



HELPING OUR FAMILIES©

*When families have concerns about their children's behavior...
A Guide for Dutchess County Parents*

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Look for the link on the Dutchess County Children's Service Council website
<http://www.cscdutchess.org/>

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Participants in CCSI:
The Astor Home for Children
Child Abuse Prevention Center
Dutchess County Attorney's Office
DC BOCES
DC Community Action Agency
DC Department of Mental Hygiene
DC Office of Probation
DC Department of Social Services
DC Youth Bureau/ Youth Services Unit
Family Services, Inc.
Hudson River Housing/ River Haven
Liberty Management
The Mental Health Association in Dutchess Co.
Parents, children, families
Pine Plains Central School District
St. Francis Hospital
Taconic DDSO
Wappingers Central School District

"We, as a community, are committed to partnering with families to help them keep their children at home, in school and in the community."

Dedicated to the late Kathy Gannon Decker, CCSI Family Advocate

My child won't follow rules.

My child won't go to school regularly.

My child has been violent with me.

My child runs away.

My child uses drugs.

My child is out of control.....



What is a parent supposed to do??

Depending on whom you talk to, you might get any of the answers below:

- Get counseling
- Ask your school for a CSE (Committee on Special Education) meeting.
- Call Dutchess County Helpline (485-9700)
- Take your child to St. Francis Hospital
- Call the police.
- File a PINS petition.
- Place your child out of the home.



Or the answer you most fear:

There's nothing more you can do.....

Even when there *is* something you can do, it is hard to figure out what your options are so you can make an informed choice. The following material is designed to walk you step-by-step through various possibilities for dealing with your concerns and to help you understand the possibilities and limitations of various choices, where to go for help, and what questions to ask yourself and service providers along the way.

Facing facts..... things are sometimes confusing and “not fair”.

But if you are
barriers,



aware of the



.....you *may* be able to surmount them.

There is not just.....

so it is very important that you *keep going*, because there *IS* help available, once you know where to go, what to expect and how to advocate for the most appropriate services.



TABLE OF CONTENTS

Value statement for the children and families system of care.....	5
Some general direction.....	6
Issues for Children and Families	
In Early Childhood.....	7
In Elementary School.....	8
In Adolescence.....	10
For children who have been traumatized.....	13
In Transition - moving from childhood to adulthood.....	14
Education and Special Education.....	16
Mental Health & Chemical Dependency Services.....	23
Domestic Violence Services.....	27
Developmental Disabilities Services.....	28
Services for Older Youth/ Young Adults.....	29
Family Support and Advocacy Services.....	31
“Single Point of Access” (SPOA), High Risk Service Coordination & Coordinated Children's Services Initiative (CCSI).....	33
Child Safety and Child Abuse Prevention.....	36
Department of Social Services.....	37
Juvenile Justice	
PINS (Persons in Need of Supervision).....	44
Juvenile Delinquency.....	46
Parenting and Parent Support Groups.....	48
Child Care & After School Programs.....	52
Health Services.....	55
Acronyms - those confusing letters.....	56
Websites.....	63
Index of agencies and service providers.....	65

(A copy of this resource guide may be found in Adobe format on the website of the Dutchess County Children's Services Council: <http://www.dcchildrensservicescouncil.org/>)

**VALUES AND PRINCIPLES FOR THE SYSTEM OF CARE
FOR CHILDREN AND FAMILIES IN DUTCHESS COUNTY
(Child and Adolescent Services System Principles - CASSP)¹**

Core Values

The system of care should be child-centered and family-focused, with the needs of the child and family dictating the types and mix of services provided.

The system of care should be community-based, with the locus of services as well as management and decision-making responsibility resting at the community level.

The system of care should be culturally competent, with agencies, programs and services that are responsive to the cultural, racial and ethnic differences of the population they serve.

Guiding Principles

The families and surrogate families of children with emotional disorders should be full participants in all aspects of the planning and delivery of services.

1. Early identification and intervention should be promoted by the system of care in order to enhance the likelihood of positive outcomes.
2. Children should have access to a comprehensive array of services that address the child's physical, emotional, social and educational needs.
3. Children should receive individualized services in accordance with the unique needs and potentials of each child and guided by the individualized service plan.
4. Children should receive services in the least restrictive, most normative environment that is clinically appropriate.
5. Children should receive services that are integrated, with linkages between child-serving agencies, programs and mechanisms for planning, developing and coordinating services.
6. Children should be provided with case management or similar mechanisms to ensure that multiple services are delivered in a coordinated and therapeutic manner and that they can move through the system of services in accordance with their changing needs.
7. Children should be ensured smooth transitions to the adult service system as they reach maturity.
8. The rights of children should be protected. Effective advocacy efforts should be made for children and youth .
9. Children should receive services without regard to race, religion, national origin, sex, physical disability, ability to pay, or other characteristics. Services should be sensitive and responsive to cultural differences.

¹Stroul, B.A. & Friedman, R.M. (1986). *A System of Care for Children and Youth with Severe Emotional Disturbances. (Revised Edition)* Washington, DC: Georgetown University Child Development Center, CASSP Technical Assistance Center

THINGS TO KEEP IN MIND WHEN LOOKING FOR *ANY* KIND OF SERVICE FOR YOUR CHILD.....

ELIGIBILITY - Most services have eligibility requirements, to receive the service or to have the service paid for or covered by insurance. Eligibility may depend on diagnosis such as IQ or educational classification. Children whose problems are not easily classified are more likely to fall between the cracks.

WAITING LISTS - Many programs have waiting lists, even if a child is eligible.

DIFFERENT DEFINITIONS OF "CHILD" Differing State regulations lead to different definitions for what constitutes a minor child and for how long parents are responsible. In criminal justice, a child becomes an adult at age 16. At age 16, a youth may legally drop out of school. However, parents are financially responsible for their children until they reach age 21, meaning that a youth cannot receive public assistance to live independently unless parents contribute child support. In mental health services, a child is treated in the adult system at age 18.

PARENTAL PERMISSION Many services require parental permission up to age 18. Some services may be provided in the absence of parental permission (e.g. runaway and homeless services).

PARENTAL RESPONSIBILITY Parents are often held responsible for the behavior of their children, even when they cannot control it. Sometimes this can lead to a charge of child neglect or abuse.

HOURS OF OPERATION Many services are provided only during business hours (9-5), when parents must be at work and children at school. This creates hardship for families. However, some services *are* home-based and others offer evening hours.

HMO RESTRICTIONS Some health maintenance organizations will not treat mental illness that is chronic or else have co-payments that rapidly increase until a high out of pocket fee is required for basic mental health services. Sometimes the number of sessions is capped. Some medications are not covered.

SURRENDER OF CUSTODY If your child must be placed in a residential treatment setting and the Department of Social Services is the placing agency, you may be asked to surrender custody as a condition of placement.

ISSUES IN EARLY CHILDHOOD - AGES 1 TO 5

Behaviors in early childhood which create concerns for parents may still be age-appropriate (e.g. temper tantrums ages 2-3, sexual curiosity, occasional bed-wetting after toilet training is completed etc.). Children who have been exposed to violence, family disruption or other trauma are more likely to display negative behaviors. Here are some steps you can take to determine if your concerns require intervention:

- **See your pediatrician.** Your child's doctor knows your child and is the first person to consult with your concerns about negative behaviors.
- **Obtain a multi-disciplinary evaluation and find out what services are needed.** The Dutchess County Health Department's Early Intervention Program can evaluate your child to determine whether disabilities or developmental delays require early intervention services and provide them free of charge to children who qualify.(486-3403). The Child Care Council (473-4141) can provide information on child care providers that have experience with children with special needs and will offer information and support to child care providers who care for special needs children.
- **Seek help from a children's mental health professional.** A mental health professional will meet with you and your child and determine what stressors may be contributing to your child's behavior and how to address them. A child ages 1-5 is not a candidate for therapy, however, the clinician will work with parents to understand the sources of the concerns and to create a family environment which works to reduce the problem behaviors. There are also short-term, in-home crisis services for severe problems. (Dutchess County Helpline 485-9700)
- **Learn effective parenting skills.** Age-appropriate expectations for behavior, structure and consistency help parents manage their children's behavior. Many parents are helped by attending parenting skills programs that are offered by a number of community agencies (See Parent Groups section of this book).
- **Get support for yourself as a parent.** Caring for a special needs child can be extremely demanding. Family support groups are available for families coping with emotional disabilities (Mental Health Association 473-2500) or developmental disabilities (Taconic DDSO Community Services Office 471-9226).
- **Get ready for the school years.** If your child will require special educational services, you will want to know this before school starts. An Early Intervention pre-school assessment can provide you with information and referrals. You can also obtain information on special education for yourself at SETRC (Special Education Training Resource Center) 486-4840, x 3030.

ISSUES IN CHILDHOOD - AGES 5 THROUGH ELEMENTARY SCHOOL

The issues described below begin to be looked at more with some concern once a child has reached age 5:

- **Bed wetting.** If your child is wetting the bed **twice per week for at least 3 consecutive months** and this causes significant stress in other areas of functioning (social, at school, e.g.) then it should be flagged as a time to take action. Check with your pediatrician to rule out a medical condition. If this is ruled out, it is likely that some psychological factors are involved. Ask your pediatrician for a referral or call Dutchess County Helpline at 485-9700.
- **School phobia.** School phobia is a young child's irrational *fear* of going to school. It is to be distinguished from a child who does not want to go to school or who is skipping school to hang out with friends. In some cases, the child may have specific fears of something (e.g. bullies, academic demands). Sometimes the child is not so much afraid to go to school as afraid to leave home due to worry about what may happen to a parent when the child is gone (e.g. fear of parental illness (physical or mental); fear of parental incapacity due to substance abuse; fear of domestic violence).

It is important to talk to your child to better understand the fear as well as to the teacher who may have a different view of the problem. The teacher may be extremely helpful in working out a plan to help your child feel more comfortable and less anxious about being in school. The school may ask you to talk to the school psychologist or social worker about your concerns.

- **Sexualized behavior.** Sexually inappropriate behavior can range from children who touch themselves or other children inappropriately (beyond what is age-appropriate experimentation) all the way to predatory sexual behavior.

Sexual exhibitionism is the frequent displaying of the genitals or sexual characteristics in socially unacceptable circumstances (at school, in a store, in a group of people).

A sexual predator is someone who has been convicted of sexual assaults on another person and is still considered dangerous.

Sexualized behavior may result from a child having been exposed to the sexual behavior of adults or from having been a victim of sexual abuse. It is important to receive evaluation and help for this behavior, since children who engage in sexually inappropriate behavior may engage other children in this behavior.

Specialized evaluation and treatment are available.

- **Cruelty to animals.** If a child exhibits cruel or excessively punitive behavior towards animals, it is important not to dismiss or ignore it. This behavior may be coupled with other behaviors, such as anger, threatening behavior toward others, physical fights, stealing, destructiveness and lying. This behavior may be a one-time event for your child or could be part of a more persistent pattern, a *conduct disorder*, in which societal norms and the rights of others are violated. Your child should be evaluated by a mental health professional.
- **Aggressive behavior.** Aggressive behavior can be observed in physical or verbal attacks on others. Younger children may display aggression by hitting or yelling at playmates and being destructive with toys or school supplies. Youth may engage in physical fighting, bullying, defiance of authority or delinquent acts.

If the behavior has been escalating, it is important to have your child evaluated by a mental health professional. Children may react to a variety of stressful events with aggressive behavior (a recent loss or witnessing domestic violence, for example) or the child may not have disclosed that they are being bullied or victimized. Alcohol or substance abuse may be involved.

ISSUES IN EARLY AND LATE ADOLESCENCE - AGES 12-21

- **Drug/alcohol abuse (chemical dependency).** Children may use drugs or alcohol in an attempt to diminish the stress of family or school concerns. Underage drinking and drug use are both against the law, however many families and peer cultures permit or encourage substance use as acceptable teen behavior. We know that the younger a child is when they begin to use alcohol or drugs, the more likely they are to be impaired by substance use. Alcohol use is not less damaging than substance use. Both can cause abuse or dependence in youth and may have serious consequences - e.g. driving while under the influence of drugs or alcohol.

Children need to hear a clear and unambiguous message from parents that alcohol or substance use is not acceptable, however many parents deny or minimize the potential impact of their child's alcohol/ substance use or are themselves are struggling with alcohol and substance problems and cannot provide this message.

If a child's behavior or school performance are declining and a parent suspects substance abuse, there are counselors professionally trained in diagnosing and treating substance abuse and dependence.

- **Anti-social attitudes and behaviors. Violent behavior.** Societal violence manifests itself in several ways. **When an individual comes into frequent conflict with others and societal institutions, we refer to this as *anti-social behavior*.** Individuals with anti-social personality traits feel little or no remorse for their actions, have a tendency to blame others and not to accept responsibility for the consequences of their behavior. Children whose behavior fits this description are sometimes diagnosed with **Conduct Disorder**. A child with Conduct Disorder may demonstrate:

- Aggression toward people and animals.
- Repeated physical fighting. Initiating fighting
- Use of weapons.
- Stealing. Destruction of property.
- Deceit. Repeated lying to obtain something.
- Frequently breaks rules at home and in school.

Oppositional and defiant behavior is different from Conduct Disorder. A child may be diagnosed with ***Oppositional Defiant Disorder*** if s/he is often spiteful, refuses to follow rules, and blames others rather than taking responsibility for their own behavior. The key differences are that a child with a ***Conduct Disorder*** 1) will break the law and 2) engage in behaviors that are more violent and unremorseful.

It is very important not to ignore these behaviors and to have your child evaluated by a mental health professional. A key to addressing these concerns is helping parents to find effective methods for addressing the behaviors with consistent rules and consequences. There are proven programs for both parents and children related to anger management,

managing defiant behavior and conflict resolution skills. Another key element in addressing oppositional or anti-social behavior is insuring that all adults who interact with your child are consistent in setting limits and imposing consequences for behavior that is unacceptable.

- **Suicidal thoughts and gestures.** Threats of suicide should **always be taken seriously**. If your child is making statements like "life stinks" or "I hate life", it may not be an intent to commit suicide, but it deserves further discussion, so that as a parent you can understand what is troubling them to that extent. **Suicidal ideation refers to the serious contemplation of suicide or thought patterns that lead to killing oneself.** If a child expresses a desire to die, they need evaluation by a mental health professional. Substance abuse is often a factor that increases feelings of hopelessness, or removes the barriers to acting on suicidal thoughts. Depression is a treatable mental illness. **However if your child has a plan to commit suicide or has attempted suicide in the past, immediate action may be called for.** An emergency evaluation can be obtained at St. Francis Hospital Emergency Psychiatric Care Center (EPCC). Dutchess County's 24 hour Helpline (485-9700) can provide assistance in determining what to do.
- **Depression.** Depression refers to a group of emotional disorders characterized by, sadness, discouragement, despair, pessimism about the future, reduced activity and productivity, sleep disturbance or excessive fatigue and feelings of hopelessness.

In childhood, depression can look different from the way it manifests in adults. Instead of appearing sad, a child may be irritable, agitated or cranky. There may be a loss of interest in friends, games or sports, which previously were a source of pleasure. School performance may suffer. Again, there are many effective treatments for depression, all of which start with an evaluation by a mental health professional.

- **Eating disorders.** If you have noticed distinct differences in your child's eating patterns, it is important to talk to your child about what is going on.

In today's society, beginning in middle school, young teens begin to feel pressure about the way they look. They sometimes resort to quick and unsafe methods of losing weight (e.g. diet pills, diet plans with inadequate nutrition, starvation, binge eating followed by purging - self-induced vomiting). While for some teens, these behaviors are transitory, for others eating, dieting and purging become a central feature of their lives.

Two categories of eating disorders are:

Anorexia nervosa - Anorexia is diagnosed when an individual refuses to maintain a minimally normal body weight, is intensely afraid of gaining weight. A key element is that the teen exhibits a significant disturbance in the perception of the shape or size of their body.

Signs of anorexia may be: very restricted diet of low calorie foods, excessive exercise, frequent weighing, obsessive measuring of body parts, skipped menstrual cycles, medical problems such as anemia or dehydration, fatigue or even excess energy.

Bulimia - Bulimia is a disorder in which weight loss is also a goal, as in anorexia but the goal is achieved through binge eating followed by purging. Binge eating is defined as consumption of an abnormally large amount of food in a very short period of time. Often the food is very high in calories. In an attempt to compensate for the weight gain, the individual attempts to rid themselves of the food through purging or through the use of laxatives and diuretics.

Both disorders can cause serious medical problems and even lead to death if not treated. If your child is exhibiting these symptoms, you should consult your pediatrician and if an eating disorder has been confirmed, a mental health professional.

Treatment of these disorders often involves the whole family. If the weight loss is severe, hospitalization may be advised.

ISSUES FOR CHILDREN WHO HAVE BEEN TRAUMATIZED

Trauma (Post-traumatic Stress) - Post-traumatic stress is the development of behaviors or symptoms following an extreme traumatic stressor. An event may be experienced as traumatic if it involves violence or the threat of harm to oneself or the witnessing of violence, threat of violence or death involving another. However, many children live in environments where danger, violence and threats of violence are a daily occurrence. While many children have a natural resiliency that helps them to cope better, many of these children suffer with post-traumatic stress symptoms as a result.

Examples of traumatic events include: military combat, violent personal assault, kidnapping, hostage situations, terrorist attack, torture, natural disasters, severe auto accidents, the diagnosis of a terminal illness. Children who have been exposed to domestic violence are also vulnerable to becoming traumatized.

Events experienced by others that may be traumatic for a child include: personal assault, serious accident or injury to a close family member or friend; sudden death of a family member or close friend.

Trauma is experienced along a continuum from mild to extreme. The important thing is how an individual responds to the event and how their response affects them in their daily lives. Post-traumatic stress occurs when that response involves intense fear, helplessness or horror. In children, we may see anxiety and disorganized behavior. The child may re-experience the traumatic event, leading to a persistent avoidance of environmental triggers (places, sounds, smells) or any situation that would revive recollections of the trauma. Also common is a general increase in arousal (hyper-vigilance). Diminished interest in activities, feelings of numbness or detachment or the reduced ability to feel emotions may occur.

The severity of Post-Traumatic Stress often corresponds to the severity and duration of the trauma, but the response may be eased or made worse, depending on the availability of support from others or the impact of additional stressors.

Re-experiencing the trauma may occur in various ways. The child may have intrusive recollections, which may take the form of repetitive play or distressing dreams that may not have recognizable content, but are frightening. Dissociative states may occur during which the person blacks out for a period of a few seconds to a few days, during which time components of the event are relived in the form of flashbacks.

Children manifest Post-Traumatic Stress differently from adults. Their behavior may mimic symptoms of depression, oppositional or hyperactive behaviors. Violence and anti-social behaviors may also be a response to traumatic experience.

Children who have experienced trauma and are showing any of the symptoms described above should be evaluated by a mental health professional.

ISSUES IN TRANSITION - MOVING FROM CHILDHOOD TO ADULTHOOD

Family Focus vs. Individual Focus

As youth move from early to later adolescence, there is an increasing push for greater independence, even when the skills to be independent are lacking. Substance abuse and conflicts with parents about judgment and decision-making often lead to parents trying to exert greater control at a time when the youth feels less control is warranted. Some parents give up trying to set limits when they meet with opposition, leaving the youth on his own, which can lead to serious behavioral concerns.

One fact is worth remembering: **parents remain legally and financially responsible for their children up to age 21. Youth generally do not become eligible for public assistance as individuals until age 21.**

Despite this, in some service systems youth are considered "adult" at an earlier point. For example, **in the criminal justice system, a youth at age 16 is charged as an adult** and youth as young as 13 charged with a serious crime may be treated as an adult.

In the mental health system, a youth is served in the adult system at age 18.

In the education system, a youth must attend school up until at least the age of 16, and in some school districts up to age 18.

Once a youth is considered an adult in various service systems, the wishes and input of family members do not have to be considered unless the youth gives written consent for this to happen. Because of this right to self-determination and confidentiality, most adult services assume an individual rather than family focus. However, many service providers recognize the importance of including family members to have a better outcome and try to include family members in planning, whenever possible.

Mental Health Planning

Youth age 18 and over entering the mental health system will enter the adult service system. If the youth is *already* receiving mental health services through the Astor Counseling Centers, they may be continued up to age 21, or until such time as treatment can be concluded or a transition to the adult system has been arranged.

Educational and Vocational Planning

Transition planning - planning for what path a youth will follow upon leaving school, should begin at age 14. Schools have guidance staff, however with large student caseloads, a parent must be very persistent in finding out what educational and vocational options are best suited for their child. Although all students are now expected to pass Regents exams to receive a High School diploma, the GED and other vocational options can provide the

youth with basic requirements to enter the job market. School guidance offices, one-stop employment centers and VESID (Vocational and Educational Services for Individuals with Disabilities) all can provide information about eligibility and career planning.

Independent living

Most youth visualize living in their own apartment and being able to support themselves. Many of these youth do not earn enough to accomplish this, or else may lack basic budgeting, banking and housekeeping skills to make this happen. There are independent living skills programs available in the community (River Haven in Poughkeepsie is one) that can assist. However, most youth learn with the help of their parents how to become responsible for holding down a job, paying bills and keeping house. Parents need to help their children face the difficult realities of independence. For some youth, an alternative to living at home is living with a relative or with a group of friends. Others may live in quasi-independent living situations such as college dormitories or Job Corps. Programs such as **River Haven (454-2300)** assist older youth who lack sufficient family support, in meeting their basic needs and preparing for independent living. River Haven also provides 10 units of supervised housing for young people, ages 16-21, who are working toward becoming self-sufficient. Even those who have the skills to live independently may be too young to sign a legally binding lease or may need parental consent to obtain services. Until they master the skills necessary, and are legally responsible for their own affairs, *all* youth will need some support (both personal and financial) from caring adults.

Single Point of Entry for Housing [SPOE] - (Supportive housing for the mentally ill, through the Department of Mental Hygiene)

Young people, age 18 and over, who are seriously mentally ill and in need of supportive housing as they enter adulthood may be eligible for housing in a range of residential options, from supervised community residences to supported apartments. Applicants must be in mental health treatment (**contact Helpline at 485-9700**). Referrals are made through the primary therapist and case manager. For specific questions on housing, you may contact the **DMH Housing Coordinator (486-3737)**.

Other supportive housing programs for adults who are not seriously mentally ill are provided through **Hudson River Housing (454-5176)**.

EDUCATION: SCHOOL POLICIES AND PROCEDURES

(This section is taken from NYS Education law, so it is general in nature. To get more specific information, you will need to contact your school district directly.)

School Registration/Transfer – Calling the school/or stopping by in person and filling out a registration form, which includes demographic information and request for information from last school.

Screening of new school entrants – Every new student to a school must be provided with a screening to determine which students may have handicapping conditions or may be gifted, but not limited to the following:

1. A physical examination in accordance with Sections 901, 903, and 904 of the Education Law, including proof of immunization as required by Section 2164 of the Public Health Law.
2. An assessment of language development and cognitive ability in the student's native language, if the language of the home is not English.

If such screening indicates a possible handicapping condition, a referral shall be made to the Committee on Special Education with notification of the referral to the parents/legal guardians.

If such screening indicates a possibly gifted child, the name and finding shall be reported to the Principal and to the parents/legal guardians.

Parents/Guardians of children will receive information in advance regarding the purpose of screening, the areas to be screened, and the referral process. The information shall be communicated either orally or in writing to the parents.

Assignment of students to classes –The building principal is responsible for assignment of students and must take into account:

1. The educational, emotional, and social needs of each student as determined by professional knowledge and as revealed by any information, which may be supplied by the student, former schools, and parents/guardians.
2. The appropriate size for each class.
3. An equitable load for each teacher.

A deadline is established for changing the assignment of students in grades 7-12 to classrooms.

After the deadline changes may only be made in cases of:

1. Unexpected student failure in the work of the previous year.
2. Earning of course credit by the student during the summer months.
3. A change in the career plans of the student.

(Education Law Section 1709 (3))

Home Schooling - If a parent chooses to instruct their children at home the school district will attempt to cooperate with parents. The school district maintains that a child who is educated at home should receive an education in a manner consistent with an educational plan and at least substantially equivalent to that given to minors of like age and attainments in the local public schools. The required subjects should be taught in a competent, systematic, and sequential manner, specifically in relation to the basic core curriculum of reading, mathematics, and writing.

The Superintendent shall develop appropriate regulations and procedures in accordance with State requirements.

(Education Law Sections 3204, 3205, 3210, 3212 Commissioner's Regulations Section 100.10)

Homebound Instruction provided by the School District - Homebound instruction is provided to students who are absent for two weeks or more due to documented medical or psychiatric illness. Prior approval via the Office of Pupil Personnel Services is required and is made on a case-by-case basis. Students in kindergarten are not eligible for homebound instruction. Homebound instruction is intended to provide continuity for the student while he/she is absent from school, but is not intended to fully duplicate the education the student would receive while attending school.

Eligibility:

- Student must be currently enrolled in grades 1-12 or in Special Education
- Homebound instruction request for approval form must be completed and submitted to the Director of Pupil Personnel
- Request must include documentation from physician or psychiatrist stating specific medical or psychological needs for homebound instruction and anticipated duration of absence.

Guidelines:

- Ten hours minimum of instruction per week for students in grades 6-12
- Five hours minimum of instruction per week for students in Grades 1-5
- Instruction takes place in the student's home. In special cases, arrangements for instruction in such places as a public library can be made by the district.
- A parent or other responsible adult must be present for the duration of each homebound instruction session
- Instruction for students who are hospitalized, even if out of the area, can be arranged as part of the approval process
- Instruction takes place only on days the School District is in session for students

Regulations and Procedures for Guidance Counselors, Principals:

- Complete and submit Request for Approval Form
- Upon submission of form, contact student' teachers for assignments
- Serve as a liaison between school, teacher, homebound tutor and parent
- Obtain books and assignments from all of student's teachers on a weekly basis
- Disperse work completed by student to classroom teachers on a weekly basis
- Provide a homebound tutor with a schedule of students Regents Exams and school finals at least ten days prior to an exam week

Classroom Teachers' Responsibilities:

- Provide a homebound tutor (via guidance counselor-secondary)
- Objectives of topics to be covered for the next three weeks (brief outline)
- Books and any worksheets each week
- Homework and in-class assignments each week
- Grade all assignments and tests
- Determination of students report card grades (teacher may consult with tutor)

Parent's Responsibilities:

- Parent or other responsible adult **MUST** be present for the duration of all homebound instruction sessions or provide transportation for instruction provided in a public setting
- Ensure that their child is completing all assignments and putting forth appropriate effort
- Notify student's homebound tutor in advance if student is unavailable for tutoring session
- Notify child's guidance counselor as to when student is expected to return to school

Student's Responsibilities:

- Be ready to learn when homebound tutor arrives
- Complete all assignments on time, including homework
- On your own time, practice and/or review topics covered during homebound instruction sessions

Disciplinary Procedures - If your child has misbehaved in school and the disciplinary action has reached the point of suspension the School District is required to:

4. Notify the parent/guardian immediately
5. Send out a letter to the child's home within a 24-hour period notifying the parent/guardian that the child has been suspended.
6. If your child is in Special Education classes a letter also goes out which states that an emergency CSE will follow the suspension.

Students in Regular Education:

Each school district handles disciplinary procedures differently in the manner that they suspend a child (ie; If a child is caught for an action for the first time he/she is suspended for a day, second time three days etc.).

If a regular education student has been suspended multiple times or is actively in trouble

they are sent out a letter regarding a *Superintendents' Conference*. This meeting is a preventive meeting as a warning to the *Superintendents' Hearing*. The *Superintendents' Hearing* is held to determine whether or not permanent suspension is needed. The *Superintendents' Hearing* also can be called if a student has committed a major violent incident.

Students in Special Education - If a special education student has been actively in trouble they will also send out a letter for a *Superintendents' Hearing*, but notice will also be sent out regarding an *Emergency CSE* meeting. The CSE will determine whether the school placement is effective or if a new placement needs to be considered. The Superintendents hearing looks at the last suspension that the child received and asks if it was done *in accordance with the student's handicapping condition*. If it is determined that he/she was then the student cannot be penalized. If the act was not, then the Superintendent has the right to expel the child.

Bus Suspensions - Suspensions from the bus are carried through in the same manner, however, the letter home has a different format. The school requests that the parent/guardian speak with their child regarding their manner on the bus and work with the bus driver to cooperate. They maintain a policy that riding the school bus is a privilege, not a right.

Filing of a PINS petition by the school district - School districts may file a "Person in Need of Supervision" petition with the Office of Probation where there is a persistent pattern of truancy, drug use or incorrigible behavior or a combination of these problems that has not been corrected with the interventions described above. **(See Juvenile Justice section for further detail).**

SPECIAL EDUCATION

"A Parent Handbook: Introduction to the Special Education Process" produced by the PACER Center provides a clear explanation of the special education process. A brief overview from that handbook is included in this section. (to order the PACER Handbook, contact: The PACER Center, 8161 Normandale Blvd., Minneapolis, MN 55437-1044, (952) 838-9000 or visit their website at www.pacer.org.)

Any child between the ages of 3 and 21 with a disability, who by reason of the disability, may need special education and related services, must be evaluated by the school district's **Committee on Special Education (CSE)** to make that determination and to officially certify the child in one of the designated disability groups. The PACER handbook outlines the steps parents can take to insure that their child receives appropriate educational services. The school district has a **Committee on Pre-School Special Education (CPSE)**, which makes disability determinations for children with disabilities between the ages of 3 and 5.

For children birth to age 3 with developmental delays, the **Dutchess County Early Intervention Program** through the Dutchess County Health Department (486-3403) provides a multi-disciplinary evaluation at no charge to assess developmental status and determine eligibility for early intervention services (such as speech therapy, physical therapy, parent training, etc.). The **Early Childhood Direction Center** in Kingston, serves a 4 county area (including Dutchess County and provides information, referral and service coordination for children with disabilities from birth to age 5.

A Parent's Guide to Special Education for Children Ages 5-21 can be obtained by contacting your local school district's Committee on Special Education or **SETRC (Special Education Training Resource Center) 486-4840**.

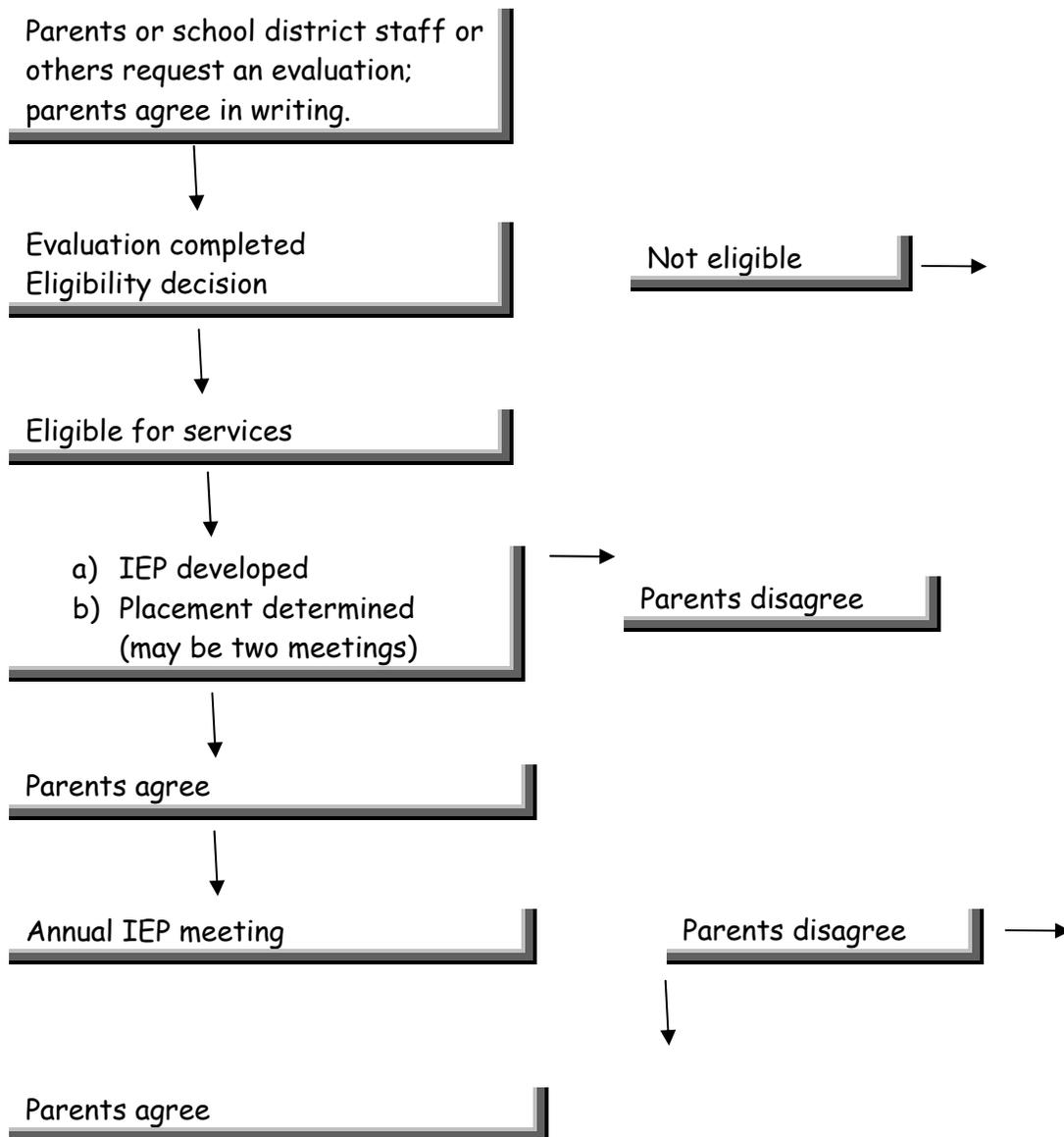
Individual Evaluation and Eligibility Determinations for Students with Disabilities is another informational handbook for parents produced by the New York State Education Department's Office of Vocational and Educational Services for Individuals with Disabilities (VESID).

While each school district manages its own CSE process, if you have questions or concerns about how this process is working for you and your child, it can be helpful to consult the **Regional Associate** at the local **VESID Quality Assurance Regional Office**. For this area, that is the **Hudson Valley Regional Office** at (845) 245-0010. Information is also available on the NYS Education website www.vesid.nysed.gov or at www.wrightslaw.com.

Understanding the Special Education Process - an Overview for Parents

The chart below is a basic overview of the special education process, created by the Pacer Center, with the approval of the Office of Special Education and Rehabilitation Services, U.S. Department of Education. It is not designed to show all the steps or the specific details. It shows what happens from the time a child is referred for evaluation and is identified as having a disability, through the development of the Individualized Education Program (IEP).

The process begins with someone (school staff, parents, etc.) making a referral for an initial evaluation.



DUTCHESS COUNTY SCHOOL DISTRICTS

Arlington Central School District

626 Dutchess Turnpike
Poughkeepsie, NY 12603
845-486-4460

www.arlingtongschools.org

Beacon City School District

10 Education Drive
Beacon, NY 12508
845-838-6900

www.beaconcityschools.org

Dover Union Free School District

P.O. Box 6311
Dover Plains, NY 12522
845-832-4500

www.doverplains.org

Dutchess County BOCES

5 BOCES Road
Poughkeepsie, NY 12601
845-486-4800

www.dcboces.org

Hyde Park Central School District

P.O. Box 2033
Hyde Park, NY 12538
845-483-3600

www.hydeparkschools.org

Millbrook Central School District

P.O. Box AA
Millbrook, NY 12545
845-677-4200

www.millbrookcsd.org

Pawling Central Schools

7 Haight St.
Pawling, NY 12564
845-855-4605

<http://myschoolonline.com/site/0,1876,6162-23702-4-727,00.html>

Pine Plains Central School District

2829 Church St.
Pine Plains, NY 12567
518-398-5781

www.pineplainschools.org

Poughkeepsie City School District

11 College Avenue
Poughkeepsie, NY 12603
845-451-4900

www.pcsd.k12.ny.us

Red Hook Central School District

7401 So. Broadway
Red Hook, NY 12571
845-758-2241

www.redhookcentralschools.org

Rhinebeck Central School District

North Park Road
Rhinebeck, NY 12572
845-871-5520

www.rhinebeckcsd.org

Spackenkill Union Free School District

15 Croft Road
Poughkeepsie, NY 12603
845-463-7800

www.dcboces.org/sufsd

Wappingers Central School District

29 Marshall Road
Wappingers Falls, NY 12590
845-298-5000

www.wappingersschools.org

Webutuck Central School District

194 Haight Avenue
Amenia, NY 12501
845-373-4100

www.webutuckschools.org

MENTAL HEALTH AND CHEMICAL DEPENDENCY SERVICES

How do I know what kind of service my child needs?

When parents identify behavioral concerns as described in the previous section, determining what intervention is required starts with an **outpatient** assessment by a mental health or chemical dependency professional. Unless the situation is an emergency (such as a violent episode, suicidal ideas, suicide attempt or a drug overdose), **evaluation is done on an outpatient basis.**

Outpatient clinic services - The majority of children and families are served in community-based outpatient clinics and counseling centers that offer a variety of services: individual, group and family therapy, psychiatric evaluation and medication management and case management support.

Dutchess County Helpline 485-9700

Is the 24-hour crisis and referral line for all Dutchess County public mental health and chemical dependency services. Appointments for assessment can be made for the appropriate clinic in your area. Astor Counseling Centers serve children and adolescents with mental health issues up to age 18. **Hudson Valley Mental Health, Inc.** provides outpatient mental health services to adults 18 and over. **The Lexington Center for Recovery** provides chemical dependency treatment for adolescents and adults.

Astor Counseling Center locations:

Poughkeepsie	Wappingers
Beacon	Wassaic
Red Hook	

Astor School-Based Clinic locations:

Arlington	Rhinebeck
Beacon	Pine Plains

The **Mental Health Association Library (486-2896)**, maintains a list of **private providers**. You should check with your health insurance provider about approved or "preferred" providers and the referral process under your plan.

St. Francis Hospital operates a fully licensed, **private, outpatient Mental Health Clinic** at the hospital's main site in Poughkeepsie. Direct referrals may be made for both children and adults. **(431-8287)**. The **Adolescent Intensive Outpatient Program (AIOP)** is operated as part of the St. Francis Hospital Mental Health Clinic (see below).

DC Youth Services Unit offers short-term individual/ group counseling for youth experiencing truancy and other negative behaviors. **(486-3665)**

What about a psychiatric emergency?

St. Francis Hospital Emergency Department provides emergency assessment and

treatment in a psychiatric crisis for children, adolescents and adults. The individual should be taken directly to the emergency room for triage. If there is **imminent risk of harm to self or others**, police assistance should be sought by dialing **911**.

What if the crisis is at home?

Astor maintains a **Mobile Crisis Worker** during regular business hours (Monday through Friday, 9-5). You can contact the **Mobile Crisis Worker** by calling the Dutchess County **Helpline at 485-9700** for assistance.

Home-Based Crisis Intervention (HBCI), operated by Astor, provides a 6-week intensive clinical intervention if a child is at risk for psychiatric hospitalization. The family is visited several times per week by a clinical social worker, who helps develop a plan for behavioral intervention. Referrals can be made by contacting the Dutchess County **Helpline at 485-9700** or **Astor Crisis Services at 452-2372**.

What if my child needs inpatient care?

This can be determined by a mental health professional or psychiatrist at an outpatient setting or at the hospital by a psychiatrist or physician. Parental consent is needed to hospitalize a child under the age of 18. In an extreme situation of "imminent danger to self or others", hospitalization may be ordered by a psychiatrist or other physician. The patient may be brought to the hospital for assessment at such times at the order of the Commissioner of Mental Hygiene.

Most hospitalizations are short-term, to stabilize and support the child and with family involvement to create a discharge plan for follow-up in the community.

In Dutchess County, **St. Francis Hospital (483-5000)** operates an adolescent inpatient unit (ages 12 through 17) as well as two adult mental health units. If longer-term care is needed, **St. Francis Hospital** will arrange a transfer to a state-operated intermediate care psychiatric facility for adolescents, **Rockland Children's Psychiatric Center** (ages 12 through 17)

Four Winds Hospital (1-800-546-1770) in Katonah, NY serves children, adolescents and adults (ages 5 through adult).

Arms Acres operates an inpatient **chemical dependency detox and rehabilitation facility** for adolescents and adults in Carmel, NY. Referrals may be made at: **1-800-989-2676**.

Is there anything in-between outpatient and inpatient care?

Yes. There is **Dutchess Intensive Day Treatment (IDT)** a transition program operated in Poughkeepsie by **Rockland Children's Psychiatric Center** and **DC BOCES**. **Referrals are made through the school district**, which pays for the service. This program is for students in crisis and can provide stabilization through a more intense therapeutic environment, prevent hospitalization or provide support following a hospitalization. The **IDT** program is 5 days a week, with daily group therapy, individual therapy, 3 hours of academic tutoring, and a gradual transition to the home school. There is a middle and high school 30 day program for students ages 13 and over and a 60 day program for children 7-12 years. **(486-4944)**

The **Adolescent Intensive Outpatient Program (AIOP)** at St. Francis Hospital provides more intensive mental health treatment, five days per week, for three hours each day. Services include group therapy, family therapy, individual therapy and medication management. Classroom instruction is also available on site following the treatment program each day. Most insurances are accepted. **(431-8287)**.

Astor Day Treatment, operated at the Family Partnership Center in Poughkeepsie by Astor Community-Based Services, provides both educational and clinical services for children who are classified as Emotionally Disturbed by their school district and for whom such a level of care is recommended by the school district. There is also a pre-school day treatment program for children who are likewise classified. **(Referral through the CSE in the child's school district)**

Adolescent Day Treatment is jointly operated by Dutchess County BOCES and Astor at the BETA and Salt Point sites in Poughkeepsie. It provides intensive clinical and educational services for adolescents classified as Emotionally Disturbed by their school district and recommended for placement in the program. **(Referral through CSE in the child's school district)**

School-Based Clinic/ Alternative High School at the BOCES/BETA site is another jointly operated program, which provides chemical dependency counseling for youth who have been placed in the school program due to school behavior problems. **(Referral through the school district.)**

Some things to remember when you need to see a mental health provider....

- **Insurance coverage.** Check with your insurance company *beforehand* to find out what kind of mental health coverage you have. Obtain a list of eligible providers or find out the process for qualifying for mental health services with your plan. If there is a co-pay, it may be higher than your co-pay for basic medical care. Find out if it increases over time, or if there are limits to your coverage (e.g. a limit of 10 sessions). You may need to see your primary care physician for a referral.
- **Be specific in discussing your concerns about your child's behavior.** Ask when scheduling the appointment or at the first (intake) session if there is a staff member who has expertise in that area.
- **Expect to participate actively in your child's treatment.** Many parents feel so overwhelmed or upset by their child's problems and other stresses in their lives that they hope and expect that the mental health professional, as the expert, will be able to "fix" their child. Even if your child receives excellent counseling services, he or she is with the family or in school much more of the time. Families themselves often need to change their rules and learn new ways of working together, in order to help the child. . Be sure to ask your child's counselor for advice with any behavior management issues you have at home.
- **Medication.** There are many effective medications for a variety of mental health and behavioral problems from depression to hyperactivity. Every child responds differently. The prescribing physician will explain the benefits and risks of medication and any side effects. Medication often takes time to reach a therapeutic level. It can be effective only if it is taken as prescribed. Medication is most effective when it is used along with counseling and behavioral goals.

DOMESTIC VIOLENCE SERVICES

Child Abuse Prevention Center - Child Advocacy Center (CAC) provides support, information and referral to the families of child victims, and to children in families where domestic violence in the household. The CAC also houses the **Crimes Against Children** unit, where interviews are held with child victim of sexual assault. **454-0595**.

Dutchess County Department of Social Services (Child Protective Services) Based on a report to the State Central Registry Hotline, Child Protective services investigates the domestic violence and assesses the need for services, provides crisis intervention and refers for community services. **486-3000**. The hotline number to make a report concerning suspected child abuse or neglect is: **1-800-342-3720**. The hotline number for mandated reporters is: **1-800-635-1522**.

Grace Smith House offers services to women and children who are experiencing domestic violence. Services include shelter, safety, information and referral, crisis and supportive counseling. **471-3033**.

Battered Women's Services provides support for women who have been battered or abused, including information and referral, counseling, advocacy, crisis support and short-term emergency housing. **Family Services, Inc. 452-1110**.

Family Services Inc. offers a range of services for victims of domestic violence through the **Crime Victims Assistance Program (452-1110 X 3121 or 3083)** which is available to those who work, live or attend school in Dutchess County and have been victims of a crime. Services include individual and group therapy and support; advocacy; 24-hour, 7 days a week emergency room accompaniment to any victim; nurses trained to provide sexual assault forensic exams; emergency funds assistance; determining funds assistance through the State of New York; **24-hour Crime Victims and Rape Crisis Hotline (845-452-7272)**. Groups are listed below. Call **452-1110 x 3083 or 3121 for information:**

Tu Casa - (Teens Undergoing Change after Sexual Assault) a support group for 14-17 year old females that have been sexually assaulted.

Children's Domestic Violence Support Group: a weekly support group for children who have witnessed or been victims of domestic violence.

Women's Support Group: a weekly support group for any woman who has been victimized and/or has had a loved one victimized.

Childhood Sexual Abuse Support Group: a weekly support group for women who have been victims of incest or childhood sexual abuse.

DEVELOPMENTAL DISABILITIES SERVICES

The **Taconic Developmental Disabilities Services Office (Taconic DDSO)** is a regional office of the New York State Office of Mental Retardation and Developmental Disabilities (OMRDD). The Taconic DDSO serves persons living in Columbia, Dutchess, Greene, Putnam and Ulster Counties.

The Taconic DDSO works in partnership with private service provider agencies, assisting persons with developmental disabilities to attain their highest levels of independence. The DDSO, along with its associated service provider agencies offers an array of services to eligible individuals in the community, including day programs and a range of **Family and Individual Supports**:

Family Support Services is a family-directed, state-wide system of comprehensive services which enhance a family's ability to provide in-home care to their family members with a developmental disability. One family support is temporary, time- limited respite care can allow relief for family care-givers.

Individual Support Services assist individuals living in their homes with their neighborhood circle of supports.

Service Coordinators are professionals who help a person with developmental disabilities develop, plan, implement and monitor their own plan of services and support.

For additional services information, please contact the Taconic DDSO:

**Taconic DDSO
38 Firemen's Way
Poughkeepsie, NY 12601
(845) 473-5050**

Information may also be obtained by calling the toll-free number: 1-877-485-9700 of the Taconic District Planning Council, or at their informational website:

www.ddconnections.org

SERVICES FOR OLDER YOUTH/ YOUNG ADULTS

Arms Acres/ Liberty Management offers inpatient detox and rehab as well as outpatient chemical dependency treatment services. (888 227-4641)

Beacon Community Center gives children, teens and seniors empowerment and enrichment through educational, cultural and recreational services, practical assistance with homework, sports/recreation facilities, and music/entertainment. 831-6190.

NYS National Guard Challenge Program - A program sponsored by New York State National Guard, which focuses on high school drop-outs, ages 16.5-18.5. Challenge enables at-risk youth, through paramilitary methods, to become responsible, productive citizens and to obtain a GED. 1-800-NY-YOUTH.

Cornell Cooperative Extension 4-H Youth Development - provides youth up to the age of 19 with organized 4-H club activities while developing personal skills. 677-8223.

DC BOCES Programs - Providing vocational and educational services to youth from school age to 21 as well as to adult learners. **BOCES GED Classes** are offered free, day and evening, in Beacon, Poughkeepsie, Dover Plains and Red Hook. Classes prepare adults for the GED exam. 486-4968.

Dutchess Community College GED Program- for individuals who have dropped out of school, reached 16 by July of the given year, and are seeking college admission. 431-8911.

Dutchess County Youth Services Unit provides short-term, free counseling to youth who have been truant or who have other negative behaviors. Project Return, for youth 13-19, provides a safe, fun and supportive environment to those who are engaging in behaviors at home, in school or in the community that could lead to an out of home placement. 486-3665 in Poughkeepsie, 838-4895 in Beacon, 877-4120 in Dover Plains.

Dutchess County Youth Career Works- works with BOCES to provide at-risk youth ages 14-21 years with educational support and job readiness skills. 452-111- X 3535.

Mental Health Association in Dutchess County 473-2500

Dutchess Horizons Program is a social club offering socialization and recreational activities for adults with emotional disabilities. Dutchess Horizons has a special Young Adult group for individuals 18-25.

Case Management offers one on one case management services for individuals 18 and over with mental illness. 452-1799.

Teen Challenge Clubhouse - Mental Health Association offers group socialization, skills, recreation and support to teens 14-19 with emotional disabilities.

Supported Education Program offers VESID-eligible students with emotional

disabilities who are attending Dutchess Community College, special counseling, support and academic/career advisement. **431-8694.**

Family Partnership 29 North Hamilton St., Poughkeepsie- a one-stop location for a number of human services programs. **452-1110**

HRPC Crisis Residence - offers short-term respite to adults (18 and over) with emotional disabilities who are in a psychiatric crisis, but do not require a hospital level of care. **452-8000.**

Hudson River Housing offers emergency and transitional housing for individuals and families. **454-5176**

Job Corps- Young men and women, ages 16-24 who are income-eligible may receive training leading to a career, trade, GED or college preparation. Experience and education are provided by professionals in a chosen field. **1-800-733-JOBS**

Kids on Ice **454-5800**

The Mediation Center - offers alternative dispute resolution services for youth and for parents and children (Parent/Child Mediation) as well as special education/ early intervention mediation. **471-7213.**

M.A.R.C. - Mid-Hudson Alcohol Recovery Center. Non-medical alcohol and drug detox services as well as a range of recovery housing for age 18 and over. **471-0310.**

Mill Street Loft - Project Able - a program designed mainly for those between the age of 14 and 21 who are at risk. The program focuses on educational/vocational development, utilizing "hands on" instruction. Youth are trained in areas such as product design, retail/entrepreneurship, carpentry, public art, arts and technology. **471-7477.**
www.millstreetloft.org.

Poughkeepsie Continuing Education Program - provides instruction for those who are at least 16 years old, have dropped out of school, and are seeking a GED. **451-4877**

River Haven Shelter & Independent Living Program - provides emergency shelter for runaway and homeless youth, 10-17 (**454-3600**) as well as and a non-residential Independent Living Support Program (ages 16-21) and a Transitional Living Community apartment program (ages 16-21) with an emphasis on developing living skills, completing school and obtaining employment. **454-2300.**

Taconic Resources for Independence, Inc. Information about community resources of interest to persons with disabilities. Referral and advocacy. **(452-3913)**

Child Abuse Prevention Center - Teen Life Connections serves at-risk teens, teaching positive assets to decrease negative behavior and enhance pro-social values and beliefs through a series of 7 workshops. The **Personal Safety Program for Teens** provides

information on victimization, building healthy relationships, and the effects of ecstasy use and violent video games. **454-0595**

The Turning Point medical detoxification and rehabilitation program for age 18 and over). **831-3500**.

VESID (New York State Office of Vocational and Educational Services for Individuals with Disabilities) - Providing vocational rehabilitation programs to assist individuals age 16 and over to achieve employment objectives. To become eligible, an individual must establish a disability which will lead to vocational handicap and that with services, the individual may be employable. **452-5325**.

Upward Bound - provides high school students who have the ability to do well academically, but require additional academic and counseling assistance, to help prepare them for college life. **575-3258**.

Wappingers Continuing Education Program - provides instruction to those who are at least 16 years old, dropped out of school and are seeking a GED. **298-5000**

TEEN PREGNANCY SERVICES

Astor Early Childhood Programs - Early Childhood Services are available to pregnant teenagers. Services offered during weekly home visits include prenatal education, support and referrals. **Early Head Start, 452-7726**.

CARE-NET - offers free, confidential assistance to pregnant and parenting teens and young adults. Services provided include counseling, referrals and resources. Spanish speaking staff are available. **471-9284**.

Family Services, Inc. Teen Parent Program - provides support groups for young mothers and fathers, case management, home visits, referral and advocacy, birth preparation instruction in a class specially designed for teens; parenting skills in weekly parenting/personal development classes; loan closet - borrow a car seat or other baby equipment, goal-setting. **452-4937**

Vassar Brothers Medical Center PCAP (Prenatal Care Assistance Program)- offers OB/GYN and Certified Nurse Midwife care, nutritional & health education, Medicaid and WIC enrollment, HIV counseling and testing (optional), childbirth preparation classes, counseling and referral to other community agencies. Services offered in both Spanish and English. Non-insured patients are eligible for services. **431-5636**

Don't forget there is now a general information number you can call in Dutchess County to find out about a broad range of services: "211".

FAMILY SUPPORT AND ADVOCACY SERVICES

The **Mental Health Association in Dutchess County** offers a variety of programs designed to support parents and youth. **473-2500**:

EMERGE is a community-based supportive program for parents who have mental illness and their children. Support, skill-building and advocacy are offered with a goal of helping families remain together.

Family Support Program provides a variety of supportive services to families with children experiencing social, emotional or behavioral problems, including individual support and advocacy, support groups for parents or other family members (with child care), sibling support as well as many social and recreational activities for children and families.

Managing Defiant Behavior and **Managing the Explosive Child** are 9 session skill-building series for parents of children, ages two to eleven, to improve parent management skills and competence in dealing with their child's behavior problems.

Respite Services provide an essential break for families who are raising children with serious emotional disorders. Professionally trained respite workers are matched with children to spend quality one-to-one time on a regular basis with the child in the community. Organized recreational group and family activities are also provided as part of the Respite program. Respite workers also provide child care for the Family Support Groups.

Youth Intervention Program provides an Educational Advocate to assist families to obtain appropriate educational services for youth with emotional and behavioral disturbances. The advocate works with families, schools and other service providers to increase awareness of school-based solutions, educational law and mandated services.

ASTOR HOME FOR CHILDREN
HOME BASED SERVICE COORDINATION
SINGLE POINT OF ACCESS (SPOA)

What exactly is SPOA?

SPOA stands for "Single Point of Access." In collaboration with the Dutchess County Department of Mental Hygiene, the Astor Home for Children developed a system that would identify children in Dutchess County who are most at risk of out-of-home placement and/or hospitalization. The way they accomplished this was by having all referrals go through a single office - the "Single Point of Access" (SPOA) office. The purpose of SPOA is to provide linkage to services for support of children and families so that children may stay in their home communities.

The priority population for SPOA and Home Based Services is:

- families who want help (all Home Based programs are voluntary)
- children and youth at risk of hospitalization or out of home placement due to mental illness
- children and youth who have a clinical diagnosis of serious emotional disturbance and are enrolled or in the process of being enrolled in outpatient services
- children/youth whose ties to family, school or community are threatened or non-existent
- families who have multi-system involvement (for example, mental health and PINS)

How does the SPOA process work?

The first contact with the "Single Point of Access" process is when a service provider, school, hospital, family member or therapist contacts the SPOA coordinator (**452-2372 X 120**) to complete a pre-screening. This determines eligibility for high-risk services. If the child is determined eligible, the child's therapist or other service provider completes an application. Following receipt of the application, the child and family meet with the SPOA coordinator for a comprehensive assessment. The coordinator describes the programs or services that seem appropriate, and makes recommendations to the family. The family decides what they want to do. SPOA makes recommendations and referrals to appropriate Astor home-based and/or community programs. SPOA monitors each child in high-risk services from time of entry through time of discharge.

The home-based services include strength-based family-focused support for diagnosed seriously emotionally disturbed children ages 5 to 18.

The services are as follows:

- **Supportive Case Management (SCM)**
Non-therapeutic in-home support working in conjunction with the service plan being worked on by the family with an outpatient therapist. The supportive case manager provides two face-to-face visits with the child per month, and also helps the family make connections to community services and activities as appropriate.

- **Intensive Case Management (ICM)**
Provides in-home therapeutic support four times per month, crisis contact by phone (9:00 a.m. to 5:00 p.m.), and linkage to community services.
- **Home and Community Based Services Waiver (HCBS Waiver)**
A program that provides intensive team support for the highest-risk children, including in-home therapy, on-call crisis intervention, respite, family support, and skill-building. This team helps the child and family develop the skills and community linkages to facilitate keeping the child in the home.
- **Family Based Treatment (FBT)**
A program in which a child is placed in the care of specially trained foster parents. Services include case management, on-call crisis intervention, psychiatric evaluation, and treatment. Families who want Family Based Treatment must go through a separate screening and approval process in addition to the SPOA process. Parents/guardians retain custody of their child or children.
- **Residential Treatment Facility (RTF)**
Long-term in-patient care for children with diagnosed serious emotional disturbances. Services include intensive treatment by an interdisciplinary team under the direction of a psychologist and psychiatrist. Residential placement must be approved by a State committee and often entails a long review and approval process.

What is Coordinated Children's Services Initiative (CCSI)?

CCSI, part of Astor's Home Based Service Coordination program, is a collaborative effort among families, community agencies and other concerned parties that seeks to prevent out-of-home placement of high-risk children with emotional and or behavioral disabilities through the mental health, juvenile justice, child welfare and education systems and to assist families whose children are returning from residential placement. The goal of this process is to create the structure necessary for effective coordination of community services and enhanced family functioning. This is primarily done via a Network Meeting to maximize family strengths, and offer comprehensive support, systems building and resource sharing.

How does the CCSI process work?

The CCSI Coordinator does a brief telephone screening (**486-9743 X 104**) with referent or self-referred family and determines if the child meets the **basic criteria**:

- Age 5-18
- Emotional, behavior concerns in home, school and/or community
- Risks for removal/placement or returning from placement
- Current service providers are involved.

If the family does not meet criteria, there is an immediate consultation and referral to appropriate community resources. If the child and family meet criteria, a visit is made to the family to assess the possibility of a Network Meeting. If family and CCSI agree, they begin to plan for the Network Meeting

What happens at a Network Meeting?

This is a one-time meeting of the family with a team that consists of representatives from various community agencies such as mental health, child welfare, youth services, and juvenile justice. In addition, the family is encouraged to invite anyone else they feel would be a support to them, such as relatives, therapists, teachers, clergy, or friends.

The goal of the Network Meeting is to acknowledge and appreciate the strengths of the family, to identify the current concerns regarding the child at risk and perhaps other family members, and to work together to create a plan of action for connecting the family to resources that can be of assistance. For instance, if one of the concerns is that a child is having trouble making friends, the team might know about an after school program in which the child could interact with other children her or his age.

After the Network Meeting, the CCSI team stays in contact with the family to be sure that as many of the planned linkages as possible are made. Sometimes other concerns come up for a family after a Network meeting, and those may also be addressed. If a family feels stable and is doing well, CCSI becomes less active in making regular contact, but is available if issues from the plan come up again.

CHILD SAFETY AND CHILD ABUSE PREVENTION

Child Abuse Prevention Center (454-0595)

The **Personal Safety Program** works with pre-school and elementary-aged children in local schools, educating parents and teachers about protecting children from sexual assault.

Internet Safety Workshops use a skit format to offer children, teenagers and adults strategies for avoiding exposure to pornography and for preventing online exploitation of children by pedophiles.

Community Education provides speakers to community groups to raise awareness of child maltreatment and neglect to empower adults to intervene effectively on behalf of children in need. The *Mandated Reporters' Training* offers state certification to mandated reporters of child abuse and refresher courses to groups to update their knowledge in recognizing and reporting child abuse and neglect.

Child Advocacy Center provides a child-friendly center to reduce trauma for child victims and families involved in the investigation of child abuse allegations.

P.A.R.E.N.T.S. is a 22 week parenting program for parents in chemical dependency recovery who have children in out-of-home placements.

Special Needs Parenting provides parenting education classes and intensive case management to parents with developmental disabilities to promote child safety and prevent abuse and neglect.

Parent Empowerment Classes covering topics such as positive discipline and nurturing are conducted in a variety of community settings for at-risk parents.

DUTCHESS COUNTY DEPARTMENT OF SOCIAL SERVICES (DC DSS)

CHILDREN'S SERVICES

60 Market Street

Poughkeepsie, NY 12601

Division Phone:	845-486-3220	Fax:	845-486-3238
Phone Hot Lines:	Child Abuse Hotline	800-342-3720	
	Child Abuse Hotline for Mandated Sources	800-635-1522	
	Child Abuse Hotline for Out of State Calls	518-474-8740	
Division Head and Title:	Debra Bonnerwith, Director of Services	845-486-3012	
	Rick LaVoie, Assistant Director of Services	845-486-3381	
Business Hours:	Monday - Friday 9am - 5pm		
Other Specifics about Business Hours	Child Protective Services Staff provide on call coverage for both case managers and supervisors 24 hours per day, 365 days per year to investigate reports of Child Abuse or Neglect made to the State Central Register.		

The **Children's Services Division** provides numerous services to children and families in Dutchess County, including the following:

1. Child Protective Services
2. Preventive Services
3. Foster Care Services
4. Adoption and Homefinding Services
5. Institutional Care and Detention

The primary mission of Children's Services is to ensure that five main outcomes are achieved by the children and families for whom we provide services. These outcomes are established by New York State:

1. Children are safe.
2. Families are preserved.
3. Children and adolescents have permanency.
4. Child and adolescent developmental needs are met.
5. Adolescents receive independent living training.

In addition to providing direct services to families, we contract with several other public and community agencies which offer services to meet the needs of Dutchess County youth and families. More information about each Children's Services Unit is available in the individual section regarding that unit.

Children's Services/Child Protective Services

Unit Phone:	845-486-3070 845-486-3080	Fax:	845-486-3238
Unit Supervisors:	Colleen Mahoney, Case Supervisor		845-486-3377
	Diane Malone, Case Supervisor		845-486-3383
	Toni McKenzie, Case Supervisor		845-486-3073
	Dave Garcia, Case Supervisor		845-486-3387
	Monica Long, Case Supervisor		845-486-3379

Child Protective Services is responsible for investigations of abuse and/or neglect of children under 18 years of age. Staff are available seven days a week, 24 hours per day to investigate reports received through the **State Central Register for Child Abuse (1-800-342-3720)**.

Case Managers are responsible for making determinations regarding all reports received and referring families for follow up services to keep children safe and reduce the risk of future abuse or neglect. These services may include but are not limited to counseling for children and adults, substance abuse treatment, and/or domestic violence services. Case Managers may also need to file petitions to seek Family Court orders of protection, court-ordered services for the family, and/or authority to place a child in foster care.

Three employees are members on the Dutchess County Child Sexual Abuse Team, which conducts joint Sexual Abuse investigations with police departments and the District Attorney.

The Sex Abuse Team operates out of the Child Advocacy Center (CAC) in the Child Abuse Prevention Center's offices in Poughkeepsie.

DSS helps to fund the CAC and also has a member on a child fatality review team, which is coordinated by the Child Abuse Prevention Center. Here, representatives from various agencies including the District Attorney's Office and the Medical Examiner, review child fatalities that occur in the County.

We also contract with the Child Abuse Prevention Center for a Parent Empowerment Program, community education and information and referral services. Family Services, Inc. is contracted to treat sex abuse perpetrators. Astor provides a contracted treatment team for sexually abused children and for juveniles who have committed sexual offenses. The team provides training in child sexual abuse and treatment modalities for both victims and offenders.

Children's Services/Preventive Services

Unit Phone:	845-486-3241	Fax:	845-486-3238
Unit Supervisor:	Gwen Starstrom, Case Supervisor		845-486-3275

The Preventive Unit is responsible for providing and/or obtaining services necessary to prevent the need for foster care of children. Most referrals to the preventive unit come from Child Protective Services when there have been indicated reports of child abuse or neglect and in-home services are needed. However, the preventive unit also accepts referrals from individuals or agencies in the community and conducts assessments to determine whether mandated preventive services are needed.

Case Managers provide counseling and in-home services to connect families with community agencies which provide long-term services. Staff also provide transportation assistance, day care and homemaking services. Clients are urged to begin treatment for drug or alcohol addictions and emotional problems and to utilize courses in parenting.

In the preventive service arena we also contract with The Astor Home for Children and Abbott House for intensive home-based case management services for families at risk of placing their children in foster care and with Astor for a Coordinated Children's Services Initiative (CCSI). CCSI is a tiered inter-agency project designed to create a comprehensive system of care in Dutchess County. It provides coordination of services to children with emotional or behavioral concerns which put them at risk of out-of-home placement.

Additionally, we contract with the Youth Bureau for preventive case management services for youth in the community or leaving facilities who have school related problems, or drug or alcohol use, which causes the risk of out-of-home placement. We contract with the Probation Department for PINS and JD Diversion and Probation Supervision Services.

In eastern Dutchess County and Beacon, The Dutchess County Community Action Agency provides contracted Case Management Services to families who live in these areas and qualify for mandated preventive services.

Children's Services/Foster Care

Unit Phone:	845-486-3230	Fax:	845-486-3238
Unit Supervisor:	Ann Woolsey, Case Supervisor 845-486-3067		

The Foster Care Unit is responsible for providing case management and direct services to children in foster family homes and their birth families.

Foster Care Case Managers counsel birth parents of children about their need for treatment for drug or alcohol addiction; sexual abuse; emotional disturbance; physical, mental, housing and employment problems and lack of knowledge of child development and parenting techniques.

Workers develop child and family service plans and regularly appear in Family Court. The goal for each child is safe, nurturing temporary care with return to family if possible, or adoption if the family cannot be reunited, or, if neither is possible, and then preparation for independent living or discharge to another resource.

Children are placed either by Child Protective Services, Family Court or by caretakers unable or unwilling to care for their children. A child may be surrendered for adoption at any age prior to 14 (if it is in the child's best interest to be adopted). Some children are placed with relatives as their foster parents.

There are currently over 100 certified foster homes available for Dutchess County children and we continually recruit and need more foster parents. There is a foster parent liaison who assists in sharing information with foster parents and addresses foster parents' needs and concerns. The foster parent liaison is Donna Robinson, who can be reached at 845-486-3076

Children's Services/Adoption and Home-finding

Unit Phone:	845-486-3230	Fax:	845-486-3238
Unit Supervisor:	Theresa Rosencrans, Case Supervisor 845-486-3068		

The Adoption and Homefinding Unit is responsible for recruiting, training and certifying foster and adoptive applicants.

Children available for adoption may be surrendered by their parents for adoption or may be freed for adoption through a Family Court decision to terminate parental rights due to the failure of parents to provide a safe return home for their child in foster care.

Most children available for adoption have been in foster care and are eligible for an adoption subsidy, which is a monthly check similar in amount to Foster Care board checks.

Case Managers supervise placements until the adoption is final and counsel children and adoptive parents. Foster parents are encouraged to adopt children in their homes and many foster parents become adoptive parents; others provide temporary care.

This unit also offers post-adoption services. There is a great need for more foster homes and more adoptive applicants for school age children. Anyone interested in becoming a foster or adoptive parent for Dutchess County children may call 845-486-3068 for more information.

Children's Services/ Institutional Care and Detention

Unit Phone:	845-486-3230	Fax:	845-486-3238
Unit Supervisor:	Elsa Fernandez, Case Supervisor 845-486-3078		

The Institutional Unit is responsible for arranging for detention when this is needed for PINS or JD youth, for providing intake services for children court-ordered into DSS custody through PINS, JD and voluntary placement petitions, and for providing ongoing case management for children placed in institutions, group homes and therapeutic foster homes with which we contract.

The Family Court remands boys and girls ages 7 to 16 to detention settings to await hearings in Family Court on petitions of Juvenile Delinquency (JD) or Persons in Need of Supervision (PINS). A Case Manager/Coordinator supervises the placements, transports children to court hearings and conducts the home studies for new detention homes.

Often the children are placed on an emergency basis directly from court. The police make placements nights and weekends with consent and assistance from the Case Manager.

We contract with the City of Poughkeepsie for secure detention and with Pius XII and Berkshire Farm for non-secure detention beds. Secure detention coordination services are provided by Pius XII through a contract.

MEDICAID/FAMILY HEALTH PLUS
EMERGENCY FINANCIAL ASSISTANCE/FOOD STAMPS

The Dutchess County Department of Social Services provides assistance with the costs of housing, medical care, food and other emergency needs, with eligibility based on income and medical need. There are a variety of programs, with different eligibility requirements. Financial assistance may also include work requirements, participation in a treatment program or the filing of a support petition. **For more specific information, visit the DSS office at 60 Market St., Poughkeepsie, or call 486-3000.**

SOCIAL SECURITY INCOME (SSI)
SOCIAL SECURITY DISABILITY INSURANCE (SSDI)

Supplemental Security Income (SSI) is a program that pays monthly benefits to eligible individuals with disabilities who have limited income and assets. Eligibility requirements must be met and the process is lengthy. Persons eligible for SSI are also eligible for Medicaid and Food Stamps. This program is available to children and adults. For a child, it is based on the parent's income until they are 18, then only the child's income and assets are considered. **Contact the Social Security Administration: 452-3584 or 1-800-772-1213.**

Social Security Disability Insurance (SSDI) is a program that pays monthly benefits to adults who become disabled and have worked long enough to meet the "work credits" requirement. It is also available to children who were disabled before the age of 22 and whose parents are retired, disabled or deceased. **Contact the Social Security Administration, 452-3584 or 1-800-772-1213.**

JUVENILE JUSTICE

PERSONS IN NEED OF SUPERVISION (PINS)

Ages 7-18

What behavior indicates that a parent should consider filing a PINS petition?

If your child seems to be out of your control and engaging in negative behaviors, it is important to seek help early, before your child nears the age of 18. If your child is engaging in any of the following behaviors, you may wish to consider filing a PINS complaint through the Dutchess County Office of Probation and Community Corrections:

Running away

Truancy

Frequently breaking curfew

Frequently defiant - not responding to parental authority

Drug and alcohol use

Of course, many youth display some of these behaviors from time to time, especially during adolescence. However, if your child is frequently or habitually engaging in these behaviors and you believe that he or she is beyond your control, a PINS complaint is one course of action to consider.

Sometimes counseling and other family supports can help improve the situation. An option to consider trying before filing a PINS complaint could be child and family counseling (Helpline referral: 485-9700) or counseling through the Youth Services Unit (486-3660). River Haven offers counseling and emergency housing for runaway teens or teens who can benefit from a "cooling off" period. (454-3600). Another option is to request a Coordinated Children's Services Initiative (CCSI) Network meeting. CCSI works with families whose children are at risk for out of home placement due to behavioral or emotional problems, using a meeting of many participating agencies and family members to create a plan to improve the situation based on the child and family's strengths. (Contact the CCSI Coordinator at 486- 9743 for more information)

How do I file a PINS complaint, if this is what I decide to do?

If you decide to file a PINS complaint, you may contact the Office of Probation and Community Corrections at 486-2600 for an appointment to discuss your concerns. If a PINS complaint is decided upon, a probation officer will gather information about your child. A mental health worker may be part of this process if your child has a history of mental health issues. The information gathered may include family circumstances, school information, medical and psychological history. You and your child may be asked to meet with a member of the **Collaborative Solutions Team** (psychologist, social worker/substance abuse specialist and mediation specialist) to discuss the issues you are concerned about. During that meeting, the Team member and probation officer will discuss with you what steps may be helpful in assisting your child. You will have an opportunity to discuss your thoughts and ideas as well. You and your child may also be

asked to meet together with the entire Team. In the event that your child is missing, or has run away, the PINS complaint may be sent to Family Court immediately.

After the probation officer has drawn up a plan with you, the officer will assist you in meeting the goals. Your child may be supervised for up to six months by a probation officer. The program length is usually 6 months, although it may be shortened or extended based on the needs of the case. This program is called "PINS Diversion" since it is an effort to keep youth out of the formal juvenile justice system (Family Court).

Following this period of time, the case may be closed, if matters have improved, or forwarded to Family Court if they have not.

AS THE PARENT/ COMPLAINANT, you have the right to withdraw the complaint at any time. However, if a school or other party files against your child, they may request court intervention if they believe the matter has not been successfully resolved.

AGENCY CONTACT:

**Dutchess County Office of Probation and Community Corrections
50 Market Street
Poughkeepsie, NY 12601
(845) 486-2600**

JUVENILE DELINQUENCY

A Juvenile Delinquent refers to a person over the age of 7 and less than 16 years of age, who commits an act that would be a crime if committed by an adult. All persons under the age of 16, except in certain rare circumstances involving serious offenses, are within the jurisdiction of the Family Court.

In New York, a person may be arrested and charged as an adult at the age of 16. The law grants Youthful Offender status in certain circumstances for those youth who have not reached their 19th birthday at the time of the alleged offense. At 16, however, a youth may be arrested, detained and sent to jail. Depending on the nature of the alleged offense, an Appearance Ticket may be issued, ROR (Release under Recognizance) granted or bail may be set. An attorney or the Public Defender's Office may give assistance. In order to qualify for the Public Defender, certain income guidelines apply. (For information regarding a Public Defender, you may call 486-2280).

If your child is arrested for an act of Juvenile Delinquency, a police officer will try to contact a parent or legal guardian. In most cases, your child will receive an Appearance Ticket and be released to your custody. * The Appearance Ticket is a written notice that states the alleged offense and the date and time your child must appear at the Dutchess County Office of Probation and Community Corrections. It is very important to keep this appointment, since the matter may be forwarded to the County Attorney's Office if you fail to appear.

When you appear on the appointed date, you and your child will meet with a Probation Officer or Intake Worker. At that time, adjustment, or diversion, of the case may be discussed as an option. You may be asked to provide school and medical records or other documents relating to your child. Adjustment avoids the prosecution of the child in the Family Court. During the adjustment period of up to four months, your child may be required to fulfill certain agreed upon conditions such as reporting to a Probation Officer, regular school attendance, and restitution in the event there is a victim of the offense or participation in an appropriate treatment program. At the end of this time period, successfully adjusted cases are closed and sealed without Family Court involvement.

If adjustment does not take place for any reason, the case will be forwarded to the County Attorney's Office. In this instance, you will be notified of the date and time of the Family Court appearance.

At any time during the above proceedings, you may obtain an attorney. A Law Guardian will be appointed if your child's case goes to Family Court. A Law Guardian is an attorney who represents the child in Family Court. Family Court has exclusive jurisdiction of juvenile delinquency cases.

* In certain situations, such as a designated felony, the law enforcement officer may take the child directly to Family Court or seek detention. Designated felonies are

offenses such as murder or kidnapping. If the police choose to question the child before releasing him or taking him directly to court, then the police will attempt to locate a parent or guardian to be present for questioning. The police may question a child for any act of juvenile delinquency, regardless of the severity of the offense.

What is the parents' role in Family Court?

Parents are expected to be at court with their child and to participate in the proceedings. Parents and the child will be able to express their concerns and recommendations to the Probation Officer, the Law Guardian and the Judge during the process.

The Mental Health Association maintains a support group for parents of youth involved in the juvenile or criminal justice system (Incarcerated Youth Family Support - 473-2500).

For questions or further information regarding Juvenile Delinquency you may contact Dutchess County Probation at 486-2600.

PARENTING & PARENT SUPPORT GROUPS

(Contact people, locations and availability of support groups or classes changes frequently. The **211 information system** maintains listings of local support groups and other helpful referral information).

PARENTING SKILLS

ACTIVE PARENTING OF TEENS - A six-session interactive course to help parents of teenagers develop successful strategies to cope with the challenges of the teen years. DC BOCES BETA. **Contact:** Denise Fortin, 486-4840, X 3051.

BRINGING UP CHILDREN PARENTING CLASS- this 10-session class is sponsored by Family Services, Inc., at the Family Partnership Center. Monday evenings 7-8:30 PM. **Information:** Kim Dangerfield, 452-1110 ext. 3083.

CHADD of Putnam and Vicinity (Children and Adults With Attention-Deficit/Hyperactivity Disorder) Meetings are held on the 1st Tuesday of the month. **Information:** (845) 278-3012

COMMON SENSE PARENTING a six-session workshop for parents interested in gaining additional help with problems they are experiencing at home with children ages 3-18. Program run by staff of Rockland Children's Psychiatric Center. **Information:** 486-3996.

INTENSIVE PARENTING PROGRAM - 18 week class for parents with child protective services or foster care involvement. Program divides into three modules: parents only, children of parents, and parents and children together. Classes held at Family Services, Inc., Poughkeepsie. **Information:** Rose Marie Struk, 452-1110 x3409.

PARENT EMPOWERMENT CLASSES - Provides support, information, resources and referrals. Parenting classes are conducted at schools, community centers and PTA meetings, as well as in prisons and rehab centers for at-risk parents, and cover such topics as positive discipline and nurturing. **Information:** Child Abuse Prevention Center, 454-0595.

PARENTS WHO CARE uses a workshop format to help parents of children ages 12-16 address the challenges of adolescence, strengthen family management and increase teen resistance to engaging in problem behavior such as substance use. **Information:** Choices for Change, 471-0194.

PARENT SKILL BUILDING WORKSHOPS provided by the YWCA covering a range of topics including family meetings, parenting styles, communication. **Location:** Castleland Day Care Center. **Information:** 452-4937.

PARENT WORKSHOPS for parents of children ages 2-12. Hopewell Junction location. **Information:** Ellen Mitchell, Happy Hearts Preschool, 226-2745.

FAMILIES THAT CARE: GUIDING GOOD CHOICES using discussion and video tapes, this program teaches parents of children in upper elementary and middle school (grades 4-8) how to reduce their child's risk for substance use, decrease family conflict and increase children's

involvement in positive family activities. This 5-session program is available to families in the Southern Dutchess Area. **Information: Choices for Change, 471-0194**

TEEN PARENT PARENTING CLASSES – Free classes for women under 21 who are pregnant or parenting. **Information Family Services, Inc.: 452-1110.**

PARENT SUPPORT

H.O.P.E. (Helping Others Through Personal Experiences) for FAMILIES offers support and services to families with a child experiencing social, emotional or behavioral difficulties. Free child care for ages 4-13, respites services and sibling and youth support groups available. For information about HOPE for Families support groups in Poughkeepsie, Hyde Park, Hopewell Junction, Beacon and Dover Plains. **Information: 473-2500.**

MOMS GROUP – Meets at Fishkill Baptist Church, Rte. 82, 9:15-11:15 AM Thursdays. Child care provided. **Information: 896-9386.**

MOMS NETWORK – A local chapter of Moms Network, an organization for work-at-home mothers, meets monthly in Poughkeepsie area. **Information: 485-7221.**

NEW PARENT SUPPORT – Jewish Community Center holds new parents' "stroll-in" for support and guidance, from 9:30-11:00 AM, Thursdays. Early childhood specialist facilitates. **Information: 471-0430.**

PARENTS OF TEENS – **ParentTeen**, support and education for parents, guardians, grandparents. Meets 1st and 3rd Tuesdays, 6:30-8:30 PM at VFW, 8 School St. Wappingers Falls. **Information: 463-2667 or 266-7764.**

PLAY GROUP/ PARENT SUPPORT – Informal support/ play group for babies through age 5 is sponsored by Northern Dutchess Hospital from 10 AM-Noon, Thursdays, facilitated by early-childhood educator. \$3. class fee. **Information: 871-3500.**

SUPPORT FOR PARENTS – Catherine Street Community Center in Poughkeepsie offers weekly meetings, 6:30-7:30 PM Tuesdays, for parents to discuss parenting and adult issues. Child care available. Programs in English and Spanish. **Information: 473-2272.**

SPECIAL ISSUES PARENTING

CHADD – Support group for parents of children with Attention Deficit Disorder. Meets 7:30 PM, first Monday of the month in Poughkeepsie at the St. Francis Hospital Cafeteria. \$2. fee for non-members. **Information: Diane Mueller, 246-9727.**

FAMILIES WITH CHILDREN FROM CHINA PLAY GROUP/SUPPORT – Group and parent discussion, 10:00 AM- Noon, fourth Saturday of the month at Quaker Meeting House, 249 Hooker Ave., Poughkeepsie. **Information: 223-7246 or 895-3580.**

FAMILY TIES SUPPORT GROUP FOR PARENTS WITH CHILDREN ON THE AUTISTIC SPECTRUM – Meetings are held on the 1st and 3rd Monday of each month from 7:00-8:30 at

Family Ties Peekskill Resource Center, 929 South Street, Peekskill, NY 10566. Free Babysitting Available. **Information:** (914) 739 4725.

GRANDPARENTS RAISING GRANDCHILDREN Support and Education Group. Meets every 3rd Thursday of the month in Fishkil on Bedford Ave. **Information:** **Maria R. at 896-8582.**

HUDSON VALLEY SUPPORT FOR FAMILIES WITH BIPOLAR CHILDREN - a support and discussion group for family members whose children have a bipolar diagnosis. The Poughkeepsie group meets the second Saturday of the month, 10 AM- 12 Noon, at St. Francis Hospital. **Information:** **473-2500, ext. 316.**

KIDS AFFECTED BY DISABILITIES - Support network for families who have children with physical disabilities. Stress management support group meets 10:00 AM-12 Noon, first Saturday of the month at Vassar Medical Center Conference Room. **Information:** **229-0785.**

MANAGING DEFIANT BEHAVIOR - a 9-session skill-building series for parents of children ages 2-11. Offered once a year. Limited enrollment. Suggested donation: \$35. per family. Offered Monday evenings, 7-9 PM. Mental Health Association. **Information:****845 473-2500 ext.309**

MOTHERS OF MULTIPLES a group for moms of twins, triplets and quadruplets, meets 7:30 PM, second Wednesday of the month at Vassar Brothers Medical Center, Poughkeepsie. **Information:** **691-4212.**

PARENTS OF CHILDREN WITH AUTISM meets every Tuesday, 8-10 PM for Moms, except the second Tuesdays, which are for Dads at The Parents Place, 3 Carhart Avenue, White Plains, NY. **Information:** **The Parents Place (914) 948-5187** or the website: www.parentsplaceinc.org

PARENTS OF INCARCERATED YOUTH - This support group is for parents whose child has been involved with the criminal justice system - jail, prison or a residential youth correctional facility. **Information:** **473-2500.**

PARENTING "THE EXPLOSIVE CHILD" - A 6 session skill-building series. Offered as a sequel to "Managing Defiant Behavior" by the Mental Health Association. **Information:****473-2500, ext. 309**

PARENTS TOGETHER FOR ADD - Free support group for parents of children with Attention Deficit Disorder. Meets 7:30-9:30 PM fourth Monday of the month at Mental Health Association in Ulster County, 221 Tuytenbridge Rd., Lake Katrine. **Information:** **336-4747.**

PFLAG - Parents, Families and Friends of Lesbians and Gays of the Mid-Hudson area helps families confidentially, as well as the community, to understand homosexuality has been disbanded, due to lack of interest. Groups continue in the Westchester and Albany areas. For further information, check www.pflag.org.

POST ADOPTION SUPPORT GROUP- Abbott House Post Adoption Resource Center sponsors a monthly support group for parents who have adopted or are in the process of adopting foster and other children with special needs. Meets 2nd Thursday of each month at Abbott House, 205 South Ave., Poughkeepsie. Concurrent children/teens group. Child Care provided. Other services include counseling, parent education, educational advocacy and community resource linkage. **Information: 457-5030, ext. 3505.**

RELATIVES AS PARENTS PROGRAM (RAPP) - Cornell Cooperative Extension. works with older adults and other relatives caring for grandchildren, nieces, nephews, etc. Program provides counseling, advocacy and seminars on the first Wednesday of every month at 6:00-7:30 PM at the Family Partnership Center, 29 N. Hamilton St., Poughkeepsie and in Beacon from 10:00-11:30 AM at the Howland Library, 313 Main St. **Information: 677-8223 ext. 137.**

SENSORY PROCESSING DISORDER PARENT CONNECTIONS OF DUTCHESS COUNTY - Parent-led group discussions, education, connection to local resources, support and understanding for parents of a child with SPD or related disorder (ADHD, Autism) 3rd Wednesday of every month, 6-8 PM New Hackensack Reformed Church, Rte. 376 & New Hackensack Rd. **Information: Linda, 452-9393 or swbo101@optionline.net.**

SPECIAL NEEDS PARENTING - Provides parenting education and intensive case management to parents with developmental disabilities, to develop such basic parenting skills as child safety, nutrition, health, and development. **Information: Child Abuse Prevention Center, 454-0595.**

TRANSPARENTING (Formerly: Helping Children Cope) - a four-hour seminar for parents going through divorce or separation. The seminar is designed to teach effective parenting during this difficult time. **Information: 452-1110.**

CHILD CARE & AFTER SCHOOL PROGRAMS

The **Child Care Council of Dutchess County** is the primary provider of information and referral about day care and after school programs throughout the county. The Child Care Council provides information to families and support to day care centers, family day care homes, group family day care, school age child care and informal day care providers. The Council also provides training for providers in establishing and maintaining the day care setting in keeping with NYS regulations.

A small number of providers are experienced in and willing to work with children with special needs. However, children with significant behavior problems are sometimes difficult to place. Parents should consult the **Child Care Council at 473-4141** for more specific guidance about day care resources.

DAY CARE SUBSIDIES FOR LOW INCOME FAMILIES

Low-income families may be eligible for funds to subsidize the cost of child care. Currently, a family at 200% of the poverty level can qualify (e.g. an income of \$22,880. for a family of 2). Families interested in further information and to apply for subsidies should contact the **Department of Social Services, Subsidy Unit at 486-3000.**

AFTER SCHOOL & SUMMER PROGRAMS

Beacon Community Center 23 West Center Street Ages: 5-12 (maybe 13 yrs if special need) 3pm-6pm Fee: Suggested donation of \$70 for the school year	831-6180
Big Brothers/Big Sisters Dutchess County Community Action Agency 84 Cannon Street	452-5104
Catherine Street Community Center 69 Catherine Street, Pok, NY Monday-Friday 2:30pm-5:30pm Grades K-5	473-2272
Children's Media Project	485-4480
Cornell Cooperative Extension Green Team Community Gardening Program; Community Food Project (PHS); Sharing Places Day Camp	485-2564
Dutchess Arts Camp	471-7477
Dutchess County Youth Bureau	486-3662/3660

Project Return - for at-risk youth & youth returning from residential placement

Explorer Post Ages 14-20 Careers in Law Enforcement	451-4000
Family Services, Inc. Teen Resource and Activity Center (TRAC) Family Partnership Bldg. Ages 13-18	452-1110
Summer Stars Family Partnership Center Arts, reading, writing & recreation for middle school youth.	452-1110
Hudson Valley Town of Poughkeepsie Pop Warner	452-2471
Liberty Partnership Program (Marist College and Pok. CSD) 29 N. Hamilton St., Pok. Academics and homework assistance. 5 th - 12 th grade in sponsored schools (Poughkeepsie CSD)- no fee	454-4199
Martin Luther Cultural Center Beacon Summer and after school programs - homework assistance, fine arts, performing arts basketball after school program	831-9887
Mental Health Association Teen Challenge for youth with emotional disabilities Poughkeepsie Ages 13-18	473-2500
Mill Street Loft Project Able	471-7477
Northeast Community Center	
Raising the Roof - Webutuck Elementary School Joan Johnson	(518) 789-4259
Nubian Directions Main Mall, Poughkeepsie Robert Wright, African American Mens Association 6 th grade and up, 2 days a week Computer lab, help w/ homework, Music- desire to learn guitar, piano, rap, and congas	452-8574

Officer Joe Gatewood-School Resources 451-4800
Poughkeepsie Middle School, 6th grade and up
Boxing- After school on Monday

Poughkeepsie's Promise After School Programs 451-4703
Clinton Elementary School
Krieger Elementary School
Columbus Elementary School
Poughkeepsie Middle School
Poughkeepsie High School

Salvation Army 471-1210
Pershing Ave, Poughkeepsie
Boys Club, Art Projects, Basketball games

Vassar College Boys and Girls Swim Camp 437-5904

YMCA 471-9622
Eastman Park, Pok, NY
City Club I & II
Ages 10-17, 3:15 pm-5:15 pm, recreation, homework assistance, tutoring, sports

School-based after school programs: Rhinebeck, Arlington, Wappingers and Poughkeepsie

Spratt Park Day Camp - ages 4-12
Adventure Camp - ages 4-12
Wa Wa Segowea - sleep away camp in Massachusetts

TOWN/CITY RECREATION DEPARTMENTS & SUMMER PROGRAMS

City of Poughkeepsie	451-4000
Town of Poughkeepsie	485-3628
Hyde Park	229-8086
Red Hook	758-3561
Rhinebeck	876-6161
Beacon	838-5024
LaGrange	452-1972
Fishkill	831-7800
East Fishkill	226-8395
Millbrook	677-8278
Pawling	855-1131
Pleasant Valley	635-5598
Unionvale	724-5460
Wappingers Falls	297-0720

(Fees may apply.)

HEALTH SERVICES - DC DEPARTMENT OF HEALTH

Maternal and Child Home Visiting Program - Comprehensive, home-based services to families, starting in pregnancy or after a child is born. Home visits provide education, support and case management help parents meet the challenges of parenting and assure the health development of children. **486-3419**

Early Intervention Program - Families with infants and toddlers who have special needs may be eligible to receive services to enhance the child's growth and development. **486-3518**.

Preschool Special Education Program - Services are provided for children with special needs, ages 3-5, in conjunction with the family's school district. **486-3416**.

Childhood Lead Poisoning Prevention Program - Public Health Nurses provide individual case management and follow-up to children with elevated blood lead levels. Community education and outreach environmental investigations are also available. **486-3419**.

Childhood Immunization Clinics - Clinics are held at sites throughout the county on specific days each month with no fee for service. Children under 18 years of age must be accompanied by a parent or guardian. All participants should bring with them any previous immunization records. **486-3409**.

Sexually Transmitted Infections (STI) Program - Testing, diagnosis and treatment of sexually transmitted infections is available twice a week. All services are free, confidential and available without appointment. Free hepatitis B vaccine is available to all clinic patients. Referrals are made for persons needing additional services. **486-3401**.

HIV Program - HIV counseling and testing is available by appointment or walk-in. All testing is free of charge and both anonymous and confidential testing is offered. On-site educational presentations, with or without testing are available for schools and community groups. Partner Notification Assistance Program is available to persons living with HIV/AIDS who want to inform partners of possible exposure to HIV. **486-3401**.

Health Education Programs - Health education is provided on request to any group, from preschool to seniors - age appropriate, culturally sensitive and tailored to meet specific needs, e.g. basics of good nutrition, teen pregnancy prevention, parenting, tobacco education, etc. **486-3421**.

Home Health Care Programs - Certified Home Health Agency- Services for homebound individuals under the care of a physician including skilled nursing, case management, physical, occupational and speech therapies, Home Health Aide services; assistance with medical supplies and equipment. **838-4800 or 677-4000**.

Physically Handicapped Children's Program - financial assistance program to parents of physically handicapped children. There are eligibility requirements that include both financial and physically handicapping conditions. **486-3409**.

ACRONYMS

A

AA	Alcoholics Anonymous
AACAP	American Academy of Child and Adolescent Psychiatry
ACOA	Adult Children of Alcoholics
ACSW	Academy of Certified Social Workers
ACT	Assertive Community Treatment
ADA	Americans with Disabilities Act
ADD	Attention Deficit Disorder
ADHD	Attention Deficit Hyperactivity Disorder
ADT	Adolescent Day Treatment (Astor/BOCES)
AIDS	Acquired Immune Deficiency Syndrome
AIOP	Adolescent Intensive Outpatient Program (St. Francis Hospital)
ALANON	Organization of relatives and friends whose lives have been affected by the alcoholism of another
ALATEEN	Organization of teen children of alcoholics
AMA	American Medical Association
AMI	Alliance for the Mentally Ill
APA	American Psychological Association or American Psychiatric Assn.
APS	Adult Protective Services
ARC	Association for Retarded Citizens
ARCS	AIDS Related Community Services
ASA	Alcohol and Substance Abuse
ASAP	As soon as possible
ATOD	Alcohol, tobacco and other drugs

B

BD	Bipolar Disorder
BETA	BOCES Education and Training Academy
BID	Twice a day (usually 12 hours apart)
BOCES	Board of Cooperative Educational Services
BSW	Bachelor of Social Work

C

CAC	Child Advocacy Center
CAMI	Chemical Abuser/ Mentally Ill
CASAC	Certified Alcohol and Substance Abuse Counselor
CASSP	Child and Adolescent Service System Program
CAT (scan)	Computerized Axial Tomography
CCF	Council on Children and Families or Congregate Care Facility

CCSI	Coordinated Children's Services Initiative
CD	Chemical Dependency
CD	Conduct Disorder
CDT	Continuing Day Treatment
CFC	Choices for Change
CMHC	Community Mental Health Center
CMI	Chronically Mentally Ill
CM	Case Management
CNS	Central Nervous System
CNP	Clinical Nurse Practitioner
COLA	Cost of Living Adjustment
CP	Cerebral Palsy
CPEP	Comprehensive Psychiatric Emergency Program
CPS	Child Protective Services
CQC	Commission on Quality of Care
CR	Community Residence
CRC	Certified Rehabilitation Counselor
CR/SRO	Community Residence/ Single Room Occupancy
CSC	Children's Services Council
CSE	Committee on Special Education
CSW	Certified Social Worker
CTC	Continuing Treatment Center or "Communities that Care" community mobilization prevention model or Community Transitions Center

D

DARE	Drug Abuse Resistance Education
DART	Domestic Abuse Response Team
D/ART	Depression/ Awareness, Recognition and Treatment
DBD	Disruptive Behavior Disorders
DCCAA	Dutchess County Community Action Agency
DCCACD	Dutchess County Council on Alcoholism and Chemical Dependency
DCJ	Dutchess County Jail
DD	Developmental Disability
DDSO	Developmental Disability State Office
DIB	Disability Insurance Benefits
DMH	Department of Mental Hygiene
DOA	Date of admission
DOB	Date of birth
DOCS	Department of Correctional Services
DOD	Date of discharge
DOH	Department of Health
DRG	Diagnosis Related Group
DSM-IV	Diagnostic and Statistical Manual of Mental Disorders
DSS	Department of Social Services

DT's Delirium tremens

E

EA Emotions Anonymous
ECT Electro-convulsive Therapy
ED Emotionally Disturbed
Ed.D Doctorate of Education
EEG Electroencephalogram
EIP Early Intervention Program
EKG/ECG Electrocardiogram
EPCC Emergency Psychiatric Care Center (St. Francis Hospital)
ER Emergency Room

F

FAMI Friends and Advocates of the Mentally Ill
FAPE Free and Appropriate Public Education
FBT Family Based Treatment
FDC Family Development Credentialing
FTNYS Families Together in NY State

G

GAD Generalized Anxiety Disorder
GAF Global Assessment of Functioning

H

HBCI Home-Based Crisis Intervention
HCBS Home and Community-Based Services Waiver Program
HHS U.S. Department of Health and Human Services
HMO Health Maintenance Organization
HRF Health Related Facility
HRH Hudson River Housing
HRPC Hudson River Psychiatric Center
HRFO Hudson River Field Office (OMH)
HS At bedtime (hour of sleep)
HSA Health Systems Agency
HUD U.S. Department of Housing and Urban Development

I

I&R Information and referral

ICF	Intermediate Care Facility
ICM	Intensive Case Management
ICP	Integrated County Plan
ICU	Intensive Care Unit
IDEA	Individuals with Disabilities Education Act
IDT	Intensive Day Treatment (RCPC - Poughkeepsie)
IEP	Individualized Education Plan
ILC	Independent Living Center
IM	Intra-muscular injection
IPRT	Intensive Psychiatric Rehabilitative Treatment
IRA	Individual Residential Alternative
IQ	Intelligence quotient
IV	Intravenous injection

J

JCAHO	Joint Commission on the Accreditation of Healthcare Organizations
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L

LCSW	Licensed Clinical Social Worker
LD	Learning Disability
LGP	Local Government Plan
LGU	Local Government Unit
LPN	Licensed Practical Nurse
LRE	Least restrictive environment

M

MADD	Mothers Against Drunk Driving
MBD	Minimal Brain Dysfunction
MD	Medical Doctor
MHA	Mental Health Association
MHTA	Mental Health Therapy Aide
MI	Mentally Ill
MICA	Mentally Ill Chemical Abuser
MI/MR	Mentally Ill/ Mentally Retarded
MMPI	Minnesota Multi-phasic Personality Inventory
MPD	Multiple Personality Disorder
MPH	Master of Public Health
MR	Mental Retardation
MSW	Master of Social Work

N

NA	Narcotics Anonymous
NAMI CAN	National Alliance for the Mentally Ill/ Children and Adolescents

NARANON	Network
NASW	Organization for relatives and friends of substance abusers
NBD	National Association of Social Workers
NBA	Neurobiological Disorders
NIH	Neighborhood Based Alliance
NIMH	National Institutes of Health
NYAPRS	National Institute of Mental Health
	New York Association of Psychiatric Rehabilitation Services

O

OASAS	Office of Alcoholism and Substance Abuse Services
OBS	Organic Brain Syndrome
 OCD	Obsessive Compulsive Disorder
OD	Overdose
OMH	Office of Mental Health
OMRDD	Office of Mental Retardation and Developmental Disabilities
OR	Operating room
OT	Occupational therapy (or therapist)
OCFS	Office of Children and Family Services

P

PACC	Pre-Admission Certification Committee
PCP	Primary care physician
PDD	Pervasive Developmental Disorder
PDR	Physicians' Desk Reference
PEOPLE	Projects to Empower and Organize the Psychiatrically Labeled
PH	Partial Hospitalization
PINS	Person in Need of Supervision
PPHA	Private Proprietary Home for Adults
PO	Probation Officer/ Parole Officer
PPO	Preferred Provider Organization
PRN	Medicate as Needed (when necessary)
PTSD	Post Traumatic Stress Disorder

Q

Q	Every
QD	Once a day
QID	Four times a day (usually six hours apart)

R

RCPC	Rockland Children's Psychiatric Center
RFP	Request for Proposal

RHCF Residential Health Care Facility
RN Registered Nurse
RPC Rockland Psychiatric Center
RSS Rehabilitation Support Services

S

SAC Student Assistance Counselor
Substance Abuse Clinic
SAD Seasonal Affective Disorder
SADD Students Against Drunk Driving
SAMHSA U.S. Substance Abuse and Mental Health Administration
SCM Supportive Case Manager
SED Serious Emotional Disturbance or
State Education Department
SETRC Special Education Training and Resource Center
SFH St. Francis Hospital
SH Supported Housing or
Supportive Housing
SNF Skilled Nursing Facility
SOCR State-Operated Community Residence
SPOA Single Point of Access (for High Risk Children's Services)
SPOE Single Point of Entry (for Adult Housing; for Adult Case Management)
SPMI Seriously and Persistently Mentally Ill
SRO Single Room Occupancy or
School Resource Officer
SSA Social Security Administration
SSD Social Security Disability
SSDI Social Security Disability Income
SSI Supplemental Security Income
STAT Medicate immediately
STEP Systematic Training for Effective Parenting

T

TA Therapy Aide or
Transactional Analysis
TBI Traumatic Brain Injury
TD Tardive Dyskinesia
TFH Teaching Family Home
TID Three times a day (usually 8 hours apart)
TRI Taconic Resources for Independence
TSP Transitional Services Program

U

UCR Uniform Case Record

URC

Utilization Review Committee

V

VA

Veterans' Administration

VBH

Vassar Brothers' Hospital

VESID

Vocational and Educational Services for Individuals with Disabilities

VR

Vocational Rehabilitation

W

WIA

Workforce Incentive Act

WIB

Workforce Incentive Board

WIC

Women, Infants and Children Feeding Program

WIN

Work Incentive Program

WAIS

Wechsler Adult Intelligence Scale

WISC

Wechsler Intelligence Scale for Children

WEBSITES
INFORMATIONAL WEBSITES

http://www.ci.nyc.ny.us/html/acs/home.html	Administration for Children's Services - has an excellent handbook of rights for children and parents
www.bygirlsforgirls.org	By Girls for Girls
www.nycareerzone.org	Career Zone
www.caregiver.com	Articles on Caregiver Issues
www.childrenwithdisabilities.ncjrs.org/	Children with Disabilities
http://www.connectforkids.org/	Connect for Kids (Annie E. Casey Foundation)
http://www.capital.net/com/council/	NY State Council on Children and Families
www.ftnys.org	Families Together in New York State
www.ffcmh.org	Federation of Families for Children's Mental Health
http://www.hip.midhudson.org	Library information & health websites
www.lawhelp.org/NY	Helps low-income NY'ers solve legal problems
www.ncset.org	National Center on Secondary Education and Transition
www.nichcy.org	National Information Center for Children and Youth with Disabilities
www.nmha.org	National Mental Health Association
www.vesid.nysed.gov	New York State Education Department - Vocational and Educational Services for Individuals with Disabilities
www.pacer.org	PACER (children and young adults with disabilities)
http://www.parenttoparentnys.org/ HUDSON.htm	Parent to Parent in NY State
www.emsc.nysed.gov/workforce/stw/involve.html	School to Work Programs
http://www.safeyouth.org/home.htm	Youth Violence Prevention
www.aacap.org	American Academy of Child and Adolescent Psychiatry ("Facts for Families")

WEBSITES FOR AGENCIES SERVING DUTCHESS COUNTY

http://www.armsacres.com/	Arms Acres (Liberty Management)
www.astorservices.org	Astor Home for Children
http://www.dcchildrensservicescouncil.org/	Children's Services Council
http://www.dcboces.org/index.php	Dutchess County BOCES
http://www.dccaa.org/	Dutchess County Community Action Agency
http://www.dccacd.org/	Dutchess County Council on Alcoholism and Chemical Dependency
http://www.co.dutchess.ny.us/	Dutchess County Online (links to county agencies)
http://www.dutchessoutreach.org/sitemap.htm	Dutchess Outreach
http://www.familypartnershipcenter.org/	Family Services
http://www.fourwindshospital.com/	Four Winds Hospital
http://www.hudsonriverhousing.org/	Hudson River Housing
http://www.dutchessmediation.org/	The Mediation Center
http://www.mhadc.com/	Mental Health Association in Dutchess County
http://www.omh.state.ny.us/	NYS Office of Mental Health
http://www.saintfrancishospital.com/	St. Francis Hospital
http://www.omr.state.ny.us/ddso/taconic/resource/hp_nyrgtact.jsp	Taconic Developmental Disabilities Services Office
www.taconicresources.net	Taconic Resources for Independence - Disability Links - on-line Parent Resource guide
http://www.unitedwaydutchess.org/findhelp.html	United Way Dutchess

C.C.S.I. SERVICE PROVIDERS

The Astor Home for Children

Residential Programs

The Astor Home

36 Mill St.
Rhinebeck, NY 12572
(845) 876-4081

Foster Care Programs

13 Mt. Carmel Place
Poughkeepsie, NY
(845) 452-6293

Community-Based Programs

**High Risk Service Coordination
(CCSI & SPOA)**

46 Lincoln Avenue
Poughkeepsie, NY 12601
(845) 486-9743

Intensive Home-Based

46 Lincoln Avenue
Poughkeepsie, NY 12601
(845) 452-2372

**Administration - Community-
Based Services**

13 Mt. Carmel Place
Poughkeepsie, NY 12601-1714
(845) 452-5952

Adolescent Services

900 Dutchess Turnpike
Poughkeepsie, NY 12601
(845) 486-4940

Family Court Evaluation Service

50 Market St.
Poughkeepsie, NY 12601
(845) 486-2543

Day Treatment

29 North Hamilton St.
Poughkeepsie, NY 12601
(845) 485-8901

Counseling Services

Poughkeepsie
46 Lincoln Avenue
Poughkeepsie, NY 12601
(845)471-6004

Beacon

223 Main St.
Beacon, NY 12508
(845) 838-4920

Red Hook

30 Benner Road
Red Hook, NY 12571
(845) 758-0241

Millbrook

Oak Summit Road
Millbrook, NY 12545
(845) 677-4050

Wassaic

3620 Route 22
Wassaic, NY 12592
(845) 877-6200

Wappinger Falls

5 Givens Avenue
Wappinger Falls, NY 12598
(856) 297-1214

Dutchess County Attorney's Office
22 Market St.
Poughkeepsie, NY 12601
(845) 486-2110

Dutchess County BOCES
900 Dutchess Turnpike
Poughkeepsie, NY 12603
(845) 486-4840

Dutchess County Community Action Agency
84 Cannon Street
Poughkeepsie, NY 12601
(845) 452-5104

Dutchess County Health Department
387 Main St.
Poughkeepsie, NY 12601
(845) 486-3400

Dutchess County Department of Mental Hygiene
230 North Road
Poughkeepsie, NY 12601
(845) 485-9700

Dutchess County Office of Probation and Community Corrections
50 Market St.
Poughkeepsie, NY 12601
(845) 486-2600

Dutchess County Department of Social Services
60 Market St.
Poughkeepsie, NY 12601
(845) 486-3000

Dutchess County Youth Bureau
27 High Street
Poughkeepsie, NY 12601
(845) 486-3660

F Family Services, Inc.
29 North Hamilton St.
Poughkeepsie, NY 12601
(845) 452-1110

F Four Winds Hospital
800 Cross River Road
Katonah, NY 10536
1-800-546-1770

River Haven Shelter
45 Catherine St.
Poughkeepsie, NY 12601
(845) 454-3600

Hudson River Housing/ River Haven Independent Living
305-307 Mill St.
Poughkeepsie, NY 12601
(845) 454-2300

(

R Liberty Management/Arms Acres
Seminary Hill Rd.
Carmel, NY 10512
1-800-989-2008

The Mediation Center
29 North Hamilton St.
Poughkeepsie, NY 12601
(845) 471-7213

Mental Health Association in Dutchess County (eff.4/07)
253 Mansion Street
Poughkeepsie, NY 12601
(845) 473-2500

St. Francis Hospital
241 North Road
Poughkeepsie, NY 12601
(845) 483-5000

Taconic Developmental Disabilities State Office
38 Fireman's Way
Poughkeepsie, NY 12601
(845) 471-9226