENCE OF GOOD STANDING WITH THE NYS CHARITIES BUREAU
- MOST RECENT SINGLE AUDIT REPORT FOR THE RESPONDER AGENCY

I have read all the information contained in this package, confirm that the information contained in this proposal is valid and that the information about Responder's organization is true and correct.

AGENCY	TELEPHONE NUMBER
STREET ADDRESS	FAX NUMBER
CITY, STATE, ZIP	E-MAIL ADDRESS
AUTHORIZED REPRESENTATIVE (PRINT)	TITLE
AUTHORIZED SIGNATURE	DATE

REQUEST FOR PROPOSALS

Livingston County Youth Bureau

Livingston County through its Youth Bureau is requesting proposals from incorporated agencies to subcontract services to benefit Livingston County youth and families.

PROPOSAL OVERVIEW

Funding Priority and Purpose:

The purpose of the Livingston County Youth Bureau is to develop, implement and evaluate a countywide system of services for youth. Youth Bureaus promote positive youth development across systems and develop, fund and monitor programs that improve the quality of life for children, youth and families. The Touchstone Life Areas Model (http://www.nyskwic.org/about_kwic/touchstones.cfm) is used as a means to set indicators of success, goals, and objectives. The activities and strategies to use in reaching goals are detailed in the Services, Opportunities and Supports of the Touchstone model.

The NYS Office of Children and Family Services makes available Youth Development funds to provide programs that enhance youth development in the community and prevent youth from involvement in juvenile justice system, child welfare system or being chronically dependent on other human services systems. Livingston County will contract with local 501(c)3 tax-exempt, non-profit organizations for a total combined amount of approximately \$60,000.00.

Target Population: The target population is youth under the age of 21. They may be from any community, school district, township or neighborhood in Livingston County. Funds will be distributed based on local need, with consideration given to factors including but not limited to: historically under-resourced communities, public housing, high rates of family homelessness, Opportunity Zones, marginalized communities, Federally and/or New York State-recognized tribes and tribal organizations, neighborhoods that experience higher rates of crime and violence and poorer performing schools, and programs that serve youth identifying as Black, indigenous persons, and people of color.

Funding Available:

The amount of funding is allocated by New York State each year and is announced following the adoption of the State budget. The funds do not require any in kind or monetary match.

Time Frame of Contract:

Awarded program contracts will start on **October 1, 2023 and end September 30, 2024**. Contracts may be extended for two additional years, subject to approval by the Youth Board, availability of funds, and satisfactory completion of the first and/or second year of the contract.

Proposal Procedures and Information:

All proposals must be submitted in a sealed envelope and have original signature and date. Please mark on lower left-hand corner of envelope: "RFP- 2023 Youth Development".

One (1) original and one (1) copy of the proposal must be submitted to:

Office of the Livingston County Administrator

Attention: Ashley Scutt

Livingston County Government Center

6 Court Street, Room 302

Geneseo, New York 14454

Proposals will be received by the Office of the Livingston County Administrator until 4:00 pm on Friday, July 30, 2023. The official time for the receipt of proposals will be the time shown on the time stamp located in the Board of Supervisors/County Administration area, Room 302 on the third floor, Livingston County Government Center, 6 Court Street, Geneseo, New York 14454. It is the sole responsibility of Responders to ensure proposals are received in a timely fashion. Unfortunately, the County is *not able to accept proposals via email or fax*.

Responders assume the risk of any delay in the mail or in the handling of the mail by County employees. Whether a proposal submission is sent by mail or by means of personal delivery, Responders assume responsibility for having their proposals deposited on time at the place specified. To be considered “delivered on time,” a submission must be received by County Administration by the appointed day and time. **All proposals received after the day and time stated will not be considered and will be returned unopened to the Responder.**

Livingston County reserves the right to forego any informality and reject any or all proposals. Livingston County further reserves the right to seek new proposals when such a procedure is reasonably in the best interest of the County to do so.

GENERAL INFORMATION

Obligations of Responders and Inquiries:

- Every person/entity intending to issue a proposal pursuant to these specifications, before submitting said proposal, shall become fully familiar with the product to be provided.
- Additional information and the opportunity to ask questions will be provided at an optional Responders’ Workshop to be held on Monday July 17th, at 3:00 pm in Room 106 of the Government Center, 6 Court Street, Geneseo, NY 14454. Please email Ryan Snyder rsnyder@co.livingston.ny.us to register.
- Questions regarding this proposal must be submitted in writing to Ryan Snyder rsnyder@co.livingston.ny.us. Questions will be received until 4:00 pm on Wednesday, July 19, 2023 and responded to no later than Monday, July 24, 2023 by 4:00 pm. If necessary, an addendum to the RFP documents will be issued and all addenda so issued shall become part of the RFP documents.

Programs eligible for funding must meet the criteria below:

- Be properly insured.
- Be in good standing with the New York State Charities Bureau.
- Demonstrate basic competency in the areas of governance, monitoring & evaluation, partnership, and financial stewardship.
- Have a child protection policy in place that includes adherence to local city, agency, school district, and state child protection guidelines.
- Collect registration data, including participant demographic information as required by OCFS in such a fashion as to be able to accurately report anonymized aggregate data.

Contract Award:

Contract awards will be made following review of proposals by the Youth Board and subsequent approval by the Livingston County Board of Supervisors.

Contract Development:

The County of Livingston will enter into a contractual agreement with the Responders submitting proposals that best meet the needs and requirements. The content of the successful proposals will become an integral part of the contract, but may be modified by provisions in the final contract.

Award Committee:

The Award Committee will be made up of representatives of the Livingston County Youth Board.

Method of Award:

The award(s) may be made to the most responsible Responders whose proposals are determined to be in the best interest and will best serve Livingston County's priorities. The awards will be based upon Principal Award Criteria, the evaluation of references, corporate qualifications, and if deemed necessary, a presentation with the Responder. All proposals will be evaluated to determine if they meet the required format and are in compliance with all requirements of this Request for Proposals.

The following will be used as the Principal Award Criteria in the evaluation of proposals for developing the list of candidates to be considered for awards and/or potential negotiations. The following criteria are NOT listed in order of importance:

- (a) Overall quality of the proposal: 25%
- (b) Presentation of an understanding of youth service: 10%
- (c) Cost of services (budget, direct service costs, and local share): 25%
- (d) Experience of Responder with similar programs within New York State: 15%
- (e) Demonstration of adequate resources to supply said services: 15%
- (f) Demonstration of a history of supplying similar services: 10%

The Youth Board may require interviews with Responders submitting proposals for the purpose of obtaining additional information or clarification. Responders must be prepared to make one or more interviews. Responders must comply with this request or be disqualified. However, the written proposal should provide the Youth Board with a clear description of the proposed program, as interviews may not be mandated.

The Youth Board reserves the right to reject any and all proposals and to waive minor irregularities. The Youth Board further reserves the right to seek new proposals when such a procedure is reasonably in the best interest of the Youth Board to do so.

Written Communication:

No negotiations, decisions, or actions shall be initiated or executed by a Responder as a result of any verbal communication with any Youth Bureau employee or a Responder's misinterpretation of this RFP. Only those communications which are in writing from a Youth Bureau representative, as identified in this RFP, may be considered as a duly authorized expression on behalf of the Youth Bureau. Also, only communications from a Responder in writing shall be recognized by the Youth Bureau as duly authorized expressions on behalf of the Responder.

Clarification of Proposal Information:

Livingston County reserves the right to request verification, validation or clarification of any information contained in any of the proposals. This clarification may include securing other data from outside sources, as well as from the Respondent.

Reference to Other Materials:

The Responder cannot compel the Youth Board to consider any information except that which is contained in its proposal, or which is offered in response to a request from the Youth Board. The Responder should rely solely on its proposal. The Youth Board, however, reserves the right, in its sole discretion, to take into consideration its prior experience with Responders and information gained from other sources.

Youth Bureau Reserves the Right to:

- (a) Reject any and all proposals received in response to this solicitation.
- (b) Reject any proposal of any Responder who has previously failed to perform adequately after having once been awarded a prior bid/proposal for furnishing materials or services similar in nature to those in this RFP.
- (c) Waive any technical or formal defect in the proposal that is considered to be merely irregular, immaterial, or unsubstantial.

Insurance:

Insurance requirements are listed in Appendix C, titled "LIVINGSTON COUNTY STANDARD CONTRACT INSURANCE REQUIREMENTS".

Independent Contractor

It is understood the awarded Responder is an independent contractor and shall not be considered an agent of the Livingston County Board of Supervisors or Livingston County, nor shall any of the awarded Responder's agents or employees be considered subagents for the Livingston County Board of Supervisors or Livingston County.

Disqualifications:

Livingston County reserves the right to disqualify any Responder upon convincing evidence of collusion with intent to defraud and to commit any other illegal practices on their part. Failure to comply with requests for insurance may also be grounds for disqualification.

Failure to Execute:

Failure of successful Responder to execute a contract and furnish proof of insurance within fifteen (15) calendar days of receipt of the contract shall be just cause for cancellation of the award.

NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES

INDIVIDUAL PROGRAM APPLICATION

Program Information

Program Title:		QYDS ID# (For County Use Only):	Program Year:
FUNDING INFORMATION			
Funding Category: <input type="checkbox"/> Youth Development Funding <input type="checkbox"/> RHYA-Part I <input type="checkbox"/> RHYA-Part II		County:	
FUND AMOUNTS			
Total Program Amount:		OCFS Funds Requested:	
Amount Allocated:	60% State Aid [RHYA Programs ONLY]		% Tax Match
	% Agency Cash:		% In Kind
AGENCY INFORMATION:			
This Agency is: <input type="checkbox"/> Private, Not for Profit <input type="checkbox"/> Public <input type="checkbox"/> Religious Corporations		Federal ID #:	Charities Reg.#:
Agency Website:		Implementing Agency:	
Mailing Address:			
Address Line 2:			
City:		State:	Zip Code:
EXECUTIVE DIRECTOR FOR AGENCY			
Last Name:		First Name:	
Title:	Phone Number:		Extension:
Fax Number:		E-Mail:	
CONTACT PERSON FOR AGENCY:			
CONTACT PERSON FOR AGENCY/MUNICIPALITY:			
Last Name:		First Name:	
Title:	Phone Number:		Extension:
Fax Number:		E-Mail:	
PERIOD OF ACTUAL PROGRAM OPERATION:		HOURS OF OPERATION:	
FROM:	TO:	FROM:	TO:
<input type="checkbox"/> Daily <input type="checkbox"/> Other (Explain)			

EXECUTIVE DIRECTOR/BOARD CHAIRPERSON SIGNATURE

Disclaimer: Please note that submission of these forms to the County Youth Bureau does NOT guarantee funding will be allocated to your

NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
INDIVIDUAL PROGRAM APPLICATION
Agency Summary Instructions

Implementing Agency: Enter name of incorporated agency responsible for program.

Program Title: Enter the title of the program.

QYDS ID#: County Use Only. This number will be provided to you after the application has been entered into QYDS. Contract Agencies will get this number from their County Youth Bureau. **All programs will have new QYDS ID#'s annually.**

Program Year: Enter the year the program will operate.

FUNDING INFORMATION

Funding Category: To be completed by the County. Categories include: Youth Development Funding, RHYA Part I, and RHYA Part II.

County: Enter County where program applying for funding is located.

FUNDING AMOUNTS

Total Program Budget: Enter the total Program Budget.

OCFS Funds Requested: Enter the state aid being requested from the County.

Amount Allocated: To be completed by the County. This figure should be what the Youth Bureau is actually allocating to the program applying for funds.

RHYA PROGRAMS ONLY:

RHYA I: Provides 60/40 state-local matching funds for coordination of services, as well as short-term (30-60 days) residential and non-residential services to runaway and homeless youth under age 21, i.e. Interim Family Programs (Host Home).

RHYA II: Provides 60/40 state-local matching funds for residential and non-residential services to youths ages 16-21 for up to eighteen months, i.e. Transitional Independent Living Support Programs.

Agency Information: Enter the type of agency; Federal ID #; Charities Registration #; and Agency Website (if Applicable). Enter the name, address, city, state, and zip code of the incorporated agency responsible for operation of the program.

Executive Director for Agency: Enter name, title, phone number, extension (if applicable) fax number and e-mail of the person who can sign on behalf of the applying agency.

Contact Person for Agency: Enter information for the person to contact for this program. The e-mail should be a business or official e-mail address.

Period of Actual Operation: Enter the month and year that the program begins (FROM) and the month and year that the program ends (TO).

Hours of Operation: Enter the hours that the program begins (FROM) and ends (TO). Then check if the program is offered Daily or other and indicate (i.e. weekly, twice a week, monthly).

Disclaimer: Check the box only if there have been changes to the 5001, 5002 and/or 5003. If there are no changes a hard copy of the 5001 **must** still be sent to the County Youth Bureau with an original signature.

IMPLEMENTING AGENCY:
PROGRAM TITLE:

<p>Appropriate structure Limit setting; clear and consistent rules and expectations; firm enough control; continuity and predictability; clear boundaries, and age appropriate monitoring.</p>	
<p>Supportive relationship Warmth; closeness; connectedness; good communication; caring; support; guidance; secure attachment, and responsiveness.</p>	
<p>Opportunities to belong Opportunities for meaningful inclusion, regardless of one’s gender, ethnicity, sexual orientation, or disabilities; social inclusion, social engagement, and integration; opportunities for socio-cultural identity formation; and support for cultural and bicultural competence.</p>	
<p>Positive Social Norms Rules of behavior, expectations, injunctions, ways of doing things, values and morals, and obligations for service.</p>	

IMPLEMENTING AGENCY:

PROGRAM TITLE:

Support for Efficacy & Mattering

Youth-based; empowerment practices that support autonomy; making a real difference in one's community, and being taken seriously. Practices that include enabling, responsibility granting, and meaningful challenge. Practices that focus on improvement rather than on relative current performance levels.

Opportunities for Skill Building

Opportunities to learn physical, intellectual, psychological, emotional, and social skills; exposure to intentional learning experiences, opportunities to learn cultural literacy, media literacy, communication skills and good habits of mind; preparation for adult employment, and opportunities to develop social and cultural capital.

Integration of Family, School & Community Efforts

Concordance; coordination and synergy among family, school and community.

Monitoring & Evaluation Methods	(Please describe in 100 words or less)
<p>Monitoring is defined as a systematic review of a funded program based upon the requirements of a contract, rules, regulations, policies and/or State and Local laws. It identifies the degree to which a program or operation accomplishes the activities specified in a contract/application and how it complies with requirements. Describe your process to be used to monitor on a regular basis. Include who will be responsible, frequency, and documentation of monitoring activities.</p>	
<p><u>Evaluation Methods is the process to determine the value or amount of success in achieving a pre-determined program or operational goal. Evaluations can identify program strengths and weaknesses to improve the program. Evaluations can verify if the program is really running as originally planned. Describe the process to be used to evaluate the attainment of the objectives. Include what will be measured, who will conduct the evaluation, when it will be conducted, and how results will be used.</u></p>	

NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
INDIVIDUAL PROGRAM APPLICATION
Agency-Program Profile Instructions

Implementing Agency: Enter name of incorporated agency responsible for program.

Program Title: Enter the title of the program.

Site Information: Please enter up to three (3) of the most significant sites for this program. Must use the following types only: Agency, Athletic Fields, Campsite, Church, Community/Youth Center, Gym, Housing Project, Library, Office, Playground, Pool, Program, School/Classroom, or Shelter.

Projected Total Enrollment: With knowledge of the community to be served and/or history providing programming in the community, please use your best projections on the data required. **Please use whole numbers, not percentages.**

Projected Daily Attendance: Use your best projections on this data. If you checked other on the 5001 please provide the projected attendance on the day that the program operates (i.e. once a week, two days a week, once a month). **Please use whole numbers, not percentages.**

Program Summary (Maximum 100 words): Include in your summary; TARGET POPULATION-the characteristics of the youth to be served; GEOGRAPHIC AREA-physical boundaries (i.e. school district, village, town, city, county, etc.) in which the program will operate; and SERVICE METHODS-key services and activities to be used.

Gender of Program Participants, Ethnicity, and Ages: Enter basic demographic information on the programs target population. Please use whole numbers, not percentages. Please note residential programs may only serve young adults aged 21-24 if certified to do so and such services have been documented.

Disconnected Youth: This should be checked yes only if you can document that you are serving that particular population. Please refer to the website resources section on this document for further explanation on Disconnected Youth. **Please use whole numbers, not percentages.**

Features of Youth Development Settings: Please describe in 100 words (maximum) per feature how the program for which you are requesting funding addresses each of the Features of Positive Development Settings below.

The Features of Positive Development Settings are processes or “active ingredients” that community programs should use in designing programs to facilitate positive youth development. We stress that the implementation of these features need to vary across programs precisely because they have diverse clientele and different constraints, resources, and goals (source: Community Programs to Promote Youth Development, National Research Council, Institute of Medicine).

MONITORING AND EVALUATION

Monitoring: Describe the process to be used to monitor **the program** on a regular basis. Include who will be responsible, frequency, and how you document monitoring activities. (See Monitoring Manual for Youth Bureaus for more information on monitoring)

Evaluation Methods: Describe the process to be used to evaluate the attainment of the **program** objectives. Include what will be measured, who will conduct the evaluation, when it will be conducted, and how results will be used. Please refer to the website resources section on this document for further explanation on Program Evaluation.

**NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
INDIVIDUAL PROGRAM APPLICATION**
Program Summary-Program Components

IMPLEMENTING AGENCY:
PROGRAM TITLE:

LIFE AREA: <i>(Enter Code)</i>		GOAL: <i>(Enter</i>	
OBJECTIVE: <i>(Enter Code)</i>		SOS: <i>(Enter Code)</i>	Performance Measures: <i>(Enter Code)</i> How much: How well:

GENDER OF PROGRAM PARTICIPANTS: *(Enter number participants* **MALE** _____ **FEMALE** _____

ETHNICITY: <i>(Enter number of participants per ethnic group)</i>	WHITE _____	BLACK OR AFRICAN AMERICAN _____	HISPANIC OR LATINO _____
	AMERICAN INDIAN OR NATIVE HAWAIIAN OR OTHER _____	ASIAN TWO OR MORE _____	

AGES 0-4 _____ 5-9 _____ 10- _____ 15- _____ 18-20 _____ 21+ _____

IS TARGET POPULATION SERVING DISCONNECTED YOUTH. No Yes

IF "YES", Youth aging out of foster _____ Children of incarcerated _____

Youth in the juvenile justice system who re-enter the _____ Runaway and Homeless _____

IF APPLICABLE

OBJECTIVE: <i>(Enter Code)</i>		SOS: <i>(Enter Code)</i>		Performance Measures: <i>(Enter Code)</i> How much: How well:	
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GENDER OF PROGRAM PARTICIPANTS: *(Enter number participants per* **MA** _____ **FEMA** _____

ETHNICITY: <i>(Enter number of participants)</i>	WHITE _____	BLACK OR AFRICAN AMERICAN _____	HISPANIC OR LATINO _____
	AMERICAN INDIAN OR NATIVE HAWAIIAN OR OTHER PACIFIC _____	ASIAN TWO OR MORE _____	

AGE 0-4 _____ 5-9 _____ 10-14 _____ 15-17 _____ 18-20 _____ 21+ _____

IS TARGET POPULATION SERVING DISCONNECTED YOUTH. No Yes

IF Youth aging out of foster _____ Children of incarcerated _____

Youth in the juvenile justice system who re-enter the _____ Runaway and Homeless _____

NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
INDIVIDUAL PROGRAM APPLICATION
Program Summary-Program Components (OCFS 5003) Instructions

Implementing Agency: Enter name of incorporated agency responsible for program.

Program Title: Enter the title of the program.

Each program will select:

- Life areas
- Goals per Life Area
- Objectives per Goal
- Services, Opportunities and Supports (SOS)

Step 1: For the Program Component, identify the **Life Area** to be addressed and the appropriate code.

1 ES: ECONOMIC SECURITY

You would enter code **1ES**.

Step 2: Select the **GOAL** to be targeted and its code.

11 Goal: Youth will be prepared for their eventual economic self sufficiency.

You would enter code **11**.

Step 3: Select the objective to be achieved. Choices under this goal include:

111 Objective: Youth will have skills, attitudes and competencies to enter college, the work force or other meaningful activities.

112 Objective: Young adults who can work will have opportunities for employment.

113 Objective: Youth seeking summer jobs will have employment opportunities.

If you selected Objective **111** - Youth will have skills, attitudes and competencies to enter college, the work force or other meaningful activities

You would enter code **111**.

Step 4: Select from the following choices the Services Opportunities and Supports that your program offers.

Services, Opportunities, and Supports

0119	Employment Opportunities
0120	Work Readiness Skills
0121	Career Development Supports
0122	College Exploration Opportunities
0123	Life Skills Supports

If you selected Services, Opportunities and Supports 0121 Career Development Supports

You would enter code **0121**.

Step 5: Enter the Performance Measures to be achieved. Choices under this SOS, include:

Performance Measures

How Much

- **021B.1** # of youth enrolled in the program (unduplicated)

How Well

- **0121B.1** % of youth who completed the program
- **0121B.2** % of youth reporting satisfaction with the program

Better Off

- **0121C.1** #% of youth with increased understanding of career interests
- **0121C.2** #% of youth with defined career occupational objectives
- **0121C.3** #% of youth who can name one skill they learned in the program

Note: a selection from each question must be indicated.

Step 6: Enter the following data on your projected target population (in whole numbers not percentages) for those youth participating in –Career Development Supports):

Please use whole numbers, not percentages.

- Gender
- Ethnicity
- Ages
- And if serving Disconnected Youth identify the number (not percentages) in group (i.e. Youth aging out of foster care, Children of incarcerated parents, Youth in juvenile justice system who re-enter community, Runaway and Homeless Youth)

Step 7: (*IF APPLICABLE*): If your Program chooses to address more selections, you would follow the steps again.

Note: that no more than 2 SOS can be selected per program.

Special Notes:

If the program checked the box on the OCFS-5002, Direct Services will not be provided by this program, follow steps 1-4 for each life area selected.

Each Life area has its own set of Goal(s), Objectives and Services, Opportunities and Supports. Once you identify the Life Area your program is addressing you must use the Goal(s), Objectives and Services, Opportunities and Supports listed under it.

New York State
Office of Children and Family Services
QUALITY YOUTH DEVELOPMENT SYSTEM (QYDS)

**Program Summary-Program Components (OCFS 5003)
CODING DOCUMENT**

LIFE AREA - 1ES: ECONOMIC SECURITY

- 11 **Goal:** Youth will be prepared for their eventual economic self-sufficiency.
- 111 **Objective:** Youth will have skills, attitudes and competencies to enter college, the work force or other meaningful activities.
- 112 **Objective:** Young adults who can work will have opportunities for employment.
- 113 **Objective:** Youth seeking summer jobs will have employment opportunities.

Services, Opportunities, and Supports

0119. Employment Opportunities —A program which provides **paid** on-the-job training with opportunities that enable youth to master practical and/or technical skills required to maintain meaningful and gainful employment in the current job market. Programs may be short term, long term, internship or an apprenticeship which seek to address strategies for addressing youth employment and training needs.

Performance Measures

How Much

- **0119A.1** # of youth in the program (unduplicated)

How Well

- **0119B.1** % of employers retained from the previous year
- **0119B.2** % of staff with training and/or certification in employment services
- **0119B.3** % of teens that report being supported by staff

Better Off

- **0119C.1** #/% of youth remaining in the job after completing the work program
- **0119C.2** #/% of youth receiving a positive evaluation in the following areas: promptness, quality of work, attitude, attire
- **0119C.3** #/% of youth with improved work skills (based on commencement from NYS Education Dept).

LIFE AREA - 1ES: Economic Security

Services, Opportunities, and Supports

0120. Work Readiness Supports: A program which develops a youth's capacity to move toward employment. Includes but is not limited to assisting youth with creating resumes, job seeking, interviewing, understanding employer and workplace expectations, positive work habits, job shadowing/unpaid internships, and understanding behaviors, attitudes, and skills necessary to compete in the labor market.

Performance Measures

How Much

- **0120A.1** # of youth enrolled in the program (unduplicated)

How Well

- **0120B.1** #/% of staff with training and/or certification in teaching work readiness skills

Better Off

- **0120C.1** #/% of youth obtaining a job
- **0120C.2** #/% of youth with improved workplace readiness skills

Services, Opportunities, and Supports

0121. Career Development Supports: A program to assist youth in making occupational or career decisions which includes, but is not limited to, evaluation of youth's abilities and interests, provision of information career/occupational materials or career fairs, establishment of career goals, and planning practical development activities geared towards attaining youth's career and occupational goals.

Performance Measures

How Much

- **0121A.1** # of youth enrolled in the program (unduplicated)

How Well

- **0121B.1** % of youth who completed the program
- **0121B.2** % of youth reporting satisfaction with the program

Better Off

- **0121C.1** #/% of youth with increased understanding of career interests
- **0121C.2** #/% of youth with defined career occupational objectives
- **0121C.3** #/% of youth who can name one skill they learned in the program

LIFE AREA - 1ES: Economic Security

Services, Opportunities, and Supports

0122. College Exploration Opportunities: Program with activities and strategies for assisting youth in making informed decisions when selecting a college and/or technical school that connects youth to academic preparation and future aspirations. Activities and strategies include, but are not limited to, college/technical school identification, test strategy development, application assistance, essay support, and interview preparation.

Performance Measures

How Much

- **0122A.1** # of youth enrolled in the program (unduplicated)

How Well

- **0122B.1** #/% of youth reporting satisfaction with the program

Better Off

- **0122C.1** #/% of youth that have selected a college, technical school or career path
- **0122C.2** #/% of youth with increased skills in college interviewing and test taking

Services, Opportunities, and Supports

0123. Life Skills Supports: Programs which seek to enhance the skills of youth in areas of self-care, daily living, personal finance and budgeting, managing interpersonal relationships, information technology, and any other topics that develops the skill set of youth to reach independence.

Performance Measures

How Much

- **0123A.1** # of youth enrolled in the program (unduplicated)

How Well

- **0123B.1** #/% of youth utilizing a life skills assessment tool
- **0123B.2** #/% of youth attending all sessions of the program

Better Off

- **0123C.1** #/% of youth demonstrating an increase in life skills

LIFE AREA - 2PEH: PHYSICAL AND EMOTIONAL HEALTH

- 21 Goal:** Children and youth will have optimal physical and emotional health.
- 211 Objective:** Children and youth will be physically fit.
- 212 Objective:** Children and youth will be emotionally healthy.
- 213 Objective:** Children and youth will be free from health risk behaviors (e.g., smoking, drinking, substance abuse, unsafe sexual activity).
- 214 Objective:** Children and youth with service needs due to mental illness, developmental disabilities and/or substance abuse problems will have access to timely and appropriate services.

Services, Opportunities, and Supports

0231. Alcohol and Substance Abuse Prevention Services: School or community based programs that include events and strategies for aiding youth in making educated decisions concerning health risks. Programs might include alcohol/substance abuse prevention activities, smoking prevention/cessation workshops, or alcohol/substance abuse treatment.

Performance Measures

How Much

- **0231A.1** # of youth participating (unduplicated)

How Well

- **0231B.1** % of programs or activities assessed using a research-based quality assessment tool (such as NYSPQA; NYSAN; YPQA) and achieving an above average score (such as PQA score of 3.0 or higher)
- **0231B.2** % of youth completing the program

Better Off

- **0231C.1** #/% of youth free of alcohol or substance abuse for 6 months (for programs having a duration of longer than 1 session)
- **0231C.2** #/% of youth without repeated Juvenile Justice contact for 6 months after the program (for youth with current involvement with the Juvenile Justice system (PINS, Etc.)
- **0231C.3** #/% of youth with reduced numbers of school disciplinary incidents for substance use (for youth with school disciplinary incidents for substance abuse)

LIFE AREA - 2PEH: Physical and Emotional Health

Services, Opportunities, and Supports

0232. Year Round/Seasonal Activities: Programs that enable youth to be active and encourage physical fitness or activities which promote creative and pro-social group participation. They may be operated year round or during the summer months. Programs of this type might include yoga, Zumba, summer swim programs, or basketball, soccer, baseball camps, or organized group games as well as cultural, science, or pro-social enrichment activities for youth and their families (e.g., field trips).

Performance Measures

How Much

- **0232A.1** # of youth participating (unduplicated)

How Well

- **0232B.1** % Staff, volunteer or adult to youth ratio
- **0232B.2** % of programs with a code of conduct and/or have behavioral contracts signed for all youth
- **0232B.3** % of programs assessed using a research-based quality assessment tool (such as NYSPQA; NYSAN; YPQA).

Better Off

- **0232C.1** #/% reporting they have improved their ability to socialize/interact with peers/family/other members of the community
- **0232C.2** #/% of youth who attain/or improve on a skill and/or report an increase in knowledge/awareness
- **0232C.3** #/% of youth who engage in 30 minutes of physical activity per program and youth report they feel better physically.

LIFE AREA - 2PEH: Physical and Emotional Health

Services, Opportunities, and Supports

0233. Healthy Lifestyles: Programs that promote a healthy lifestyle leading to fitness, energy, and a reduced risk for disease. Programs may include those relating to nutrition and obesity prevention such as a community gardens, or programs regarding health education, sex education, and STD transmission prevention.

Performance Measures

How Much

- **0233A.1** # of youth participating (unduplicated)

How Well

- **0233B.1** Staff turnover rate
- **0233B.2** % of youth participating in program 3 times per week or more
- **0233B.3** % of programs or activities assessed using a research-based quality assessment tool (such as NYSPQA; NYSAN; YPQA) and achieving an above average score (such as PQA score of 3.0 or higher)

Better Off

- **0233C.1** #/% of youth who increased physical fitness and activity
- **0233C.2** #/% of youth who increased knowledge of reproductive health
- **0233C.3** #/% of youth with increased knowledge of nutrition and exercise

Services, Opportunities, and Supports

0234. Mental Health Supports: Programs that provide individual counseling and group drop-in sessions and scheduled opportunities to support and reinforce emotional and mental health. Programs typically range from 1 on 1 counseling to treatment and support groups which assist the youth and the family, such as: resiliency building, crisis intervention, and self-esteem workshops, or case management

Performance Measures

How Much

- **0234A.1** # of youth participating (unduplicated)

How Well

- **0234B.1** % of staff trained in Trauma Informed Care
- **0234B.2** % of youth and families satisfied with the program

Better Off

- **0234C.1** #/% of youth who successfully attain one or more treatment goals
- **0234C.2** #/% of youth who report an improvement in emotional and mental health

LIFE AREA - 2PEH: Physical and Emotional Health

Services, Opportunities, and Supports

0235. Disability Supports: Programs which assist parents and children to meaningfully access services which promote independent or supported living in the community. Programs in this category may provide direct advocacy and/or information and support to allow children and parents to navigate available services including direct services and support groups.

Performance Measures

How Much

- **0235A.1** # of youth participating (unduplicated)

How Well

- **0235B.1** % of parents highly satisfied
- **0235B.2** % of programs or activities assessed using a research-based quality assessment tool (such as NYSPQA; NYSAN; YPQA) and achieving an above average score (such as PQA score of 3.0 or higher)
- **0235B.3** % of staff trained in Youth Development and Developmental Disabilities

Better Off

- **0235C.1** #/% of youth with improved physical health
- **0235C.2** #/% of youth with increased social skills
- **0235C.3** #/% of youth experiencing full inclusion in community programs

LIFE AREA - 3ED: EDUCATION

31 Goal: Children will leave school prepared to live, learn and work in a community as contributing members of society.

311 Objective: Students will meet or exceed high standards for academic performance and demonstrate knowledge and skills required for lifelong learning and self-sufficiency in a dynamic world.

312 Objective: Students will stay in school until successful completion.

Services, Opportunities, and Supports

0311. Academic Support Services: Programs or services which provide resources to support a youth's optimal academic performance. These may include but are not limited to assisting youth with subject areas, science, technology, engineering, and Mathematics (STEM), homework help, basic literacy, and other academic supports.

Performance Measures

How Much

- **0311A.1** # of youth participating (unduplicated)

How Well

- **0311B.1** # of resources/supports available for each subject area
- **0311B.2** % of programs or activities assessed using a research-based quality assessment tool (such as NYSPQA; NYSAN; YPQA) and achieving an above average score (such as PQA score of 3.0 or higher)

Better Off

- **0311C.1** #/% of youth with improved academic performance
- **0311C.2** #/% of youth with improved skills or knowledge in the subject area listed

LIFE AREA - 3ED: Education

Services, Opportunities, and Supports

0312. Dropout Prevention Services: A program or service designed to support the retention of all students, and the prevention of dropouts from the most at-risk youth. These may include but are not limited to learning disabilities, bilingual education, alternative education, and other programs or services geared toward retention.

Performance Measures

How Much

- **0312A.1** # of youth participating (unduplicated)

How Well

- **0312B.1** % of staff with positive youth development training and/or with a higher education
- **0312B.2** % of programs or activities assessed using a research-based quality assessment tool (such as NYSPQA; NYSAN; YPQA) and achieving an above average score (such as PQA score of 3.0 or higher)

Better Off

- **0312C.1** #/% of youth remaining in school
- **0312C.2** #/% of youth with formal graduation plans that reflect projected completion of academic requirements
- **0312C.3** #/% of youth with improved academic performance
- **0312.C.4** #/% of youth with improved school attendance

LIFE AREA - 3ED: Education

Services, Opportunities, and Supports

0313. TASC (formerly GED) Services: A program or service that provides preparation for the Test Assessing Secondary Completion (TASC) that measures proficiency in core content areas such as science, mathematics, history, reading, and writing.

Performance Measures

How Much

- **0313A.1** # of youth participating (unduplicated)

How Well

- **0313B.1** % of youth completing the program
- **0313B.2** % of youth satisfied with the program
- **0313B.2** % of programs or activities assessed using a research-based quality assessment tool (such as NYSPQA; NYSAN; YPQA) and achieving an above average score (such as PQA score of 3.0 or higher)

Better Off

- **0313C.1** #/% of youth who pass the TASC or return to school
- **0313C.2** #/% of youth passing the TASC predictor test

LIFE AREA 4CVC: CITIZENSHIP/CIVIC ENGAGEMENT

41 Goal: Children and youth will demonstrate good citizenship as law-abiding, contributing members of their families, schools and communities.

411 Objective: Children and youth will assume personal responsibility for their behavior.

412 Objective: Youth will demonstrate ethical behavior and civic values.

413 Objective: Children and youth will understand and respect people who are different from themselves.

414 Objective: Children and youth will participate in family and community activities.

415 Objective: Children and youth will have positive peer interactions.

416 Objective: Children and youth will make constructive use of leisure time.

417 Objective: Youth will delay becoming parents until adulthood.

418 Objective: Children and youth will refrain from violence and other illegal behaviors.

Services, Opportunities, and Supports

0420. Youth Leadership/Empowerment Opportunities: Programs that provide character education, leadership skills development and/or community/civic activities.

Performance Measures

How Much

- **0420A.1** # of youth participating (unduplicated)
- **0420A.2** # of community projects completed

How Well

- **0420B.1** % of participants returning to program the following year (if applicable)
- **0420B.2** % of programs or activities assessed using a research-based quality assessment tool (such as NYSPQA; NYSAN; YPQA) and achieving an above average score (such as PQA score of 3.0 or higher)

Better Off

- **0420C.1** #/% of youth who continue on to an additional community engagement project beyond the program
- **0420C.2** #/% of youth with increased leadership skills (as measured on a pre/post test of leadership skills) or skills empowering them in community engagement.

LIFE AREA 4CVC: Citizenship/ Civic Engagement

Services, Opportunities, and Supports

0421. Juvenile Delinquency Prevention Services: Such programs provide youth court, juvenile justice diversion services, juvenile aid bureau/officer, gang & violence prevention/intervention.

Performance Measures

How Much

- **0421A.1** # of youth participating (unduplicated)

How Well

- **0421B.1** % of youth completing mandated requirements
- **0421B.2** % of youth participating in non-mandated requirements
- **0421B.3** % of programs or activities assessed using a research-based quality assessment tool (such as NYSPQA; NYSAN; YPQA) and achieving an above average score (such as PQA score of 3.0 or higher)

Better Off

- **0421C.1** #/% of youth who do not return to the Juvenile Justice System within 1 year
- **0421C.2** #/% of youth with reduced high risk behaviors
- **0421C.3** #/% of youth reporting increased knowledge of better choices (pertaining to laws).

Services, Opportunities, and Supports

0422. Teen Pregnancy Prevention Supports: Such programs provide information regarding supportive relationships, adolescent sexuality education, and pregnancy prevention.

Performance Measures

How Much

- **0422A.1** # of youth participating (unduplicated)

How Well

- **0422B.1** % of staff trained in positive youth development and reproductive health
- **0422B.2** % of youth completing the program

LIFE AREA 4CVC: Citizenship/ Civic Engagement

Better Off

- **0422C.1** #/% of program participants who avoid unplanned pregnancies
- **0422C.2** #/% of program participants with increased knowledge of reproductive health and/or implementing safe practices
- **0422C.3** #/% of program participants with reduced high risk behaviors

Services, Opportunities, and Supports

0423. Cultural Competency/Race Equity Supports: Such programs provide cultural enrichment/awareness including but not limited to workshops on classism, sexism, racism and sexual orientation.

Performance Measures

How Much

- **0423A.1** # of youth participating (unduplicated)

How Well

- **0423B.1** % of youth completing programs
- **0423B.2** % of staff trained in and who have credentials in providing cultural competency and race equity training topics

Better Off

- **0423C.1** #/% of program participants with increased knowledge of cultural enrichment and awareness

Services, Opportunities, and Supports

0424. Safe Place Out of School Time Services: Such programs or services that promote constructive use of leisure time, access to a variety of enrichment activities and foster success in school and life. These programs can broaden a child's or youth's competencies in various life areas such as dance, cooking, literacy, technology or any program that may address deficits and/or build various skill sets.

Performance Measures

How Much

- **0424A.1** # of youth participating (unduplicated)

How Well

- **0424B.1** % of staff with positive youth development training

- **0424B.2** % of programs or activities assessed using a research-based quality assessment tool (such as NYSPQA; NYSAN; YPQA) and achieving an above average score (such as PQA score of 3.0 or higher)
- **0424B.3** % of youth attending the OST program at least 50% of scheduled days

Better Off

- **0424C.1** #/% of youth with improved positive youth development outcomes (i.e. academic, health, social/emotional skills and/or community engagement)

LIFE AREA 5FAM: FAMILY

51 Goal: Families will provide children with safe, stable and nurturing environments

511 Objective: Parent/caregivers will provide children with a stable family relationship.

512 Objective: Parent/caregivers will possess and practice adequate child rearing skills.

513 Objective: Parent/caregivers will be positively involved in their children's learning.

514 Objective: Parent/caregivers will receive/gain the knowledge and ability to access support services for their children.

515 Objective: Parent/caregivers will provide their children with households free from physical and emotional abuse.

516 Objective: Parent/caregivers will provide their children with households free from alcohol and other substance abuse.

Services, Opportunities, and Supports

0520. Parenting Skills: Programs which help parents develop skills and knowledge necessary for their children's well-being. Programs may include parenting skills classes, stress management, and child and adolescent development.

Performance Measures

How Much

- **0520A.1** # of parents served

How Well

- **0520B.1** % of staff with relevant training/credentials
- **0520B.2** % of families completing the program

Better Off

- **0520C.1** #/% of parents who report improved parenting skills
- **0520C.2** #/% of families who safely transition from supervised to unsupervised visits

LIFE AREA 5FAM: Family

Services, Opportunities, and Supports

0521. Family Supports: Programs which focus on an approach to strengthening families and communities so they can foster the optimal development of children, youth, and adult family members. Programs might address family communication, resiliency, and family or domestic violence.

Performance Measures

How Much

- **0521A.1** # of families being supported (unduplicated)

How Well

- **0521B.1** % of participants reporting satisfaction with the support provided
- **0521B.2** % of families participating on a regular basis

Better Off

- **0521C.1** #/% of families developing informal supports/community networks
- **0521C.2** #/% of families practicing positive child-rearing skills
- **0521C.3** #/% of families providing children households free from physical and emotional abuse

Services, Opportunities, and Supports

0522. Abuse and Neglect Prevention Supports: Abuse and Neglect Prevention programs educate families on the different types of abuse and provide support services to prevent the abuse and/or neglect. Programs of this type would include intervention and/or treatment services or those programs that support a family in preventing abuse and/or neglect of a child.

Performance Measures

How Much

- **0522A.1** # of families served (unduplicated)

How Well

- **0522B.1** % of staff with relevant training
- **0522B.2** % of families highly satisfied with support services provided
- **0522B.3** % of families with monthly face-to-face visits in home

Better Off

- **0522C.1** #/% of households free from abuse and neglect
- **0522C.2** #/% of children without repeat maltreatment (recidivism; where applicable)

LIFE AREA 5FAM: Family

Services, Opportunities, and Supports

0523. Permanency Services: Programs which seek to expedite the permanency of a child through reunification with family, adoption, or an alternate planned living arrangement.

Performance Measures

How Much

- **0523A.1** # of youth served (unduplicated)

How Well

- **0523B.1** % of staff with relevant training
- **0523B.2** % of youth with 2 or less placements within one year
- **0523B.3** % of youth reporting satisfaction with the placement

Better Off

- **0523C.1** #/% of children achieving permanent placements (re-unification, adoption, legal guardianship, independence)
- **0523C.2** #/% of youth successfully completing goals within their permanency plan
- **0523C.3** #/% of youth without repeat maltreatment

Services, Opportunities, and Supports

0524. Anger Management/Conflict Resolution Supports: Programs which teach youth to identify anger and potential conflicts and give them the skills needed to develop appropriate coping mechanisms. This type of program often includes problem solving strategies and anger management skills, as well as resolution techniques.

Performance Measures

How Much

- **0524A.1** # of youth served (unduplicated)

How Well

- **0524B.1** % of staff/volunteers trained and who have credentials in anger management group facilitation/conflict resolution
- **0524B.2** % of youth participating on a regular basis
- **0524B.3** % of youth completing the program

Better Off

- **0524C.1** #/% of youth demonstrating an increased knowledge of the relevant topic (anger management or conflict resolution)
- **0524C.2** #/% practicing the skills and techniques taught
- **0524C.3** #/% of youth with decreased behavioral incidents

LIFE AREA 6COM: COMMUNITY

61 Goal: New York State communities will provide children, youth and families with healthy, safe and thriving environments.

611 Objective: Adequate housing will be available.

612 Objective: Adequate transportation will be available.

62 Goal: New York State communities will provide children, youth and their families with opportunities to help them meet their needs for physical, social, moral and emotional growth.

621 Objective: Communities will make available and accessible formal and informal services (e.g., child care, parent training, recreation, youth services, libraries, museums, parks).

622 Objective: Adults in the community will provide youth with good role models and opportunities for positive adult interactions.

623 Objective: Communities will provide opportunities for youth to make positive contributions to community life and to practice skill development.

Services, Opportunities, and Supports

0627 Youth Bureau Administration: Includes providing funding for services/support, developing or coordinating program/models, planning and program development, RAP submission and fiscal monitoring, program monitoring and evaluations

Performance Measures

How Much

- **0627A.1** # of funded programs
- **0627A.2** # of on-site funded program monitoring visits

How Well

- **0627B.1** RAP submitted within 90 days of final allocations released
- **0627B.2** % of total allocation remaining at the end of the year
- **0627B.3** % of funded programs assessed using a research-based quality assessment tool (such as NYSPQA; NYSAN; YPQA)

Better Off

- **0627C.1** #/% of funded programs that have shown improvement in at least one "how well" and/or "better off" measure over the past year. (Not able to report the first year)

- **LIFE AREA 6COM: Community**

Services, Opportunities, and Supports

0628 Mentoring Supports: Programs which link youth to positive role models that are sustained over a period of time (generally more than 6 months). Mentoring can occur through traditional mentoring (one adult to one young person); group mentoring (one adult to as many as four young people), and team mentoring (several adults working with small groups of young people, in which the adult to youth ratio is not greater than 1:4).

Performance Measures

How Much

- **0628A.1** # of youth participating in the mentoring program (unduplicated)
- **0628A.2** # of mentors

How Well

- **0628B.1** % of mentors trained in positive youth development
- **0628B.2** % of mentor/mentee matches lasting longer than 6 months
- **0628B.3** % of youth expressing satisfaction with the program
- **0628B.4** average length of time youth wait to be matched with a mentor (in months)

Better Off

- **0628C.1** #/% of youth showing improved confidence and caring

Services, Opportunities, and Supports

0629 Runaway and Homeless Youth Shelter (NYS Certified Programs only): A residential facility operated for a maximum of 20 youth, all of whom are either under the age of 18 years or between the ages of 16-21 years.

Performance Measures

How Much

- **0629A.1** # of youth served (unduplicated)

How Well

- **0629B.1** % of staff who met training requirements set by RHY regulations
- **0629B.2** % of youth expressing satisfaction with the program

Better Off

- **0629C.1** #/% of youth discharged to stable housing
- **0629C.2** #/% of youth reunited with family
- **0629C.3** #/% of youth obtaining other suitable/safe housing

LIFE AREA 6COM: Community

Services, Opportunities, and Supports

0630 Runaway and Homeless Interim Family (NYS Certified Programs only): Private dwelling providing temporary shelter to a maximum of 2 runaway and homeless youth under the age of 21.

Performance Measures

How Much

- **0630A.1** # of youth who entered the program
- **0630A.2** # of certified interim family homes
- **0630A.3** # of host home trainings offered in reporting period
- **0630A.4** # of youth assisted by placement, case management, life skills training provided by the program

How Well

- **0630B.1** % of interim families completing mandated trainings
- **0630B.2** % of youth expressing satisfaction with the program

Better Off

- **0630C.1** #/% of youth discharged to stable housing
- **0630C.2** #/% of youth reunited with family
- **0630C.3** #/% of youth obtaining other suitable/safe housing

Services, Opportunities, and Supports

0631 Transitional Independent Living Support Services (NYS Certified Programs only): Either a Group Residence (facility for up to 20 youth that encourages the development and practice of Independent Living Skills) or a Supported Residence (facility for up to 5 youth of same gender which provides an environment that approximates actual independent living).

Performance Measures

How Much

- **0631A.1** # of youth enrolled in TILP (unduplicated)
- **0631A.2** # of youth receiving training/instructions to improve their self-sufficiency

How Well

- **0631B.1** % of staff trained in positive youth development
- **0631B.2** % of youth completing an approved life skills assessment

LIFE AREA 6COM: Community

Better Off

- **0631C.1** #/% of youth with improved life skills
- **0631C.2** #/% of youth successfully completing program and discharged to live independently
- **0631C.3** #/% of youth connected with employment and/or further education

Services, Opportunities, and Supports

0632 Runaway and Homeless Youth Coordination: Overall RHYA coordination including answering inquiries at any time concerning transportation, shelter and other services to runaway and homeless youth

Performance Measures

How Much

- **0632A.1** # of inquiries received by coordinators
- **0632A.2** # of applications for operating certificates

How Well

- **0632B.1** % programs monitored

Better Off

- **0632C.1** #/% of youth who were able to access services after making inquiries
- **0632C.2** Is a 24 hour hotline in place

Services, Opportunities, and Supports

0633 Runaway and Homeless Youth Prevention and Support Services: These services include case management, information dissemination, referral services, counseling, street outreach (such as flyer distribution, events etc.), hotlines, and mediation.

Performance Measures

How Much

- **0633A.1** # of youth receiving services (unduplicated)
- **0633A.2** # of street outreach activities
- **0633A.3** # of hotline calls received

How Well

- **0633B.1** % of staff trained in RHY regulations
- **0633B.2** % of staff trained in positive youth development
- **0633B.3** % of youth expressing satisfaction with services

LIFE AREA 6COM: Community

Better Off

- **0633C.1** #/% of youth who access RHY services after contacting the hotline
- **0633C.2** #/% of youth successfully completing case plan without being housed in RHY facility
- **0633C.3** #/% of youth that were connected with school, vocational school, college or the military

Services, Opportunities, and Supports

0634 Community Service/Youth Activism Opportunities: Programs which link youth to volunteer projects and with opportunities to be civically engaged.

Performance Measures

How Much

- **0634A.1** # of youth participating (unduplicated)

How Well

- **0634B.1** # of community projects/opportunities available to youth
- **0634.B.2** % of staff trained in positive youth development

Better Off

- **0634C.1** #/% of volunteer hours completed in the community
- **0634C.2** #/% of projects that met community project expectations

PROGRAM BUDGET

QYDS ID:

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FISCAL YEAR:

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AGENCY/MUNICIPALITY: _____

PROGRAM TITLE: _____

FUND TYPE: _____

FISCAL CONTACT INFORMATION:
 Include Name, Phone Number, E-mail address:

PERSONAL SERVICES:

POSITION TITLE	RATE OF PAY	BASIS (H, W, BW, SM)	TOTAL OCFS PROGRAM AMOUNT (1)	TOTAL OCFS FUNDS REQUESTED FOR THIS PROGRAM
	\$		\$	
	\$		\$	
	\$		\$	
	\$		\$	
	\$		\$	
	\$		\$	
	\$		\$	
	\$		\$	
TOTAL SALARIES AND WAGES			\$	\$
TOTAL FRINGE BENEFITS			\$	\$
TOTAL PERSONAL SERVICES (1)			\$	\$

CONTRACTED SERVICES AND STIPENDS

TYPE OF SERVICE OR CONSULTANT TITLE	RATE OF PAY	BASE (S,M,HR)	TOTAL OCFS PROGRAM AMOUNT (1)	TOTAL OCFS FUNDS REQUESTED FOR THIS PROGRAM
	\$		\$	
	\$		\$	
	\$		\$	
TOTAL CONTRACTED SERVICES (2)			\$	\$

TOTAL MAINTENANCE & OPERATION (3)

\$	\$
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LIST EQUIPMENT TO BE PURCHASED OR RENTED:
 (UNIT COST OVER \$500 AND LIFE EXPECTANCY OF OVER TWO YEARS)

FACILITY REPAIRS

PROGRAM SITE ADDRESS		
	\$	
	\$	
TOTAL FACILITY REPAIRS (4)	\$	

TOTAL OCFS PROGRAM AMOUNT

\$	
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+

TOTAL OCFS FUNDS REQUESTED	\$
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LIST OF OTHER FUNDING SOURCES	\$	REIMBURSEABLE TOTAL
	\$	MUNICIPAL FUNDING
	\$	OTHER SOURCES

* USE AN ASTERISK NEXT TO THE FIGURES LISTED TO IDENTIFY THOSE ITEMS FOR WHICH OCFS REIMBURSEMENT IS NOT BEING REQUESTED.

USE (IK) TO IDENTIFY ONLY IN KIND SERVICES, EQUIPMENT, ETC DONATED TO PROGRAM, WHERE ALLOWED.

PROGRAM BUDGET INSTRUCTIONS

REFER TO FISCAL POLICIES AND PROCEDURES MANUAL FOR RESTRICTIONS

QYDS ID – NUMBER ASSIGNED BY SYSTEM

FISCAL YEAR-INDICATE YEAR FOR WHICH FUNDS ARE BEING REQUESTED

AGENCY/MUNICIPALITY-COUNTY, CITY, VILLAGE, AN INDIAN RESERVATION OR SCHOOL DISTRICT (IF APPROVED) THAT IS APPLYING FOR STATE AID

PROGRAM TITLE-NAME OF PROGRAM RECEIVING FUNDING

FISCAL CONTACT INFORMATION-PERSONS TO CONTACT FOR QUESTIONS ON BUDGETING-CLAIMING AND VOUCHERING FOR THIS PROGRAM

PERSONAL SERVICES

POSITION TITLE	RATE OF PAY	BASIS (H, W, BW, SM)	TOTAL OCFS PROGRAM AMOUNT*
1	2	3	4

TOTAL FUNDS REQUESTED
FOR THIS PROGRAM

- LIST THE TITLE OF THE POSITION AS IT WILL BE CLAIMED
- ENTER THE RATE OF PAYMENT AS IT IS ON THE PAYROLL, E.G. \$100, \$500, \$5. (enter the highest rate for each title)
- INDICATE THE SALARY BASIS AS IT IS ACTUALLY PAID, e.g. Hourly (H), Weekly (W), Biweekly (BW), Semimonthly(SM)
- ENTER THE GROSS AMOUNT OF THIS PAYROLL LINE. Use an asterisk if OCFS reimbursement is not being requested.
- ENTER THE TOTAL OF THIS COLUMN.
- ENTER THE TOTAL AMOUNT FOR WHICH OCFS REIMBURSEMENT IS BEING REQUESTED. YDDP/RHYA – DO NOT USE

TOTAL SALARIES AND WAGES

5	6
7	8

TOTAL FRINGE BENEFITS

- ENTER THE TOTAL OF FRINGE BENEFITS BUDGETED FOR THIS PROGRAM. YDDP – CONTRACT AGENCIES ONLY
- ENTER THE AMOUNT FOR WHICH OCFS REIMBURSEMENT IS BEING REQUESTED. MOST PROGRAMS ARE LIMITED TO 25%. YDDP/RHYA – DO NOT USE

CONTRACTED SERVICES AND STIPENDS

TYPE OF SERVICE OR CONSULTANT TITLE	RATE	PAYMENT BASIS	TOTAL PROGRAM AMOUNT*
9	10	11	12

- ENTER TYPE OR TITLE OF SERVICES, e.g. Accounting Firm, Speaker.
- INDICATE RATE OF PAY
- INDICATE PAYMENT BASIS e.g. Session (S), Monthly (M)
- ENTER THE TOTAL COST FOR EACH LINE

TOTAL CONTRACTED SERVICES (2)

13	14
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- ENTER THE TOTAL OF THIS COLUMN
- ENTER THE AMOUNT FOR WHICH OCFS REIMBURSEMENT IS BEING REQUESTED. YDDP/RHYA – DO NOT USE

TOTAL MAINTENANCE & OPERATION (3)

15	16
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- ENTER THE AMOUNT BUDGETED IN TOTAL FOR THIS PROGRAM.
- ENTER THE AMOUNT FOR WHICH OCFS REIMBURSEMENT IS BEING REQUESTED. YDDP/RHYA – DO NOT USE

LIST IN THE SPACE PROVIDED, EQUIPMENT PURCHASES AND RENTALS PLANNED FOR PROGRAM YEAR

FACILITY REPAIRS

PROGRAM SITE	17	18
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- LIST EACH PROGRAM ADDRESS FOR WHICH FACILITY REPAIRS ARE BEING PLANNED
- ENTER AMOUNT FOR EACH PROGRAM SITE. YDDP LIMIT - \$500 PER SITE

TOTAL FACILITY REPAIRS (4)

19	20
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- ENTER THE TOTAL OF THIS COLUMN
- ENTER THE AMOUNT FOR WHICH REIMBURSEMENT IS BEING REQUESTED. YDDP/RHYA – DO NOT USE

TOTAL OCFS PROGRAM AMOUNT
TOTAL OCFS FUNDS REQUESTED

21

LIST OTHER FUNDING SOURCES	22	REIMBURSEABLE TOTAL
	23	MUNICIPAL FUNDING
	24	OTHER SOURCES

- THIS AMOUNT SHOULD AGREE TO THE AMOUNT BEING REQUESTED FOR THIS PROGRAM.
- THIS IS THE TOTAL OF BOX 21 LESS ASTERISKED ITEMS
- ENTER TOTAL AMOUNT BEING PROVIDED TOWARDS THIS PROGRAM BY MUNICIPALITY
- ENTER TOTAL AMOUNT BEING PROVIDED TOWARDS THIS PROGRAM BY OTHER SOURCES

APPENDIX A

The parties to the attached contract, license, lease, amendment or other agreement of any kind (hereinafter "the contract" or "this contract") agree to be bound by the following clauses which are hereby made a part of the contract. The word "Contractor" herein refers to any party to the contract, other than the County of Livingston (herein after "County").

- I. **NON-ASSIGNMENT CLAUSE.** In accordance with Section 109 of the **General Municipal Law**, this contract may not be assigned by the contractor or its right, title or interest there in assigned, transferred, conveyed, sublet or otherwise disposed of without the previous consent, in writing, of the County and any attempts to assign the contract without the County's written consent are null and void.
- II. **WORKER'S COMPENSATION BENEFITS.** In accordance with Section 108 of the **General Municipal Law**, this contract shall be void and of no force and effect unless the Contractor shall provide and maintain coverage during the life of this contract for the benefit of such employees as are required to be covered by the provisions of the **Workers' Compensation Law**.
- III. **NON-DISCRIMINATION REQUIREMENTS.** In accordance with Article 15 of the **Executive Law** (also known as the **Human Rights Law**) and all other State and Federal statutory and constitutional non-discrimination provisions, the Contractor will not discriminate against any employee or applicant for employment because of age, creed, race, color, sex, sexual orientation, national origin, marital or familial status, disability, military status, domestic violence victim status, criminal or arrest record, or predisposing genetic characteristics. Furthermore, in accordance with Section 220-e of the **Labor Law**, if this is a contract for the construction, alteration or repair of any public building or public work or for the manufacture, sale or distribution of materials, equipment or supplies, and to the extent that this contract shall be performed within the State of New York, Contractor agrees that neither it nor its subcontractors shall, by reason of race, creed, color, disability, sex or national origin: (a) discriminate in hiring against any New York State citizen who is qualified and available to perform the work; or (b) discriminate against or intimidate any employee hired for the performance of work under this contract. If this is a building service contract as defined in Section 230 of the **Labor Law**, then, in accordance with Section 239 thereof, Contractor agrees that neither it nor its subcontractors shall, by reason of race, creed, color, national origin, age, sex or disability: (a) discriminate in hiring against any New York State citizen who is qualified and available to perform the work; or (b) discriminate against or intimidate any employee hired for the performance of work under this contract. Contractor is subject to fines of \$50.00 per person per day for any violation of Section 220-e or Section 239 as well as possible termination of this contract and forfeiture of all moneys due hereunder for a second or subsequent violation.
- IV. **WAGE AND HOURS PROVISIONS.** If this is a public work contract covered by Article 8 of the **Labor Law** or a building service contract covered by Article 9 thereof, neither Contractor's employees nor the employees of its subcontractors may be required or permitted to work more than the number of hours or days stated in said statute, except as otherwise provided in the Labor Law and as set forth in prevailing wage and supplement schedules issued by the State Labor Department. Furthermore, Contractor and its subcontractors must pay at least the prevailing wage rate and pay or provide the prevailing supplements, including the premium rates for overtime pay, as determined by the State Labor Department in accordance with the Labor Law.
- V. **NON-COLLUSIVE BIDDING REQUIREMENT.** In accordance with Section 103-d of the **General Municipal Law**, if this contract was awarded based upon the submission of bids, Contractor warrants, under penalty of perjury, that its bid was arrived at independently and without collusion aimed at restricting competition. Contractor further warrants that, at the time Contractor submitted its bid, an authorized and responsible person executed and delivered to the County a non-collusive bidding certification on Contractor's behalf.
- VI. **SET-OFF RIGHTS.** The County shall have all of its common law and statutory rights of set-off. These rights shall include, but not be limited to, the County's option to withhold for the purposes of set-off any moneys due to the Contractor under this contract up to any amounts due and owing to the County with regard to this contract.
- VII. **RECORD-KEEPING REQUIREMENT.** The Contractor shall establish and maintain complete and accurate books, records, documents, accounts and other evidence directly pertinent to performance

under this contract for a period of six (6) years following final payment or the termination of this contract, whichever is later, and any extensions thereto. The County Treasurer or County Administrator or any other person or entity authorized to conduct an examination, as well as the agency or agencies involved in this contract, shall have access to such books, records, documents, accounts and other evidential material during the contract term, extensions thereof and said six (6) year period thereafter for the purposes of inspection, auditing and copying. "Termination of this contract", as used in this clause 10, shall mean the later of completion of the work of the contract or the end date of the term stated in the contract.

- VIII. **MEDICAID/MEDICARE COMPLIANCE.** If this contract involves the provision of services and/or materials, any portion of the cost of which will be billed to the Federal or New York State Medicare or Medicaid health care programs, the Contractor certifies that the Contractor, and all employees, directors, officers and subcontractors of the Contractor, are not "excluded individuals or entities" under Federal and/or New York State Medicare or Medicaid statutes, rules and regulations. The Contractor agrees to screen all employees, directors, officers and subcontractors on a monthly basis at the New York State Office of Medicaid Inspector General website, and any other website required by Federal and/or New York State Medicare or Medicaid statutes, rules and regulations, to determine if any of them are on or have been added to the exclusion list. The Contractor shall promptly notify the County if any employee, director, officer or subcontractor is on or has been added to the exclusion list. The County reserves the right to immediately cancel this contract, at no penalty to the County, if any employee, director, officer or subcontractor is on or has been added to the exclusion list. Furthermore, the Contractor agrees to indemnify the County for any damages or loss incurred by the County based upon the Contractor's failure to comply with these conditions or based upon any false certification under this section.
- IX. **CONFLICTING TERMS.** In the event of a conflict between the terms of the contract (including any and all attachments thereto and amendments thereof) and the terms of this Appendix A, the terms of this Appendix A shall control.
- X. **GOVERNING LAW.** This contract shall be governed by the laws of the State of New York except where the Federal supremacy clause requires otherwise.
- XI. **SEXUAL HARASSMENT COMPLIANCE CERTIFICATION.** The Contractor hereby certifies that its organization has implemented a written policy addressing sexual harassment prevention in the workplace and provides annual sexual harassment prevention training to all of its employees. Said policy and training, at a minimum, meets the requirements of Section 201-g of the New York State Labor Law. By signing this Appendix, the Contractor certifies its organization is in full compliance with the mandates of the New York State Sexual Harassment Compliance Law.
- XII. **NO ARBITRATION AND SERVICE OF PROCESS.** Disputes involving this contract, including the breach or alleged breach thereof, may not be submitted to binding arbitration (except where statutorily authorized) but must, instead, be heard in a court of competent jurisdiction of the State of New York. All actions shall be venued in Livingston County. Contractor hereby consents to service of process upon it by registered or certified mail, return receipt requested.
- XIII. **BUDGETED FUNDS.** This contract is executory only to the extent of funds available and the County shall incur no liability beyond the funds appropriated therefore.
- XIV. **APPROVAL OF BOARD OF SUPERVISORS.** This contract is subject to and conditioned upon approval by the Livingston County Board of Supervisors.
- XV. **INCORPORATION.** The main contract contains a paragraph incorporating the terms of this appendix by reference and the parties herein have further signed and dated this appendix.

Livingston County

Contractor
(Signature of Authorized Official Required)

As of 10/21/2019

APPENDIX B

The parties to the attached contract, license, lease, amendment or other agreement of any kind (hereinafter "the contract" or "this contract") agree to be bound by the following clauses which are hereby made a part of the contract. The word "Contractor" herein refers to any party to the contract, other than the County of Livingston (herein after "County").

- I. The County shall have the right to postpone, suspend, abandon or terminate this contract, and such actions shall in no event be deemed a breach of contract. In the event of any termination, postponement, delay, suspension or abandonment, the Contractor shall deliver to the County all data, reports, plans, or other documentation related to the performance of this contract, including but not limited to guarantees, warranties, as-built plans and shop drawings. In any of these events, the County shall make settlement with the Contractor upon an equitable basis as determined by the County, which shall fix the value of the work which was performed by the Contractor prior to the postponement, suspension, abandonment or termination of this contract. This clause shall not apply to this contract if the contract contains other provisions, exclusive of termination date, applicable to postponement, suspension or termination of the contract.
- II. The Contractor agrees that it will indemnify and save harmless the County from and against all losses from claims, demands, payments, suits, actions, recoveries and judgments of every nature and description brought or recovered against it by reason of and to the extent of any negligent omission or act of the contractor, its agents, employees, or subcontractors in the performance of this contract. This indemnification shall include all costs and disbursements incurred by the County in defending any suit, including attorneys' fees. Furthermore, at the option of the County, the Contractor shall provide defense for and defend all claims, demands and causes of action referred to above, and bear all other costs and expenses related thereto. The Contractor shall not be required to indemnify the County for any damage or loss arising out of the negligence or willful misconduct of the County, its agents or employees.
- III.
 - A. The Contractor warrants that to the best of the contractor's knowledge and belief, there are no relevant facts or circumstances which could give rise to an organizational conflict of interest, as herein defined, or that the Contractor has disclosed all such relevant information to the County.
 - B. An organizational conflict of interest exists when the nature of the work to be performed under this contract may, without some restriction on future activities, either result in an unfair competitive advantage to the Contractor or impair the Contractor's objectivity in performing the work for the County.
 - C. The Contractor agrees that if an actual or potential organizational conflict of interest is discovered after award, the contractor will make a full disclosure in writing to the County. This disclosure shall include a description of actions which the Contractor has taken or proposes to take, after consultation with the County, to avoid, mitigate, or minimize the actual or potential conflict.
 - D. Remedies - The County may terminate this contract in whole or in part, if it deems such termination necessary to avoid an organizational conflict of interest. If the Contractor was aware, or discovered an actual or potential conflict after award and did not disclose or misrepresented relevant information to the County, the County may terminate the contract, or pursue such other remedies as may be permitted by the law or this contract. The terms of Clause I of this Appendix B or other applicable contract provision regarding termination shall apply to termination by the County pursuant to this clause.
 - E. The Contractor further agrees to insert in any subcontract hereunder, provisions which shall conform to the language of this clause.
- IV. All requests for payment by the Contractor must be submitted on forms supplied and approved

by the County. Each payment request must contain such items of information and supporting documentation as required by the County, and shall be all inclusive for the period of time covered by the payment request.

- V. To the extent that federal funds are provided to the Contractor under this contract, the Contractor agrees that it will comply with all applicable federal laws and regulations, including but not limited to those laws and regulations under which the Federal funds were authorized.

The Contractor further agrees to insert in any subcontract hereunder, provisions which shall conform substantially to the language of this clause, including this paragraph.

- VI. The Contractor shall have the status of an independent contractor, and in accordance with such status, agrees that it will conduct itself in a manner consistent with such status, and that it will neither hold itself out as, nor claim to be, an officer or employee of the County by reason of this contract. It further agrees that it will not make against the County any claim, demand or application to or for any right or privilege applicable to an officer or employee of the County, including but not limited to worker's compensation coverage, unemployment insurance benefits, social security coverage, or retirement membership or credit.

- VII. In the event of a conflict between the terms between this Appendix B and the terms of the Contract (including any and all attachments thereto and amendments thereof, but not including Appendix A), the terms of this Appendix B shall control. In the event of a conflict between the terms of this Appendix B and Appendix A, the terms of Appendix A shall control.

- VIII. The main contract shall contain a paragraph incorporating the terms of this appendix by reference and the parties therein shall further sign and date this appendix.

Livingston County

Contractor
(Signature of Authorized Official Required)

APPENDIX C

LIVINGSTON COUNTY STANDARD CONTRACT INSURANCE REQUIREMENTS

- I. Notwithstanding any terms, conditions or provisions, in any other writing between the parties, the contractor/permittee hereby agrees to effectuate the naming of the County of Livingston as an unrestricted additional insured on the contractor's/permittee's insurance policies, with the exception of workers' compensation and professional errors and omissions. **The contractor/permittee must provide an additional insured endorsement.** A statement on the contractor/permittee's insurance certificate that the County of Livingston is an additional insured is **not** sufficient. The form of the additional insured endorsement must be approved by the Livingston County Attorney.
- II. The policy naming the County of Livingston as an additional insured shall:
- be an insurance policy from an A.M. Best rated "secured" New York State licensed insurer;
 - state that the organization's coverage shall be primary coverage for the County of Livingston, its Board, employees and volunteers. Any insurance or self-insurance as maintained by the County of Livingston shall be in excess of the contractor's insurance, and shall not contribute with it.
- III. The contractor/permittee agrees to indemnify the County of Livingston for any applicable deductibles or self insurance reserves.
- IV. Required Insurance:
- **Commercial General Liability Insurance, including Completed Operations Coverage for construction contracts**
\$1,000,000 per occurrence/ \$2,000,000 aggregate per project.
 - **Automobile Liability**
\$1,000,000 combined single limit for owned, hired and borrowed and non-owned motor vehicles.
 - **Workers' Compensation**
Statutory Workers' Compensation and Employers' Liability Insurance for all employees.
 - **Owners Contractors Protective Insurance (Generally required only for construction contracts. Contact Livingston County Attorney for determination of necessity.)**
\$1,000,000 per occurrence/\$2,000,000 aggregate, with the County of Livingston as the named insured.
 - **Professional Errors and Omissions Insurance (If professional service contract)**
\$1,000,000 per occurrence/ \$2,000,000 aggregate for the negligent professional acts of the contractor.
- V. The contractor/permittee is to provide the County of Livingston with a certificate of insurance, evidencing the above requirements have been met, prior to the commencement of work or use of facilities and upon each renewal thereafter. **Contractor/permittee or its insurance carrier(s) shall provide the County of Livingston with thirty (30) days prior written notice of cancellation, reduction of insurance or material coverage change of the required insurance policies. Such notice shall be mailed to the Livingston County Attorney, Livingston County Government Center, Room 302, 6 Court Street, Geneseo, New York 14454 and shall include the date and subject matter of the original contract. Contractor/permittee acknowledges that failure to obtain such insurance on behalf of the County of Livingston, or the failure to provide such notices, constitutes a material breach of contract and subjects it to liability for damages, indemnification and all other legal**

remedies available to the County of Livingston, including termination of the contract. The failure of the County of Livingston to object to the contents of the certificate or the absence of same shall not be deemed a waiver of any and all rights held by the County of Livingston.

- VI. If at any time any of the policies required herein shall be or become unsatisfactory to the County, as to form or substance, or if a company issuing any such policy shall be or become unsatisfactory to the county, the contractor shall upon notice to that effect from the County, promptly obtain approval and submit a certificate thereof. Upon failure of the contractor to furnish, deliver, and maintain such insurance, the Agreement, at the election of the County, may be declared suspended, discontinued or terminated. Failure of the contractor to take out, maintain, or the taking out or maintenance of any required insurance, shall not relieve the contractor from any liability under the Agreement, nor shall the insurance requirements be construed to conflict with or otherwise limit the contractual obligations of the contractor concerning indemnification. All property losses shall be made payable to and adjusted with the County.

In the event that claims, for which the county may be liable, in excess of the insured amounts provided herein are filed by reason of any operations under the Agreement, the amount of excess or such claims or any portion thereof, may be withheld from payment due or to become due the contractor until such time as the contractor shall furnish such additional security covering such claims in form satisfactory to the County of Livingston.

The County reserves the right to require complete certified copies of all required insurance policies, at any time, which shall be delivered to the County within ten days of such request.

VII. ADDITIONAL INSURED ENDORSEMENT AND CERTIFICATE OF INSURANCE:

The contractor/permittee shall file with the Livingston County Attorney, prior to commencing work under this contract, an additional insured endorsement and a Certificate of Insurance, which shall include:

- a. Name and address of insured
- b. Issue date of certificate
- c. Insurance company name
- d. Type of coverage in effect
- e. Policy number
- f. Inception and expiration dates of policies included on certificate
- g. Limits of liability for all policies included on certificate
- h. Certificate holder shall be County of Livingston, Livingston County Government Center, 6 Court Street, Geneseo, New York 14454-1043.
- i. Description of contract for which insurance is being provided.
- j. Insurance agents name, address and phone number.

Contractor
(Signature of Authorized Official Required)

Date