

**APPENDIX G-1
CHILD CARE SECTION
DATED 2007-2009**

County: Allegany

I. Administration (Required Section)

Describe how your district is organized to administer the child care program including any functions that are subcontracted to an outside agency.

1. Identify the unit that has primary responsibility for the administration of child care for:

Public Assistance Families: **Child Assistance Program (CAP)**

Transitioning Families: **Child Assistance Program (CAP)**

Income Eligible Families: **Child Assistance Program (CAP)**

Title XX: **Child Assistance Program (CAP)**

2. Indicate the use of New York State Child Care Block Grant (NYSCCBG) Funds.

Total NYSCCBG Amount: **\$1,048,944**

A. Subsidy	\$946,829
B. Other program costs (excluding subsidy)	\$102,115
C. Administrative costs	\$93,948

3. Does your district have a contract or formal agreement with another organization to perform any of the following functions?

<u>Function:</u>	<u>Organization:</u>	<u>Amount of Contract:</u>
<input type="checkbox"/> Eligibility screening		
<input type="checkbox"/> Screening of legally-exempt providers		
<input checked="" type="checkbox"/> Assistance in locating care	ACCORD Corporation – CCR&R Day Care Registration	\$101,500
<input type="checkbox"/> Child Care Information Systems		
<input type="checkbox"/> Other		

APPENDIX G-2

II. Other Eligible Families if Funds are Available (Required Section)

Listed below are optional categories of eligible families that your district can include as part of its ICP. Select any categories your district wants to serve and describe any limitations associated with the category.

Optional Categories	Option	Limitations
1. Public Assistance (PA) families participating in an approved activity in addition to their required work activity.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
2. PA families or families with income up to 200% of the State Income Standard when the caretaker is:		
a) participating in an approved substance abuse treatment program	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
b) homeless	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
c) a victim of domestic violence	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
d) in an emergency situation of short duration	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
3. Families with an open child protective services case when child care is needed to protect the child.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
4. Families with income up to 200% of the State Income Standard when child care services are needed because the child's caretaker:		
a) is physically or mentally incapacitated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
b) has family duties away from home	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
5. Families with income up to 200% of the State Income Standard when child care services are needed for the child's caretaker to actively seek employment for a period up to 6 months.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

<p>6. PA families where a sanctioned parent is participating in unsubsidized employment, earning wages at a level equal to or greater than the minimum amount under law.</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>7. Families with income up to 200% of the State Income Standard when child care services are needed for the child's caretaker to participate in:</p>		
<p>a) a public or private educational facility providing a standard high school curriculum offered by or approved by the local school district</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>b) an education program that prepares an individual to obtain a NYS High School equivalency diploma</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>c) a program providing basic remedial education in the areas of reading, writing, mathematics, and oral communications for individuals functioning below the ninth month of the eighth grade level</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>d) a program providing literacy training designed to help individuals improve their ability to read and write;</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>e) English as a second language (ESL) instructional program designed to develop skills in listening, speaking, reading and writing the English language for individuals whose primary language is other than English</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>f) a two year full-time degree granting program at a community college, a two year college, or an undergraduate college with a specific vocational goal leading to an associate degree or certificate of completion</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>g) a training program, which has a specific occupational goal and is conducted by an institution licensed or approved by the State Education Department other than a college or university</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>h) a prevocational skill training program such as, a basic education and literacy training program</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

<p>i) a demonstration project designed for vocational training or other project approved by the Department of Labor.</p> <p>The parent/caretaker must complete the selected programs listed under number seven within 30 consecutive calendar months. The parent/caretaker cannot enroll in more than one program.</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>8. PA recipients and low income families with incomes up to 200% of the State Income Standard who are satisfactorily participating in a two-year program other than one with a specific vocational sequence (leading to an associates degree or certificate of completion and that is reasonably expected to lead to an improvement in the parent/caretaker's earning capacity) as long as the parent(s) or caretaker is also working at least 17 ½ hours per week. The parent/caretaker must demonstrate his or her ability to successfully complete the course of study.</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>9. PA recipients and low income families with incomes up to 200% of the State Income Standard who are satisfactorily participating in a four-year college or university program (leading to a bachelor degree and that is reasonably expected to lead to an improvement in the parent/caretaker's earning capacity) as long as the parent(s) or caretaker is also working at least 17 ½ hours per week. The parent/caretaker must demonstrate his or her ability to successfully complete the course of study.</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

APPENDIX G-3

III. Reasonable Distance, Very Low Income, Definition of Engaged In Work For Child Care In Lieu of Temporary Assistance, Family Share, Case Closings and Openings, and Fraud and Abuse Control Activities (Required Section)

Reasonable Distance

Your district is required to define reasonable distance based on community standards for determining accessible child care.

The following defines "reasonable distance": 50 miles

Describe any steps/consultations made to arrive at your definition: Information was obtained as to geography (1030 square miles in the county) and population density (49 persons/square mile) to help us determine our definition. Legal notices were published in the past concerning our definition and we received no responses.

Very Low Income

Very Low Income is defined by each district and is used in determining priorities for child care benefits.

Very Low Income is defined as **200%** of the State Income Standard.

Definition of Engaged In Work For Child Care In Lieu of Temporary Assistance

The minimum number of hours for Federal Fiscal Year 2006 are:

- 20 hours for a single parent with a child under the age of six years old
- 30 hours for a single parent whose children are six years of age and older
- in two parent families the parents must be working a combined total of 55 hours with at least one parent working 30 or more hours.

If a district proposes a higher minimum number of required hours of work describe the requirement below.

- hours for a single parent with a child under the age of six years old
- hours for a single parent whose children are six years of age and older
- in two parent families the parents must be working a combined total of 55hours with at least one parent working or more hours.

Family Share

Family share is the weekly amount paid towards the costs of the child care services by the child's parent or caretaker. In establishing family share, your district must select a percentage from 10% to 35% to use in calculating the family share. The family share of child care is calculated by applying the family share percentage against the amount of the family's annual gross income that is in excess of the State Income Standard divided by 52.

Family Share Percentage selected by our district **20%**.

Case Closings (select one or two)

1. The district must describe below how priority is given to federally mandated priorities and describe local priorities. If all NYSCCBG funds are committed, the district will discontinue funding to those families that have lower priorities in order to serve families with higher priorities, which are those children with special needs and those families with very low income. Described below is how the district will select cases to be closed in the event that there are insufficient or no funds available.

When there are no or insufficient funds, cases will be closed in the following ascending order:

- 1. All category three (other eligible families if funds are available and if the social services district has listed these other families as eligible in the district's 2007-09 Child and Family Services Plan, Appendix G-2) families will be closed.**
- 2. All category two (families that are eligible when funds are available) families will be closed, with the exception of C(1) (to enable a teenage parent to attend high school or an equivalency program) a family receiving Public Assistance when child care services are necessary to enable a teenage parent to attend high school or an equivalency program and D(2) (to enable a teenage parent to attend high school or an equivalency program) a family with income up to 200 percent of the State income standard which is at risk of becoming dependent on Public Assistance when child care services are needed to enable a teenage parent to attend high school or an equivalency program.**
- 3. Category two families in the following order as stated above.**
 - a. D (2) (to enable a teenage parent to attend high school or an equivalency program)**
 - b. C.(1) (to enable a teenage parent to attend high school or an equivalency program)**
- 4. And those families who have children with special needs.**

Within the categories, cases will be selected to be closed that have been in receipt of the child care program the shortest period of time.

2. The district has not established priorities beyond the federally-mandated priorities. If all NYSCCBG funds are committed, case closings for families which are not eligible under a child care guarantee and are not a federally-mandated priority must be based on the length of time in receipt of services. The length of time used to close cases may be based either on the shortest or longest time receiving child care services but must be consistent for all families. The district has chosen to close cases based on:

- shortest time receiving child care services
 longest time receiving child care services

Case Openings

The district must describe below how priority is given to federally mandated priorities and how the district will select cases to be opened in the event that there are insufficient funds available.

Cases will be opened in the reverse order of closings.

Fraud and Abuse Control Activities

The district must identify below the criteria it will use to determine which child care subsidy applications suggest a higher than acceptable risk for fraudulent or erroneous child care subsidy payment and procedures for referring such applications to the district's front end detection system.

See attached FEDS Plan. (Labeled starting with page 77a.)

The district must describe below its sampling methodology used to determine which cases it will seek verification of an applicant or recipient's continued need for child care including, as applicable, verification of participation in employment, education or other required activities.

100% of low income child care subsidy cases are recertified every six months. At recertification the ongoing need for child care is determined.

Reviews are done on each reported change in income and other undercare changes that may affect eligibility. Any reported referrals to the Program Integrity Unit (PIU) unit are investigated as well.

The district must describe below its sampling methodology used to determine which child care providers of subsidized child care services they will review for the purpose of comparing the child care providers attendance forms for children receiving subsidized child care services and any child and adult care food program inspection forms to verify that child care was actually provided on the days listed on the attendance forms.

We estimate Allegany County has 31 child care providers who participate in the food program. We will inspect 2 or 3 per month. Monitoring will be done by checking the child care attendance forms against CACFP monitoring check list to verify attendance of subsidized child,. Any discrepancies that occur will always be followed up on.

APPENDIX G-4

IV. District Options (Required Section)

Districts have certain flexibility to administer the child care subsidy program to meet local needs. Check which options that your district wishes to include in your county plan. Complete attachments for any area(s) checked.

1. Our district has identified local priorities in addition to the federal priorities (complete Appendix G-5).
2. Our district has chosen to establish funding set-asides for NYSCCBG (complete Appendix G-6).
3. Our district is using Title XX funds for the provision of child care services (complete Appendix G-7).
4. Our district has chosen to establish additional local standards for child care providers (complete Appendix G-8).
5. Our district has chosen to make payments to child care providers for absences (complete Appendix G-9).
6. Our district has chosen to make payments to child care providers for program closures (complete Appendix G-10).
7. Our district has chosen to pay for transportation to and from a child care provider (complete Appendix G-11).
8. Our district has chosen to pay up to a 15% higher than the applicable market rates for regulated child care services that have been accredited by a nationally recognized child care organization (complete Appendix G-11).
9. Our district has chosen to pay up to 15% higher than the applicable market rates for non-traditional hours (complete Appendix G-11).
10. Our district has chosen to pay for child care services while a caretaker who works the second or third shift sleeps (complete Appendix G-11).
11. Our district has chosen to make payments to child care providers who provide child care services, which exceed 24 consecutive hours (complete Appendix G-12).
12. Our district has chosen to include 18, 19 or 20 year olds in the Child Care Services Unit (complete Appendix G-12).

13. Our district is seeking a waiver from one or more regulatory provisions. Such waivers are limited to those regulatory standards that are not specifically included in law (complete Appendix G- 12).
14. Our district has chosen to pay for breaks in activity for low income families (non public assistance families, complete Appendix G-12).
15. Our district has chosen to use local equivalent forms such as, but not limited to, child care application, client notification and/or legally exempt enrollment forms (attach copies of the local equivalent forms your district uses).

Any previous approvals for local equivalent forms will not be carried forward into this county plan. Therefore, any local equivalent forms a district wishes to establish or renew must be included in this plan and will be subject to review and approval by OCFS.

**APPENDIX G-7
TITLE XX CHILD CARE**

Projected total Title XX expenditures for plan duration: \$ 400,000

Financial eligibility limits (percentage of State Income Standard) your district will apply based on family size. Maximum reimbursable limits are 275% for a family of 1 or 2, 255% for a family of 3, and 225% for a family of 4 or more. Districts that are utilizing Title XX funds only for child protective and/or preventive child care services must not enter financial eligibility limits as these services are offered without regard to income.

Family Size: (2) 200% (3) 200% (4) 200%

Programmatic Eligibility for Income Eligible Families. (Check all that apply.)

- Title XX: employment education/training
 seeking employment illness/incapacity
 homelessness domestic violence
 emergency situation of short duration
 participating in an approved substance abuse treatment program

Does your district apply any limitations to the programmatic eligibility criteria?
 YES NO

(See Technical Assistance #1 for information on limiting eligibility.)

If yes, describe eligibility criteria:

Does your district prioritize certain eligible families for Title XX funding?
 YES NO

If yes, describe which families will receive priority:

Does your district use Title XX funds for child care for open child protective services cases?
 YES NO

Does your district use Title XX funds for child care for open child preventive services cases?
 YES NO

APPENDIX G-8
ADDITIONAL LOCAL STANDARDS FOR CHILD CARE PROVIDERS

The district may propose local standards in addition to the State standards for providers who will receive child care subsidies.

1. Described below are the additional local standards that will be required of providers as well as which providers must comply with each additional standard.
2. Described below are the methods and resources that will be utilized to determine that these additional local standards are being met.
3. Described below are the procedures the district will use to notify the Legally Exempt Caregiver Enrollment Agency as to whether or not the legally exempt provider is in compliance with the additional local standards. (Districts only need to describe this procedure if the additional local standard is applied to legally exempt child care providers.)
4. Described below is the justification for each additional standard.

**APPENDIX G-9
PAYMENT TO CHILD CARE PROVIDERS FOR ABSENCES**

The following providers are eligible for payment for absences:
(Check any that are eligible)

- Day Care Center Legally Exempt Group
 Group Family Day Care School Age Child Care
 Family Day Care

Our district will only pay for absences to providers with which the district has a contract or letter of intent. Yes No

Base period selected (check one) 3 months 6 months

Number of absences allowed during base period:

Period	Routine Limits (# of days)	Extenuating Circumstances (# of days)	Total Number of Absences Allowed (# of days)
In a month	12	3	15
Base period	12	8	20

List reasons for absences for which the district will allow payment:

Illness; vacation; to hold a spot at day care center

List any limitations on the above providers' eligibility for payment for absences:

When required per contract between client and provider

Note: Legally exempt family child care and in-home child care providers are **not** eligible to receive payment for absences.

**APPENDIX G-11
TRANSPORTATION, DIFFERENTIAL PAYMENT RATES, SLEEP**

Transportation

Describe below under what circumstances and limitations if any your district will use to reimburse for transportation, what type of transportation will be reimbursed (public vs. private), and how much your district will pay (per mile or trip). Note if paying for transportation, Appendix F will need to reflect this choice.

Differential Payment Rates

Indicate below the percentage above the market rate your district has chosen. **Not applicable**

Accredited Programs may receive a differential payment up to _____ % above market rate.

Care during non-traditional hours may be paid up to _____ % above market rate.

Limitations to the above differentials are as follows:

Payments may not exceed 15% above market rate. However, if your district wishes to establish a payment rate that is in excess of 15% above the applicable market rate must describe below why the 15% maximum is insufficient to provide access within the district to accredited programs and/or care provided during non-traditional hours.

Sleep

The following describes the standards that will be used in evaluating whether or not to pay for child care services while a parent or caretaker that works a second or third shift sleeps and any limitations pertaining to payment:

Client will have to verify the shifts worked and hours needed for sleep according to the weekly schedule required by the employer. DSS will pay up to 8 hours time for sleep for those working the third shift. Time will not be paid for sleep time for those working the second shift.

Indicate the number of hours allowed by your district (maximum number of hours allowed is eight). **8**

APPENDIX G-12
CHILD CARE EXCEEDING 24 HOURS, CHILD CARE SERVICES UNIT, WAIVERS,
BREAKS IN ACTIVITIES

Child Care Exceeding 24 Hours

Child care services may exceed 24 consecutive hours when such services are provided on a short-term emergency basis or in other cases where the caretaker's approved activity necessitates care for 24 hours on a limited basis.

Describe any limitations for payment of child care services that exceed 24 consecutive hours.
7 days maximum per year.

Child Care Services Unit

The Child Care Service Unit is the basis upon which a district will determine which household and/or family members should be counted in determining family size and countable family income.

Our district will include the following in the Child Care Services Unit (check which ones apply).

18 year old 19 year old 20 year old

-OR-

Our district will include only the following in the Child Care Services Unit when it will benefit the family (check which ones apply).

18 year old 19 year old 20 year old

Describe the criteria your district will use to determine whether or not an 18, 19 or 20 year old is included in the Child Care Services Unit. **An 18 year old, in the household, will be included in the Child Care Services Unit.**

Waivers

Districts have the authority to request a waiver of any regulatory provision that is non-statutory. Describe and justify why your district is requesting a waiver.

Breaks in Activities

Districts may pay for child care services for low income families during breaks in activities for a period not to exceed two weeks or for a period not to exceed one month where child care arrangements would otherwise be lost and the subsequent activity is expected to begin within that period (check one).

two weeks four weeks

Districts may provide child care services while the caretaker is waiting to enter an approved activity or employment or on a break between approved activities. The following low income families are eligible for child care services during a break in activities (check any that are eligible):

entering an activity waiting to begin employment break between activities

FRONT END DETECTION SYSTEM (FEDS) PLAN OF OPERATION

If an application has one or more of the indicators checked below on the district's approved FEDS plan, and the eligibility worker is not confident that an indicator has been explained or supported adequately, the application must be referred for a FEDS investigation. The wording of each indicator must appear exactly on the FEDS plan as well as the FEDS referral process/form.

Section 1 – State Mandated Indicators

All district plans must include these indicators:

- (X) *Financial obligations are current, but stated expenses exceed income *without a reasonable explanation*
- (X) Working off the books (currently or previously)
- (X) *Supported by loans or gifts from family/friends
- (X) Application is inconsistent with prior case information
- (X) Prior history of denial, case closing, or overpayment *resulting from an investigation.*

Section 2 – State-Approved Optional Indicators

This section may be left blank if a county chooses not to select any of these optional indicators for its FEDS process. If the district chooses to include any or all of these optional indicators in its plan, eligibility workers must also refer to FEDS any applications with these indicators:

- (X) No absent parent information or information is inconsistent with application
- (X) No documentation to verify identity or documentation of identity is questionable
- (X) Landlord does not verify HH composition or provides information inconsistent with application
- (X) Self-employed but *without adequate business records* to support financial assertions
- (X) Alien with questionable or no documentation to substantiate immigration status
- (X) Documents or information provided are inconsistent with application, such as different name used for signature or invalid SSN
- (X) P.O. Box is used as a mailing address *without a reasonable explanation*, e.g., high crime area
- () Primary tenant with no utility bills (e.g., phone or electric) in his/her name
- (X) Children under the age of six with no birth certificates available
- (X) Unsure of own address

* not applicable for child care.

Section 3 – State-Approved County-Specific Indicators

Eligibility workers are not allowed to refer cases based on an “other” box that they fill in for each FEDS referral. Indicators listed and checked here must be pre-approved by the State and must be pre-filled on the district’s FEDS referral process/form. This section may be left blank if a district chooses not to create any county-specific indicators for their FEDS process. Once the State approves this indicator, eligibility workers must also refer to FEDS any applications with these indicators:

N/A

- () County-Specific Indicator: _____
- () County-Specific Indicator: _____

Section 4 – Description of FEDS Process - Please describe your FEDS process:

a. Specify what program areas will use FEDS:

TA FS Medicaid CC Other (specify)

b. Describe how an application will be referred by the eligibility worker to the investigative unit. Include if this is a manual, e-mail or automated process, and if there is eligibility supervisory review. OTDA strongly encourages eligibility supervisory review.

Referrals are made for FEDS investigation by our Social Welfare Examiners to our investigations unit. In Allegany County, our referrals are done manually by the Examiner responsible for the case and require supervisory approval.

c. Describe how the investigative unit logs and tracks the referral, as well as how it processes it (i.e., home visit, collateral contact, office interview, etc.).

FEDS referrals are logged separately on a manual log. (See Attachment 1.) The purpose of the manual log is for Social Welfare Examiner use. We also enter FEDS referrals into our local welfare computer program. This program is capable of tracking both FEDS referrals as well as regular referrals. In addition, the welfare system tracks collection activities and sends collection letters. After the referral is logged, it is assigned to an investigator. The investigator evaluates the referral and decides how to proceed with the collateral contacts, and office interviews.

d. Specify the targeted time frames for reporting investigative results back to the eligibility worker for final determination.

The time frame for reporting investigations back to our eligibility staff is ten working days from the date the FEDS referral is logged in.

e. If your district contracts out for investigations, such as with a local sheriff’s department, explain this process and staffing and identify the contractor.

N/A

f. Describe how and when the investigative unit is informed of the final action taken on the application, for inclusion in the FEDS monthly report.

Supervisory staff ascertains whether the FEDS information was utilized in determination of denial, withdrawal, or grant reduction and subsequently that information is provided for monthly reporting requirements.

g. Attach copies of:

- Any letter used to inform an applicant of a FEDS interview or home visit
- Any letter used to inform an applicant that they may be investigated for FEDS
- The FEDS referral form – **Attached;**
- Any other FEDS form that passes between eligibility and investigations, such as a report of investigation. – **Attached – Report of Investigation is on reverse of referral form**
- **FEDS Log is attached**

We do not use any other form/letter to notify applicants of a FEDS interview.

This Plan was completed by (please print): Rose Scott

Title: Director of Temporary Assistance

Email Address: ScottRM@alleganyco.com Phone: (585) 268-9304

FEDS Log

Case Name	Case Number	Date Assigned	Worker	5-day Status	10-day Status	Date Returned to TA

Allegany County Front End Detection System/Resolution/Cost Avoidance Savings Form

Name of Applicant: _____
Address: _____

SSN: _____
Prim. Lang.: _____

Application has **no** FEDS indicators

Eligibility Worker: _____

Date: _____

Eligibility: Check the indicator(s) below and give a brief explanation: attach any necessary documentation:

- Financial obligations are current, but stated expenses exceed income *without a reasonable explanation*** _____
 - Working off the books (currently or previously)** _____
 - Supported by loans or gifts from family/friends** _____
 - Application inconsistent with prior case information** _____
 - Resulting from an investigation: Prior history of ___ denial ___ case closing ___ overpymt** _____
 - No absent parent information or information is inconsistent with application** _____
 - No documentation to verify identity or documentation of identity is questionable** _____
 - Landlord does not verify HH composition or provides information inconsistent with application** _____
 - Self-employed but *without adequate business records* to support financial assertions** _____
 - Alien with questionable or no documentation to substantiate immigration status** _____
 - Documents or information provided are inconsistent with app., such as different name used for signature or invalid SSN** _____
 - P.O. box used as a mailing address *without reasonable explanation*, e.g., high crime area** _____
 - Primary tenant with no utility bills (e.g., phone or electric) in his/her name** _____
 - Children under the age of six with no birth certificates available** _____
 - Unsure of own address** _____
 - County-specific *Pre-filled* Indicator**
(Specify) _____
- Eligibility Worker: _____ Date: _____
Phone: _____



NEW YORK STATE
OFFICE OF TEMPORARY AND DISABILITY
ASSISTANCE
Riverview Center, 4th Floor
40 N. Pearl Street
Albany, New York 12243

Robert Doar
Commissioner

George E.
Pataki

Governor

August 16, 2006

Rose Scott
Director of Temporary Assistance
Allegany County DSS
7 Court Street
Belmont, NY 14813

Dear Ms. Scott:

This letter will serve as approval of your revised FEDS plan for Temporary Assistance and Food Stamps for Allegany County. We will also forward a copy of this plan to State DOH for the Medicaid portion of your plan and to State OCFS for the Child Care portion of your plan, and you will hear from them directly.

Regarding implementation of your revised plan, we encourage you to continue to maintain a good relationship with your eligibility workers and supervisors and to share your FEDS plan with them and your investigators. In order to be successful, the FEDS process must have eligibility workers, supervisors and investigators who understand the function of each indicator, as well as the FEDS process itself. We offer the following tools for Allegany staff, to assist in understanding and maintaining a good FEDS process:

- The FEDS ADM, 05 ADM-08
- The FEDS pc learning module, which can be accessed through the following link: www.trainingspace.org
- The Fall 2006 NYWFIA regional meetings (FEDS will be discussed)
- On-site FEDS training, when possible.

As you know, we recently converted to an automated report for FEDS—please call me if you have any questions about what to report, or anything else regarding FEDS. I can be contacted at (518) 402-0127 or at maria.schollenberger@otda.state.ny.us.

We appreciate very much the time and effort you put into revising your plan, as well as your patience during the review process. We also thank you for helping to maintain the integrity of Temporary Assistance and Food Stamps in New York State.

Sincerely,

MS /s/

Maria Schollenberger
FEDS Project Director

Attachments

cc: Commissioner Schmelzer
Jean Shannon, DOH
Bonnie Gregory, OCFS