



RECEIVED MAY 2 - 2008

David A. Paterson  
Governor

NEW YORK STATE  
OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE  
40 NORTH PEARL STREET  
ALBANY, NEW YORK 12243-0001

David A. Hansell  
Commissioner

April 28, 2008

Mr. Robert B. Allers  
Commissioner  
Dutchess County Department of Social Services  
60 Market Street  
Poughkeepsie, New York 12601

Dear Commissioner Allers:

I am pleased to inform you that your Temporary Assistance and Food Stamp Employment Plan for the period January 1, 2008 through December 31, 2009 is approved by the Office of Temporary and Disability Assistance (OTDA). A copy of your final plan is enclosed.

The plan will be made available to our Office of Administrative Hearings for use by administrative law judges when conducting employment-related fair hearings. Any amendments necessary to reflect changes to your district's policies or procedures that are covered by the plan must be submitted to your OTDA Employment Technical Advisor for approval.

We look forward to continuing our work over the next few years as we work to continually enhance employment services provided to low-income individuals so they are prepared to retain employment and access the array of work supports available in New York. As always, feel free to contact me or Barbara Guinn at (518) 486-6106 for any assistance to support your efforts.

Sincerely,

Russell Sykes  
Deputy Commissioner  
Center for Employment and Economic Supports

Enclosure

cc: Barbara Guinn  
Jacky Cooper  
Keri Stark

**TEMPORARY ASSISTANCE  
AND  
FOOD STAMPS  
EMPLOYMENT PLAN**

**JANUARY 1, 2008 - DECEMBER 31, 2009**

**DUTCHESS COUNTY  
DEPARTMENT OF SOCIAL SERVICES**

**60 MARKET STREET  
POUGHKEEPSIE, NEW YORK**

**ROBERT B. ALLERS  
COMMISSIONER**



**WILLIAM R. STEINHAUS  
COUNTY EXECUTIVE**

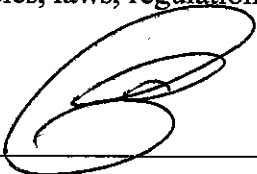
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**Temporary Assistance and Food Stamps Employment Plan**  
**January 1, 2008 – December 31, 2009**

**Section 1 Assurances/Signature**

As a condition of the receipt of federal and State funds the Dutchess County Department of Social Services submits this Temporary Assistance and Food Stamp Employment Plan (Plan) to the New York State Office of Temporary and Disability Assistance. The Plan outlines the administration of the employment services for Temporary Assistance (TA) and Food Stamp (FS) applicants and recipients program for the period January 1, 2008 through December 31, 2009. As Commissioner of Dutchess County Department of Social Services, I hereby affirm that employment services programs will be administered in accordance with all applicable Federal and State policies, laws, regulations and provisions of this plan.

  
\_\_\_\_\_, Social Services Commissioner

Date: April 17, 2008

**Section 2 Administration**

**Section 2.1 Administrative Structure**

This agency's organizational chart is attached. It identifies the units and staff within the agency that are involved in the operation of the district's employment program.

Following is a description of the office(s) in and/or outside of the Department of Social Services that are involved in the operation of the district's employment program. The responsibilities of each office are described below.

*The Dutchess County Department of Social Services Employment Unit, which consists of 7 workers, a specialist and a supervisor, is responsible for providing all employment related services. These employees are responsible for : employability determinations, assessment, job search, development of employment plans, assignment to work activities, monitoring participation, training referral and approval, conciliation, referral for non-compliance sanctions, monitoring treatment plans for exempt individuals engaged in treatment/rehabilitation to restore them to self-sufficiency and coordination and provision of supportive services and employment and retention services.*

*The Department contracts with: Chamber of Commerce for the provision of mentoring services for employed individuals and for those that are threatened with or actually serving employment sanction (Responsible Parent Initiative); the Chamber of Commerce for the Youth Employment*

Services Program to engage youth ages 14 – 18 in internships and part time employment and to tutor them while in school; BOCES for the provision of an intensive case manager for sanctioned individuals and those not fully engaged in work activities, BOCES for the CST and Wheels for Work program; BOCES for assessments and training.

### Section 2.2 TA and FSET Provider Agencies

Table 1 lists the local contracts or agreements with agencies to provide employment services to TA and FS clients. These activities and services may include, but are not necessarily limited to, employability determinations, development of assessments and employment plans, conciliation and grievance activities, provision of work activities, monitoring and support for compliance with treatment plans for exempt individuals with the potential for restoration to self-sufficiency, job development, job placement and retention services, and other employment related activities.

Each contract listed in Table 1 contains an assurance that the activities are not otherwise available from that provider on a non-reimbursable basis and, if not a performance-based contract, a statement regarding use of a cost allocation methodology that satisfies Generally Accepted Accounting Principles, as well as the requirements of U.S. Office of Management and Budget Circulars A-122 for nonprofit organizations, A-21 for educational institutions, or A-87 for State and local governments.

Agencies/providers that offer services to participants but which have no direct financial agreement with the district are included in Table 2 (e.g., Bridge, EDGE, OTDA Wage Subsidy, etc.).

**Table 1 - Contracts Associated with Employment Programs and Services**

Provider	Total Contract Cost (per yr.)	Funding Source(s) (if known)	Categories of Clients Served	Programs, Services or Activities Provided
DC BOCES	\$428,000	TANF & SN	TANF- SNF SN 200%	Action for Personal Choice Basic Education English as a Second Language GED Instruction Job Placement, Job Search, Literacy Testing, Assessment Vocational Education, Work Experience Job Coaching, Employment Programs Info Dissemination
DC BOCES	\$42,684	TANF & SNF	TANF SNF	Intensive Case Management services for those being sanctioned or in jeopardy of being sanctioned.
DC BOCES	\$455,000	CST III Wheels to Work II	TANF/SNF 200% + Non- Custodial Parent	Transportation Services
OTDA (JOBS)	OTDA		SN & TANF 200% SNF	Job Readiness Training – Job Club Supervised Job Search Job Development/Placement

DC Dept of Mental Hygiene	\$256,317	TANF (35%) and Safety Net (65%)	TANF & SN	Alcohol & Substance Abuse Assessment & Treatment Monitoring, Jail-based Services-linkage to community MH & substance abuse services &
Greater Southern Dutchess Chamber of Commerce	\$ 68,000	NY Works Block Grant IV	TANF SN 200%	Job Mentoring Program
Poughkeepsie Area Chamber of Commerce	\$143,723	NY Works Block Grant IV	TANF SN 200%	Job Mentoring Program,
	\$118,911	TANF	TANF	Responsible Parent Initiative
	\$122,266	TANF	TANF eligible youth	Youth Employment Services
<b>Total</b>	<b>\$1,634,901.00</b>			

Comment [BCG1]:

**Table 2 – Other Service Providers**

Provider	Funding Source(s) (if known)	Categories of Clients Served	Programs, Services or Activities Provided
DC BOCES	EDGE	FA SNF	Job Readiness and Retention Training Soft/SCANS Skills Training Job Shadowing Job Search Job Development/Placement Assistance

**Section 2.3 Jobs Agreement**

**Jobs Program Services – Target Groups**

("X" signifies those that apply in this district)

Services		Target Groups	
Assessment/Employability Plan	<u>  X  </u>	Applicants	<u>  X  </u>
Supervised Job Search	<u>  X  </u>	TANF (inc. SN fam.)	<u>  X  </u>
Job Readiness Training	<u>      </u>	Safety Net Singles	<u>  X  </u>
Job Club	<u>  X  </u>	Food Stamps	<u>  X  </u>
Job Placement Services	<u>  X  </u>	200% of Poverty	<u>  X  </u>
Grant Diversion	<u>      </u>		
Job Development (employer field visits)	<u>  X  </u>		

**Other Services Requested**

Described below are additional services/duties which will be requested of Jobs staff (i.e., WTCMS data entry, case conferencing, job fairs etc.)

Amendment

Effective Date \_\_\_\_\_

*The JOBS staff sees each applicant after they have been assessed at application. She will meet with the applicant weekly and monitor his/her job search, make referrals to available positions, assist with resume writing and updating. She will meet with the applicant until his/her case is opened at which time the Employment Worker will take over and meet with the individual as a recipient and monitor the job search. JOBS staff may conduct Job Clubs when requested.*

**Jobs Program Staffing and Location (Address)**

**Number of Jobs staff**        **1**

**Locations**

- 
1. *Dutchess County Dept. of Social Services 60 Market St., Poughkeepsie, NY*
- 
- 2.
- 
- 3.
- 

**Jobs Program LDSS Staff Contact (Name & Phone Number)**

*Jacqueline Cooper, (845) 486-3184*

**Section 3 Engagement and Work Preparation**

**Section 3.1 Federal “Engaged in Work” Requirement**    (Reference 18 NYCRR 385.2 (f))

For purposes of satisfying the federal requirement which states that parents or caretakers must be engaged in work as soon the district determines they are ready, but no later than within 24 months of receiving federally funded assistance, the district’s definition of “Engaged in Work” is:

Compliance with assessment, employment planning, any activity included in the individual’s Employment/Self-Sufficiency plan, or any of the work activities listed in Section 3.4. Also included is pursuit of other forms of income such as SSI and SSD.

**Section 3.2 Orientation** (Reference 18 NYCRR 385.5)

Check one of the following:

The district provides orientation in accordance with Dept. Reg. 385.5 and no additional information is provided at orientation.

In addition to the requirements outlined in Section 385.5 of the regulations, the district’s orientation provides the following.

Amendment

Effective Date \_\_\_\_\_

Described below is the manner in which the district completes the required orientation, e.g. done in a group setting or individually or a combination of both.

*Orientation (on DVD) is provided in a group setting twice daily for Temporary Assistance applicants. A TA/Employment staff person conducts the orientation. Each applicant signs in and orientation packets which contain brochures/written information included on the DVD are made available to all.*

*To provide safety and assist in reducing the wait time for applicants, the district has also made the DVD available to community service providers (e.g. domestic violence shelters, drug/alcohol residences). This allows the provider to show the DVD prior to the applicant coming to the Department. The applicant signs and brings an attestation to the intake interview. Orientation packets are made available to an applicant at the interview. Orientation information is also individually reinforced and explained in greater detail at the Employment Unit Intake and Assessment appointment.*

*At the TA recertification appointment, TA/Employment staff review and explain the orientation information previously given with the recipient individually.*

### Section 3.3 Assessment and Employability Planning

#### Temporary Assistance Assessment (Reference 18 NYCRR 385.6 and 385.7)

a. Check one of the following:

The district conducts assessments in accordance with 18 NYCRR 385.6(a) and 385.7(a) with no additional requirements.

In addition to the requirements outlined in 18 NYCRR 385.6(a) and 385.7(a), the district's assessment also includes the following elements:

b. A copy of the assessment tool used by the district is attached. Additional assessment tool(s) used by the district is (are):

*Assessments are being done by BOCES. Copy of tools attached as Attachment B. Employment Workers also do assessments as needed.*

c. The qualifications of the employees administering the assessment tool(s) are at minimum: (Refer to requirements listed in 18 NYCRR 385.6(c) and 385.7(c).

*Either, (A) Completion of two years (60 credit hours) at a regionally accredited or New York State recognized community or junior college, four-year college or university and one year of experience in the provision of financial social welfare programs or investigations, or substantially similar work;*

OR: (B) Graduation from high school or possession of an equivalency diploma and two years of experience as described above;

OR: (C) An equivalent combination of training and experience as described in (A) and (B) above.

*Although not required, the Employment Unit Manager and each Employment Unit worker is asked to obtain either a credential as a Career Development Facilitator or Family Development Worker once they become permanent employees.*

d. The district administrative unit or contractor responsible for conducting assessments is:

*Dutchess County Department of Social Services Employment Unit  
Dutchess County BOCES Adult Education Division*

e. Applicants in households with dependent children are required to participate:

Yes     No

Applicants in households without dependent children are required to participate:

Yes     No

#### Food Stamps Assessment

A district may require a food stamp work registrant to participate in an assessment.

a. The district  does  does not require work registrants to participate in a formal employment assessment.

b. If assessment is required, the assessment includes the following elements:

#### Temporary Assistance Employability Plans (Reference 18 NYCRR 385.6(b) and 385.7(b))

a. A copy of the district's employability plan is attached and:

The district completes employment plans in accordance with 18 NYCRR 385.6(b) and 385.7(b) and no additional information is contained in the plan.

*The District uses CMS for Employment Plans*

In addition to the requirements outlined in 18 NYCRR 385.6 (b) and 385.7(b), the employability plan includes:

b. The district administrative unit or contractor that develops employability plans is (list only if different from those performing assessments):

c. The qualifications of the employees developing employability plans are (list only if different from the requirements for those performing assessments):

Amendment

Effective Date \_\_\_\_\_

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**Section 3.4 –Participation Rates and Work Activities (Reference 18 NYCRR 385.8 and 385.9)**

- a. Described below is how the district plans to meet federal and state Temporary Assistance participation rate requirements. Included is the typical time period it takes for nonexempt individuals to be engaged in activities for both newly opened cases and individuals whose status changes from exempt to nonexempt. Information regarding engaging exempt individuals is entered in Section 3.6.

*All TA employable adults are scheduled for an Employment Assessment at intake and assigned to 40 hours of countable work activities within 30 days of case opening on WMS. Adults who claim a disability at intake are given 10 days to document their limitations and are then either sent for an assessment and assigned to work activities based on their documented limitations or sent to the Employment Worker in charge of individuals who are totally exempt from work activities. Exempt individuals are required to apply for any appropriate disability benefits and to follow up with any treatment recommended by his/her doctor. Ultimately our goal is to engage all participants to their fullest potential and to assist them in becoming self-sufficient. The Employment Unit Supervisor uses COGNOS reports and locally developed reports to monitor the engagement of individuals, the conciliation and sanctioning process, proper employability coding, number of hours each individual is participating, proper recording of employment and hours worked. She also monitors the budgeting of income and proper coding on WMS.*

*If a medical is received indicating that an exempt individual has become non-exempt, the Employment Worker in charge of the exempt individual's case sends an appointment letter for the individual to come in for a new assessment and employment plan. The individual is immediately assigned to appropriate activities. This is usually done within 10 days of receipt of medical documentation. These cases are monitored manually by the Employment Worker in charge of the exempt cases.*

- b. The allowable work activities that are available in the social services district are listed and defined as follows. An "X" in the appropriate column indicates the activity is available for individuals receiving FA, SNF (indicating SN households with children or Safety Net Families), SNA, (SN households without children, and/or FS (indicating NTA Food Stamp).

If a column is blank it indicates that the activity is not available for that household/case type.

FA	SNF	SNA	FS	Activity	Definition
X	X	X		Unsubsidized Employment	Full time or part time employment in the public or private sector that is not subsidized by TANF or any other public program (excluding employer tax credits). Unsubsidized employment includes self employment and/or paid internships.

X	X	X	Subsidized Private Sector Employment	Employment in the private sector for which the employer receives a subsidy from TANF or other public funds (excluding tax credits) to offset some or all of the wages and costs of employing and training a recipient in accordance with New York State Social Services Law 336-e. Subsidized private sector employment will include positions subsidized through grant diversion, supported employment programs, and paid college work study programs at private institutions. Individuals participating in subsidized private sector employment are paid wages and receive the same benefits as unsubsidized employees who perform similar work. An employment situation will be subsidized for up to the full amount of wages/benefits provided to the program participant and will be subsidized for the length of time as determined appropriate by the State or social services district.
X	X	X	Subsidized Public Sector Employment	Employment in the public sector for which the employer receives a subsidy from TANF or other public funds (excluding tax credits) to offset some or all of the wages and costs of employing and training a recipient. Subsidized public sector employment will include positions subsidized through grant diversion, supported employment programs and paid college work study programs at public institutions. Individuals participating in subsidized public sector employment and work study unless otherwise permitted under a federal work study program, are paid wages and receive the same benefits as unsubsidized employees who perform similar work. An employment situation will be subsidized for up to the full amount of wages/benefits provided to the program participant and will be subsidized for the length of time as determined appropriate by the State of social services district.

X	X	X	Work Experience	<p>Unpaid work performed at a public or not for profit organization to enable participants who cannot find unsubsidized employment to improve his or her employability. Work experience provides participants with an opportunity to acquire the general skills, training, knowledge and work habits necessary to obtain and retain employment. Participation in work experience includes training required for the participant to complete the work experience assignment. For example, an individual who is expected to provide clerical support in a government agency may be provided training to develop or refine filing and data entry skills as needed to perform the tasks required as part of the work activity assignment.</p> <p>In addition to those components noted above, work experience will include unpaid internships that are part of any non-graduate student's education curriculum. (Note: Paid internships will be reported as employment.)</p>
X	X	X	On-the-Job Training (OJT)	<p>Training in a public or private sector employment setting during which the participant receives work-essential paid training while he or she is engaged in productive work that provides the knowledge and skills essential to attain full and adequate performance of the job.</p> <p>OJT will be unsubsidized (for which the employer does not receive a subsidy) or subsidized using TANF funds or other funds to offset the cost of the training provided to the participant. A subsidized OJT will be subsidized for up to the full cost of providing such training and wages/benefits provided to the program participant. Positions will be subsidized for the length of time determined appropriate by the State or social services district. OJT is distinct from subsidized employment due to the fact that the individual must participate in workplace training to attain full and adequate job performance and the subsidy provided is intended to offset the cost of such training.</p>

X	X	X		Community Service	<p>A structured program in which participants perform work for the direct benefit of the community under the auspices of public or nonprofit organizations. Community service placements must be projects that serve a useful community purpose in fields such as health, social services, environmental protection, education, urban and rural redevelopment, welfare, public recreation, public facilities, public safety, and childcare. Community Service programs are designed to improve the employability of participants not otherwise able to obtain unsubsidized employment. Participation in community service may include training that is directly required for the participant to complete the community service assignment. For example, an individual who is expected to provide clerical support to a food pantry may be provided training to develop or refine filing and data entry skills.</p> <p>Community service assignments will primarily be voluntary in nature including participation in VISTA, Americorps, and unpaid volunteer activities at a school, Head Start programs, religious or faith-based institutions, community organizations or a nonprofit or public agency but will also include such mandated participation when court ordered. Participation in activities to support these organizations is deemed to provide a service to the community. In those instances where the participation could meet the federal definition of work experience or community service and the district or program provider would like to have another recipient provide childcare for the community service individual, such hours of work may be reported as participation in community service.</p>
X	X	X	X	Job Search	<p>The act of seeking or obtaining employment or preparing to seek or obtain employment and will include looking for suitable job openings in a group or individual setting, making contact with potential employers, learning appropriate workplace expectations and behaviors in preparation for submitting job applications and interviewing, preparing to or applying for and/or interviewing for jobs and related activities.</p>

X	X	X	Job Readiness Training (JRT)	Participation in programs that include seeking and preparing for work. Traditional JRT activities will include: resume preparation, training in interview skills, instruction in workplace expectations, training in effective job seeking, life skills essential to workplace success, time management, goal setting, budgeting, basic math and literacy skills, household management, interpersonal skills, decision making skills, anger management, parenting skills when it has been determined that such training could help reduce unplanned work leave or apprehension toward entering employment.
X	X	X	Vocational Education	Vocational education is defined as an organized educational program that directly relates to the preparation of individuals for current or emerging occupations that require training other than a baccalaureate or advanced degree. Vocational education does not generally include basic or remedial education or ESL but may include work focused general education and language instruction that is a regular or integral part of a vocational education program. Social services districts are responsible for ensuring that any such remedial education or ESL is a regular part of the program for participants with similar skill sets as the TANF/SN MOE client, is determined necessary by the program provider, and is limited in hours to less than one-half of program participation. Vocational education programs include the completion of activities that provide individuals the knowledge and skills to perform a specific trade, occupation or vocation. Vocational education must be provided by an education or training organization.

X	X	X	Job Skills Training	<p>Training or education in job skills to improve a participant's employability, to ensure clients have the basic skills competencies required by employers to support job entry and/or to advance or adapt to the changing demands of the workplace. Where identified as needed such training may include the development of basic workplace skills including professional workplace behaviors and decision making skills. Job skills training may include customized or technical training designed to provide participants with additional workplace skills, post secondary education courses leading to a bachelor's or other advanced degree or other training included under the definition of vocational education training. Job skills training may include literacy instruction, English language instruction or other basic education for an individual who has already obtained a high school diploma or equivalency when determined from a client's assessment that such instruction is needed to improve the participant's employability.</p>
X	X	X	Education Training	<p>Education directly related to employment for a recipient who has not received a high school diploma or equivalency must be related to a specific occupation, job or job offer or otherwise determined based on a client assessment as necessary to improve the participant's employability to support job entry, retention or advancement. Education directly related to employment may include courses designed to provide the knowledge and skills for general or specific occupations or work settings to ensure clients have the basic skills competencies required by employers and may also include adult basic education, English language instruction and education leading to a GED or HS equivalency diploma as determined as necessary to improve the participant's job opportunities in potential occupations. Where identified as needed such training may include the development of basic workplace skills including professional workplace behaviors and decision making skills.</p>

X	X	X	Secondary School	Regular attendance in accordance with the requirements of the secondary school or a course of study at a secondary school leading to a general equivalence diploma (GED), in the case of a recipient who has not completed secondary school or received a certificate of general equivalence. Secondary school participation may include general adult basic education or ESL if it is linked to attending secondary school or leading to a GED as determined necessary by the educational institution. Secondary School or GED programs that routinely include ESL, career training, alternative school, tutoring, dropout prevention, teen pregnancy or parenting programs as a requirement of program participation as determined by the educational institution will also be permitted.
X	X		Provision of Childcare for Individual Participating in Community Service	Providing unpaid child care to enable another Temporary Assistance (TANF/MOE funded) recipient to participate in a community service program.
			Treatment Plan for Substance Abuse	Substance Abuse treatment will include medical, behavioral and other treatment necessary for individuals suffering from substance abuse (current and former users) with such required treatment ranging from detoxification services to after care/abstinence maintenance. For FA families with dependant children this activity will be deemed to be Job Readiness Training within participation rate reporting. For SN households without children this activity will be deemed to be community service.
X	X	X	Treatment Plan Other than Substance Abuse	Physical health treatment and rehabilitation services including attending necessary physical therapy, mental health treatment, or rehabilitation activities in which a qualified medical or mental health professional has certified that such treatment is necessary. For FA families with dependant children this activity will be deemed to be Job Readiness Training within participation rate reporting. For SN households without children this activity will be deemed to be community service.
			Other	Any work activity that does not meet the criteria of any of the above countable activities constitutes participation that is not countable toward federal and state participation rates.



[X] District contracts or has an agreement with another agency to contact employers and solicit jobs for Temporary Assistance participants. Below is the description of how this is done, including number of staff, frequency of contacts, etc.

*Vocational Education provider (BOCES) must provide a job referral and placement component. BOCES staff contacts employers in the area for job openings.*

*Poughkeepsie and Southern Dutchess Chamber of Commerce also make direct job placements and referrals. This is done daily with all individuals referred to them.*

*The Intensive Case Manager also makes direct job placements for the individuals that she serves. In addition, the ICM will develop WEP sites tailored to meet a specific need and work towards making this into a paid unsubsidized job for the individual.*

*The Department of Labor has job fairs and invites employers to recruit. DSS clients are referred to these:*

[X] Jobs Program staff are charged with job development as indicated in Section 2.3. Additional information, if any, is described below:

**Section 3.6 Training Approval & Activity Enrollment Policy (Reference 18 NYCRR 385.9)**

- a. Describe how the district identifies/provides appropriate education (Adult Basic Education, GED preparation), and English language instruction, program services that are available to clients whose assessment indicates such services would be an appropriate work activity assignment:

*Each individual 16 years of age or older who does not already have high school diploma or a GED is referred to BOCES for a TABE test and possible enrollment in a GED class. If they are assessed as being able to benefit from this, the GED class is a required work activity.*

*Any individual who is not fluent in the English language is required to enroll in ESL classes.*

- b. Describe how the district identifies/provides appropriate Vocational Education and Job Skills programs that are available to clients whose assessment indicates such services would be an appropriate work activity assignment:

*All individuals are assessed and their individual educational and employment background reviewed. If the individual is unable to compete in the current job market with his/her skill and knowledge level, a review is done of the training and/or job skills programs available that would make the individual "job ready". These options are then discussed with the individual and his/her preferences, as long as they are realistic and*

*the individual is physically and psychologically able to work in the chosen field, a referral to the appropriate training is made a part of the individual's employment plan.*

*We are also doing a computer skills assessment on all individuals. In today's job market there is a need for at least a basic knowledge of computers and word processing for most entry level positions. There is also the need for an ability to complete job applications on line. We are therefore referring all who do not have the basic computer skills to various contractors for training in this area.*

- c. OTDA is requesting each district to increase the number of vocational training or job skills enrollments by at least 20 percent by January 2009 (generally as compared to September 2007) as one method to increase the skill development of recipients to support improved job entries.

- d. Describe what steps the district will take to increase the number of participants engaged in vocational education and job skills training programs. Such steps may include increased use of contracted services through local training providers, including WIA funded services, or use of OTDA funded Bridge or EDGE training programs. Districts should consider additional blending of activities such as work experience or employment with job skills training in fields that would improve participants' ability to obtain employment or increase wages or hours of employment.

*Computer Skills Assessment is done on all applicants and recipients to assess their need for basic or advanced computer skills. The Intensive Case Manager also works closely with VESID.*

- e. Education and training providers are evaluated by the following standards:

*There must be a demand in the local job market for graduates of the program. Graduates must be proven to be able to get jobs in the field for which they have been trained. The program must be one of proven effectiveness and by itself be sufficient to enhance the participant's ability to obtain employment.*

- f. The district procedure for advising participants of the approved training providers is:

*Information is provided by Employment worker during assessment review and employability plan development. Information is also provided in the orientation packets.*

- g. Participants must meet the following requirements in order to be assigned to education/training activities:

1. *The recipient must be unable to compete in the existing job market with his/her current skills, work history and education, and*
2. *The participant's proposed course of study must be realistic for his/her abilities. For recipients wishing to attend a Dutchess Community College program, they must prove their ability to benefit (PL101-508) by passing any test administered*

*by DCC, and there must be openings in that field in the current job market. The recipient must be physically and/or psychologically able to work in the chosen occupation, and*

3. *The recipient must not have previously been terminated from DSS sponsored training for failure to satisfactorily participate without justification.*

- h. The district procedure for notifying participants of approval for training or enrollment in a work activity is:

*A letter is sent to each individual notifying him/her that the training has been approved, the dates the course should run, any supportive services that will be available to them for this training, and the requirement that they maintain passing grades along with the possible consequences on not satisfactorily participating without good cause.*

- i. In accordance with 18 NYCRR 385.9 (b), regardless of whether the college program is approved for the participant as an employment work activity, the district will approve as a work activity a work-study, internship, externship or other work placement that is part of a non-graduate student's curriculum unless one or more of the following conditions applies as check below:

It has been determined that the student voluntarily quit a job or reduced earnings to qualify for initial or increased Public Assistance.

A job or on-the-job training position that is comparable to the work-study, internship, externship or other work placement cannot reasonably be expected to exist in the private, public or not-for-profit sector

The student is not maintaining a cumulative C average (or the equivalent). The district may disregard this provision if the student documents an undue hardship.

Failure of the institution or student to monitor and report information regarding the student's attendance and performance as required.

Failure of the student to progress toward the completion of a course of study without good cause, as determined by the district.

The student has previously enrolled in a work-study, internship, or other work placement and failed to complete the work placement without good cause as determined by the district.

Additional reasons as stated below:

The individual has already exhausted the allowable period of time for the activity to be countable.

*Any study time must be supervised in order for it to be a countable activity.*

- j. In order to verify continued exempt status, the local district will monitor the high school attendance of 16-18 year old students in the following manner:

*School attendance verification form and use of AFA codes on WMS*

- k. The district's procedure for ensuring that an individual's health-related limitations are accommodated when assigning the individual to a work activity is:

*The Employment Worker will identify and discuss with the individual and the work activity provider any health-related limitations. Participant's limitations are stated in writing to the provider without disclosure of the medical condition or diagnosis. Recipients will not be assigned to a work activity that cannot accommodate their limitations. Where the work activity can accommodate the limitations, the job duties will be agreed upon by the recipient, the DSS Employment Worker and the work activity provider.*

### **Section 3.7 Work Verification**

Consistent with Work Verification Plan (WVP) requirements established by the United States Department of Health and Human Services, districts must develop a quality assurance plan for addressing the work participation rate it reports. The plan must include the district's procedure for monitoring attendance in paid employment and work activities and the controls in place to ensure that federal exclusions from work participation rate requirements are accurately made, work eligible individuals are correctly identified, hours of attendance reported by providers is accurate and documented, data entry is accurate and that the district and its providers adhere to approved district and State policy for work activity definitions and the determination of excused absences and holiday reporting. Districts must describe how it will determine that system entries agree with documentation in case files. The district must also explain how it will sample cases, the sample size, and how frequently cases will be reviewed.

After the reviews are completed, the district should provide a summary of findings for management and State review, including errors identified. In addition, the district must include the corrective action it will take when monitoring reveals substantial problems.

The Quality Assurance plan must explain how staff will:

- Assure that documentation of wages and actual hours of employment are verified and accurately projected/reported and present in the case file;
- Assure that the documentation for actual hours, supervision/attendance, excused absences and holidays in other activities is present in the case file;
- Assess whether participation in the work activities reported for work eligible individuals meet the federal definition for the activity;
- Assess that the data entered into either WTCMS, NYCWAY or other automated system used for reporting work activities is accurate, including actual hours, excused absences and holidays; and is based on documentation in the case record; and,

- Make sure that documentation necessary to exempt an individual due to being the caretaker of a disabled household member (Employability Code 38) is present in the case file and that individuals meet the exempt status based on the required documentation.

Please describe the process the district will use to review district worker collected documentation and data entry of the above listed elements (include a description of how a case sample for review will be selected, sample size and frequency of reviews):

*Dutchess County will assess and verify that participation in work activities reported meets the State approved definition for the activity as part of the review process listed below.*

*Dutchess County will perform a random sampling of 10 cases per quarter for paid work activities. Both the TA and employment case files will be reviewed. Hours of employment will be verified through receipt of pay stubs, Wage Verification form, and direct phone contact with the employer documented in case notes. The review will ensure that the actual verified hours budgeted are consistent with the hours reported in CMS and documented in case notes in TA file.*

*Dutchess County will perform a random sample of 20 cases per quarter for participation in unpaid work activities. The employment case files and WEP rosters maintained in a separate file will be reviewed. Actual hours of attendance will be documented by attendance sheets showing actual hours of attendance, any excused absences during the month, any unexcused absences during the month, and holiday time. The review will ensure that the actual hours of attendance reported on the attendance sheets has been correctly reported on CMS and that excused absences and holiday time are documented in case notes and correctly reported on CMS (in accordance with federal limitations).*

*Dutchess County will perform a random sample of 5 cases per quarter in which a case member is reported as an employability code 38. The TA case file will be reviewed to ensure that there is current medical documentation to support the exemption and that the documentation has a timeframe for the exemption and that the individual is the appropriate caretaker.*

*Dutchess County will perform a random sample of 20 cases per quarter in which a case member is reported as an employability code 31. The TA case file will be reviewed to ensure that there is a birth certificate present to verify that the child is under the age of one.*

*Dutchess County will perform a random sample of 10 cases per quarter in which a case member is reported to be incapacitated to determine if he/she remains incapacitated or is now a work eligible individual. The TA case file will be reviewed to ensure that there is current medical documentation to support the exemption and that the documentation has a timeframe for the exemption.*

*A summary report of this review will be prepared and submitted to Kathy Nagy at OTDA.*

Please describe the process the district will use to review provider collected documentation and data entry of the above listed elements (include a description of how a case sample for review will be selected, sample size and frequency of reviews):

*Dutchess County does not have providers data entering information into CMS.*

**Section 3.8 Requirements for Exempt Temporary Assistance Participants (Reference 18 NYCRR 385.2 (e))**

An exempt individual who has the potential to be restored to self-sufficiency through rehabilitation may be required to accept medical care to assist the individual in recovering from a mental or physical impairment, accept referral to and enrollment in a program of vocational rehabilitation, training, and/or other essential rehabilitation, and provide requested evidence that he/she is participating in the assigned program.

- a. Following is the district's procedure for determining if a disabled individual has the potential to be restored to self-sufficiency. This determination is different from the determination of the individual's disability exemption as covered in Section 6 of this plan. Included here is who (e.g. physician, employment worker, Temporary Assistance worker, local review team, etc.) makes or assists in this determination that an individual can restore or improve employability through treatment or other rehabilitative activities. Also included is the source and type of information used to make the determination (e.g. information from individual's physician, district contracted provider, specialist evaluation obtained as result of district referral, etc.):

*An applicant or recipient who claims to be unable to work or to have limitation with regard to employment will be given a form DSS-4526 to be completed by his/her treatment provider and returned to the Agency within ten days. Anyone who does not have a treatment provider and claims an inability or limitation to work is given a referral to IMA (Industrial Medicine Associates) for an examination. Upon receipt of the completed medical, the Employment Supervisor or Specialist will determine the applicant's ability to work and any limitations the client may have with respect to employment. The Employment worker or TA worker will issue either a DSS 4005 or DSS 4005(a) to the individual advising him/her of the Agency's determination. The individual has fair hearing rights on this determination.*

*The recipient will be required to provide an updated medical at recertification or when the timeframe for the inability to work listed on the current medical expires.*

- b. Following is the district's procedure for developing a treatment plan and for referring the participant to appropriate treatment, etc.:

*All individuals who are exempt or have a partial exemption for work activities are referred to one Employment Worker who develops an employment plan with that*

*individual that includes the treatment recommended by their treating physician. This Employment Worker follows up on and enters into CMS any treatment activities.*

- c. Following is the district's procedure for tracking the participant's compliance with the treatment plan. Include if monthly attendance at rehabilitation is received, etc.:

*Attendance at rehabilitation, scheduled therapy sessions, scheduled surgery, second medical opinions and referrals to specialists are all monitored by the Exempt Employment Worker. This is done using requests for documentation, monthly attendance sheets, and calls to physicians and treatment providers. The exempt individual is required to submit monthly progress reports or attendance reports of their course of treatment to this Employment Worker.*

### **Section 3.9 Strategies/Procedures for Increasing Program Attendance**

Describe district policies and/or procedures in place to reduce the amount of time participants fail to participate in work activities, including absences that are with good cause.

*When an individual fails to comply with a work requirement, he/she is sent a conciliation notice. At the time of this interview, the Employment Worker will address the non-compliance. If possible we also have the Intensive Case Manager or a mentor from the Chamber of Commerce present for this meeting. The goal is to avoid the sanction and bring the individual into compliance. If the individual is willing to comply, no sanction is imposed and a mentor or case manager is assigned to closely monitor compliance.*

### **Section 3.10 Strategies/Procedures for Engaging Sanctioned Temporary Assistance Participants**

District has no specific strategies to engage sanctioned participants.

District attempts to engage sanctioned participants as soon as they are sanctioned using the following strategies:

*The DCDSS Responsible Parent Initiative's goal is to assess and engage clients who are on an employment sanction or in jeopardy of being sanctioned in employment activities.*

*Sanctioned TA recipients who are eligible to have their sanctions concluded but fail to do so are identified by Employment Unit staff. They are then referred the Responsible Parent Initiative mentor at the Chamber of Commerce. The mentor works closely with the individual and the Employment Worker to assist him/her in overcoming barriers to compliance. Sanctioned TA recipients who have been sanctioned for more than 6 months and sanctioned individuals whose expenses exceed their pro-rated grant are brought in for a special eligibility interview. The interview explores whether the TA recipients are managing to meet their household expenses without their share of the TA grant. TA recipients are also asked to identify problems that they or their immediate family might be having that would prevent them from working. The manager will then refer those who*

*are meeting their needs without ample TA monies and no logical explanation to the Special Investigations Unit for follow up. Those individuals who are still not willing to comply in order to conclude their sanction are also referred to the Responsible Parent Initiative program.*

District attempts to engage sanctioned participants when the durational period of the sanction is completed using the following strategies:

*Responsible Parent Initiative -- same as above*

District attempts to engage sanctioned participants during different times in the sanction period using the following strategies:

*Same as above*

### **Section 3.11 Diversion Strategies**

District has no specific diversion strategies.

District's diversion strategies are described below:

*TA and Employment Workers assess the need for items listed below to divert an individual from the need for ongoing assistance:*

- *Car purchase and repairs through CST/WFW and DSS purchase for individuals who are verified to be working and do not live and work within public transportation routes or need a car to perform the job function (i.e. – CNA). Individual applying for purchase of a car must work his/her scheduled hours for 2 full weeks prior to us purchasing the car. We will pay for alternate transportation for this time period if necessary. Car value must be at or below NADA book value and vehicle being purchased must be inspected by an independent certified mechanic.*
- *Rent and security to allow an individual to locate near an verified job*
- *Bus passes, train fare, taxi fare for transportation to a job until first paycheck is received.*
- *Child care to allow an individual to accept a verified job immediately*
- *Tools or clothing to allow an individual to begin a verified job*

### **Section 4 Supportive Services (Reference 18 NYCRR 385.4)**

#### **Section 4.1 For Temporary Assistance Applicants and Recipients in Work Activities**

- a. The social services district will provide childcare in accordance with the childcare section of the district's Child and Family County Services Plan. The district will also provide to participants the following expenses which the district deems necessary for the individual to participate in orientation, assessment, employment planning, work activities and activities to restore self-sufficiency:

1. *Expenses for motor vehicles only when applicant/recipient does not live within two (2) miles of public transportation and who have no other means of transportation or who work during a time when public transportation is unavailable as follows:*
  - a. *For an applicant or recipient owned motor vehicle up to \$1500, or the retail value as listed in the NADA Appraisal Guide whichever is less for repairs if the applicant/recipient has a job or bona fide offer of employment or, if a recipient, he/she has been assigned to a work activity where such transportation is required and the motor vehicle will pass NY State inspection upon completion of the repair.*
  - b. *Up to \$1,000, or the minimum down payment whichever is less towards a liability insurance premium or other insurance related fees excluding comprehensive and collision insurance premiums for an applicant/recipient owned motor vehicle which has passed New York State inspection.*
  - c. *Up to \$4,500 for the purchase and/or concomitant repair of a motor vehicle which will pass New York State inspection for a recipient who has a New York State drivers license and a full time job or a bona fide offer of employment if a motor vehicle is otherwise unavailable from community resources.*
    - i. *Car value must be at or below NADA book value*
    - ii. *Prior to a vehicle being purchased an inspection by an independent certified mechanic will be completed.*
    - iii. *Individual applying for the car must work his/her scheduled hours for 2 full weeks prior to us purchasing the car. We will pay for alternate transportation for this time period if necessary.*
  - d. *Funds for motor vehicle registration of a client owned motor vehicle.*
  - e. *Funds for obtaining or renewing a NYS driver's license including fees for mandatory 6 hour class when needed to get or retain job or job promotion.*
  - f. *Recipients who own their own vehicle and do not live within 2 miles of public transportation will be issued mileage reimbursement at the rate of .050 cents per mile to travel to and from work activities.*
2. *Expenses in order to take public transportation to participate in employment activities or to report to paid employment until recipient's first pay check is received.*

3. *Expenses for uniforms or necessary clothing required to participate in employment or employment activities up to \$150 upon request. Repeat requests will be evaluated on a case-by-case basis..*
4. *Tuition, academic fees, books supplies for recipients who have been referred by DCDS to training activities.*
5. *Expenses required for taking the exams for professional certification necessary to obtain employment including travel expenses.*
6. *Expenses for tools and equipment necessary to participate in a work activity or a specific job not to exceed \$500 per activity or job.*
7. *Expenses related to start up of a client owned and operated business which must meet the following criteria:*
  - a. *there must be a demand for the service/product in the local job market, and*
  - b. *the client must demonstrate the ability to earn a self-supporting wage in the business (i.e. client must possess any requisite professional licenses or certificates, education or training) not to exceed \$500 per business start up, and*
  - c. *The client is unable to obtain other employment.*

*In assessing and providing the above listed services, the needs of work limited individuals will be accommodated.*

- b. The district will use the following approach to assist those participants who need transportation to and from a work activity site, including any applicable mileage reimbursement rate, and the method used by the district to arrive at that reimbursement rate:
  1. *Bus schedules will be provided to applicants and recipients and travel routes explained in detail by employment workers. Bus passes will be made available for any work activities including job search.*
  2. *For recipients who live more than two miles from their work activity site, public transportation rates will be issued or, with a documented physical condition, arrangements will be made with the Dutchess County Loop transportation system to provide appropriate transportation.*
  3. *Recipients who own their own vehicle and do not live within two (2) miles of public transportation will be issued mileage reimbursement at the rate of .505 cents per mile to travel to and from work activities.*

The district will use the following means to transport clients to its remote sites:

c. The district will use the following approach for those individuals who reside in an area where public transportation is not available. In those instances where the district would require a participant to walk to a work activity assignment, please identify the maximum distance the client would be expected to walk, along with a rationale for the maximum distance.

*The agency will make diligent efforts to secure transportation for recipients who live more than two (2) miles from public transportation, including the offer of a referral to housing so that recipient can relocate to an area which is within 2 miles of public transportation.*

*Where the lack of transportation is a direct barrier to participation in a work activity the agency will make a reasonable effort to assign the recipient to an appropriate work activity at a site as close as possible to their home. At the initial and any subsequent contacts, the Employment worker together with the individual develops a transportation plan to get to and from a work activity site.*

*In all instances we will accommodate individuals with work limitation.*

d. The district will provide the following services to assist individuals at risk of needing public assistance to improve their opportunities for employment or to maintain their employment:

*The same supportive services listed in Section 4.1 are available to individuals applying who are not financially eligible for on-going assistance but are in need of emergency services.*

*All employable TA applicants are enrolled in Applicant Job Search. Those not categorically or financially eligible for ongoing assistance may be referred to the OTDA JOBS counselor.*

*For applicants who are employed but at risk of losing their job because of child care, they may be referred to the Dutchess County Child Care Council for help securing providers and low income child care for possible financial help. Vehicle assistance will be considered by the same criteria as for recipients as follows:*

*If a recipient or emergency applicant cannot be accommodated by 4.1.b the following services will be considered, individually or collectively as diversionary services until first pay check is received:*

- *Minimum payment to continue or initiate car insurance coverage;*
- *Client owned car repairs*
- *Assessed/validated by a DSS appointed repair shop with two to three cost estimates based on safety and DMV standards and Kelly Blue Book value of the vehicle. Cost of repairs not to exceed \$1,500 or value of vehicle;*

- *Payment of car loan installments to prevent repossession if cost effective;*
- *Purchase of a used car through dealer or private sale (to be inspected prior to purchase by a DSS appointed shop) not to exceed \$3,500 (inclusive of any pre-delivery repairs);*
- *Cost of DMV vehicle registration;*
- *Expenses related to getting a driver's license permit text, driver training (classroom and road, license).*

*All client owned vehicle issues require the client have a "clean" and valid NYS license.*

- e. Following is a description of how the district accommodates the needs of non-English speaking participants in accessing employment activities and services (or see below):

*Dutchess County has a listing of individuals in the Agency who speak languages other than English who can be called upon to translate. If this does not meet our needs, we use the AT & T Language Line Services. The listing and information on the AT&T service are listed in the DCDSS Employee Handbook.*

[ ] This is not generally applicable in our area (never or rarely have occasion to serve such individuals).

#### **Section 4.2 Transitional Supportive Services**

The district will provide the following supports and strategies to support job retention:

*Mentoring services through the Chamber of Commerce  
 Transitional Food Stamp benefits frozen at pre-employment rate for 5 months  
 Transitional Medicaid coverage for 6 and possibly 12 months  
 Transitional Child Care benefits for 12 months*

The district will provide the following supportive services, for up to 90 days after case closing, to individuals whose Temporary Assistance cases have closed due to employment.

- A. *Upon submission of new application, the DCDSS will first determine if the former recipient has available income or resources to meet the supportive service need. If the agency determines that there is not sufficient income or resources then the following transitional supportive services may be provided.*
1. *Transportation monies to take public transportation or money for gas for clients utilizing cars that they own to travel to/from work.*
  2. *Car repairs/insurance to client owned motor vehicle necessary to travel to work if no public transportation is available.*

3. *Fees for professional licenses renewals or certifications necessary to retain current employment.*

#### **Section 4.3 Extended Supportive Services**

As long as funding is available (through FFFS, etc.), the district will provide the following supportive services for individuals who are eligible under the TANF Services 200% of poverty eligibility guidelines.

*As long as funding is available, the district will provide supportive services in accordance with the approved FFFS Plan for approved Temporary Assistance individuals who are eligible under the 200% of poverty income eligibility guidelines to enable them to obtain or retain employment or to upgrade their skills.*

#### **Section 4.4 Supportive Services for Food Stamp Employment & Training (FSET)**

**Participants:** (Reference 18 NYCRR 385.4(b))

The district provides necessary childcare in accordance with the childcare section of the Child and Family County Services Plan.

- a. Following is the district's policy for providing transportation services for FSET participants:

*The rate of payment or reimbursement for transportation shall be at a minimum of \$25 per month per individual. Participant costs after the first \$25 payment or reimbursement per month will be reimbursed for taking public transportation, or, if the client utilizes his/her own vehicle, money for gas, for traveling to and from a work activity.*

- b. The district will provide the following supportive services in addition to transportation:

*Mentoring Services*

#### **Section 5 – Temporary Assistance Conciliation and Dispute Resolution Procedures; Food Stamp “Good Cause” Determination Procedures (Reference 18 NYCRR 385.11 and 385.12)**

##### **Section 5.1 Conciliation**

The district's conciliation process is in accordance with 18 NYCRR 385.11(a).

Conciliations are conducted (check all that apply.) :

in person

by phone

by mail, etc.

other as described below:

*The Agency will issue a written notice through CMS that indicates that a failure or refusal to participate has occurred, and that the applicant or recipient has a right to provide reasons for such failure or refusal to participate. A Safety Net applicant/recipient*

will be given 7 days to respond, a Family Assistance applicant/recipient will be given 10 days to respond.

*If the applicant/recipient does not respond within the allotted time, the case will be denied or a ten-day notice of intent to reduce or discontinue Safety Net or Family Assistance will be sent.*

*If the applicant/recipient does respond within the allotted, the applicant/recipient will be responsible for providing Agency staff with reasons for his/her failure or refusal to comply. This may be done by phone or in person. If the Agency staff determines that the failure to comply was willful and without good cause, a ten-day notice of intent to discontinue or reduce temporary assistance will be issued.*

*Every effort will be made to engage the individual in a work activity and avoid a sanction.*

The good cause determination is made by:

- client's employment worker
- a supervisor
- separate entity (please describe below)
- other (please describe below)

*Applicants and recipients who have failed or refused to comply with their Food Stamp program employment requirements will be provided an opportunity to submit information to the district so that a good cause determination can be made. The district will issue a timely notice that indicates a failure or refusal to participate has occurred, and that the applicant or recipient has a right to provide reasons for such failure or refusal to participate.*

*If the applicant/recipient does not respond within the allotted time, the case will be denied or a ten-day notice of intent to reduce or discontinue Food Stamps Assistance will be sent.*

### **Section 5.2 Sanction**

The district's procedure for determining compliance for those individuals who wish to end their employment sanction (18NYCRR 385.11(b), 385.12) is:

*Compliance for individuals who wish to end their employment sanction once the timed portion has expired is defined as participating in a WEP assignment for 5 consecutive days.*

### **Section 5.3 Dispute Resolution**

The district's procedure for individuals who wish to dispute their work activity assignments, including individuals who dispute the district's response to their request for health-related accommodations is conducted in accordance with 18 NYCRR 385.11(b).

The grievance is mediated by:

- an agreement with an independent entity
- supervisory staff who are trained in mediation and who have no direct responsibility for the individual's case
- designated supervisory staff who have no direct responsibility for the individual's case but who are not trained in mediation

#### Section 5.4 Food Stamps Good Cause Determination

The district's procedure for determining if good cause exists for applicants and recipients who fail to comply with Food Stamp Program employment requirements is in accordance with 18 NYCRR 385.12(c) and is conducted:

- conciliation is offered in the same manner as described in Section 5.1 of this plan;
- by the Employment worker using available information, including that provided by the participant, to determine if there was a good cause reason.
- Other (described below)

#### Section 6 – Disability Determinations (Reference 18 NYCRR 385.2(d))

The district's process for determining an individual's disabilities and/or work limitations is in accordance with 18 NYCRR 385.2(d). Check all that apply:

- District participates in the OTDA managed contract for independent medical evaluations.
- District contracts with a physician to provide independent medical evaluations.
- District accepts physician's statement provided by participant.
- District accepts physician's statement provided by participant but refers for an independent evaluation when deemed necessary
- Other process, described below.

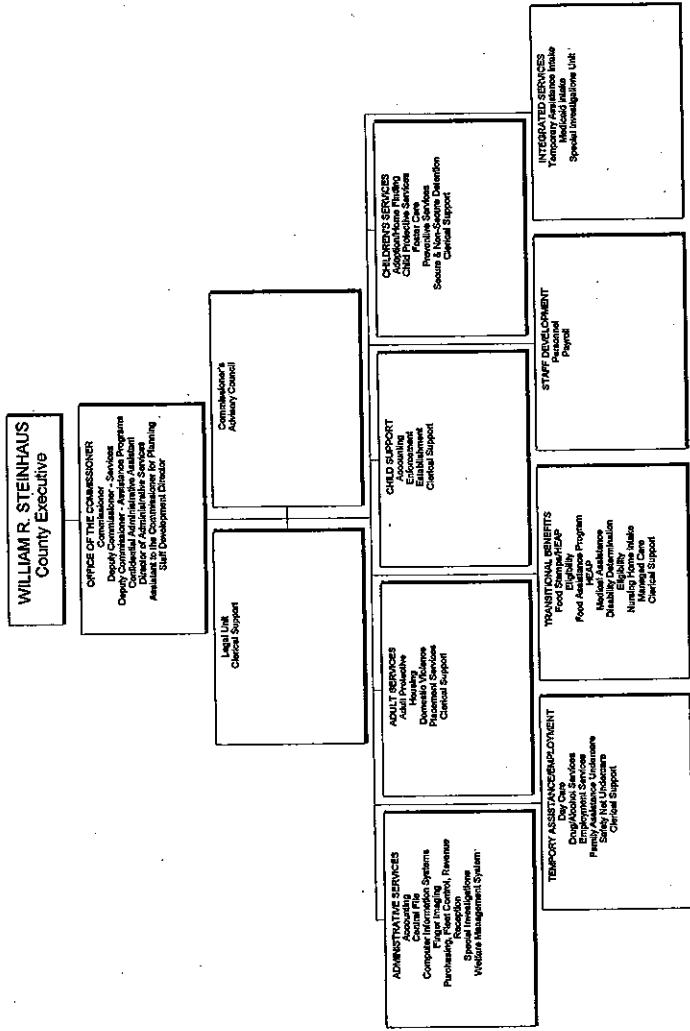
*An applicant or recipient who claims to be unable to work or to have limitations with regard to employment will be issued a DSS 4526 to be completed by his/her treatment provider and returned to the agency within 10 days. Upon receipt of the completed DSS-4526, the agency will determine the applicant/recipient's ability to work and any limitations they might have with respect to employment. The agency may decide if the recipient's medical documentation is sufficient to make a decision. The Department will also send either a LDSS-4005 or a DSS-4005(a) to the client notifying him/her of the disability determination and the right to request a fair hearing.*

*The agency may refer individuals who either claim to have a physical or mental impairment or who it suspects to have a physical or mental impairment to IMA for a determination of the individual's medical condition.*

The local process for reviewing the medical documentation to determine if the individual is exempt, nonexempt, or work-limited is as follows.

- District directs the contracted physician or individual's physician to determine status.
- District review team reviews and determines status (described below)
- Specialized disability/medical staff or unit reviews and determines status (described below).
- Other, described below:  
*Supervisor or Specialist in Employment unit reviews all available medical documentation and makes the determination of status. Calls will be made to treating physicians and additional documentation may be required as well as referrals to IMA.*

# DEPARTMENT ORGANIZATIONAL CHART



## ATTACHMENT A

Name \_\_\_\_\_ Date \_\_\_\_\_

Social Security Number \_\_\_\_\_ Birthdate \_\_\_\_\_

## **ASSESSMENT ESSENTIALS**

### **PROGRAM OVERVIEW**

Introduction and Program Goals

Learning Needs Screening

Doctor and Medication Report

Work History

Work Survey

Education and Skills Survey

Computer Skills Survey

Potential Barrier Survey

TABE Locator Test

Writing Sample

Reading Test

Math Test

## **ATTACHMENT B**

Amendment

Effective Date \_\_\_\_\_

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Name: \_\_\_\_\_

### Name of Doctors, Clinics You Currently See

NAME OF DOCTOR	ADDRESS	WHAT DO YOU SEE FOR	HOW OFTEN

### Current Medications

MEDICATIONS	WHO PRESCRIBED	HOW OFTEN	WHAT FOR

Amendment

Effective Date \_\_\_\_\_

### LEARNING NEEDS SCREENING

#### Section A

1. Did you have any problems learning in middle school or junior high school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Do any family members have learning problems?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Do you have difficulty working with numbers in columns?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Do you have difficulty judging distances?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Do you have problems working from a test booklet to an answer sheet?	
# of "Yes" responses for Section A _____ x 1 = _____	

#### Section B

6. Do you have difficulty or experience problems mixing arithmetic signs (+, x, etc.)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Did you have any problems learning in elementary school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
# of "Yes" responses for Section B _____ x 2 = _____	

#### Section C

8. Do you have difficulty remembering how to spell simple words you know?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Do you have difficulty filling out forms?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Do you have difficulty memorizing numbers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
# of "Yes" responses for Section C _____ x 3 = _____	

#### Section D

11. Do you have trouble adding and subtracting small numbers in your head?	<input type="checkbox"/> Yes <input type="checkbox"/> No
12. Do you have difficulty or experience problems taking notes?	<input type="checkbox"/> Yes <input type="checkbox"/> No
13. Were you ever in a special program or given extra help in school?	<input type="checkbox"/> Yes <input type="checkbox"/> No
# of "Yes" responses for Section D _____ x 4 = _____	

TOTAL "YES" RESPONSES X FACTOR INDICATED IN A,B,C, D \_\_\_\_\_

Has client ever been diagnosed or told he/she has a learning disability?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes," by whom and when? _____	

Screening administered by \_\_\_\_\_

Amendment

Effective Date \_\_\_\_\_

# WORK HISTORY

Please record your employment history, beginning with then lost recent:

---

Employer Name/Address \_\_\_\_\_

Type of work \_\_\_\_\_ FT/ PI (circle) Usual hrs/wk \_\_\_\_\_

Start date \_\_\_\_\_ End date \_\_\_\_\_

Start Wage \_\_\_\_\_ End Wage \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Liked about job \_\_\_\_\_

Disliked \_\_\_\_\_

Do you have a written reference from this job? Y N Can you get one? Y N

---

Employer Name/Address \_\_\_\_\_

Type of work \_\_\_\_\_ FT/ PI (circle) Usual hrs/wk \_\_\_\_\_

Start date \_\_\_\_\_ End date \_\_\_\_\_

Start Wage \_\_\_\_\_ End Wage \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Liked about job \_\_\_\_\_

Disliked \_\_\_\_\_

Do you have a written reference from this job? Y N Can you get one? Y N

---

Employer Name/Address \_\_\_\_\_

Type of work \_\_\_\_\_ FT/ PI (circle) Usual hrs/wk \_\_\_\_\_

Start date \_\_\_\_\_ End date \_\_\_\_\_

Start Wage \_\_\_\_\_ End Wage \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Liked about job \_\_\_\_\_

Disliked \_\_\_\_\_

Do you have a written reference from this job? Y N Can you get one? Y N

Amendment

Effective Date \_\_\_\_\_

# WORK SURVEY

Do you have a resume? N \_\_\_\_\_ Y \_\_\_\_\_ (Please attach if you have one)

If you answered Y is it current? N \_\_\_\_\_ Y \_\_\_\_\_

How long has it been since you were employed? \_\_\_\_\_

Was your last employment full or part time? \_\_\_\_\_

What is the longest continuous employment you have had? \_\_\_\_\_

Employer: \_\_\_\_\_

How long did you work there? \_\_\_\_\_

When did you work there? Start \_\_\_\_\_ End \_\_\_\_\_

Have you left a job without having another job to go to? \_\_\_\_\_

N \_\_\_ Y \_\_\_ Explain \_\_\_\_\_

What was the best job you have had? \_\_\_\_\_

When did you work there? \_\_\_\_\_

Why did it end? \_\_\_\_\_

Have you failed to be hired for jobs you were qualified to do? \_\_\_\_\_

N \_\_\_\_\_ Y \_\_\_\_\_ Why do you think that has happened? \_\_\_\_\_

\_\_\_\_\_

Name \_\_\_\_\_

# EDUCATION, SKILLS, AND STRENGTHS

Do you have a long term career goal?

Y \_\_\_\_\_ N \_\_\_\_\_ Describe \_\_\_\_\_

Are, you planning to continue your education and/or training?

N \_\_\_\_\_ Y \_\_\_\_\_ Explain \_\_\_\_\_

What is the highest grade you completed?      0 1 2 3 4 5 6 7 8 9 10 11 12 +

Do you have a high school diploma or GED?      N \_\_\_\_\_ Y \_\_\_\_\_

If you answered Y: What Type: (circle one)

GED      When awarded \_\_\_\_\_ Score \_\_\_\_\_

NYS      Regents \_\_\_\_\_  
Local \_\_\_\_\_  
IEP \_\_\_\_\_  
Other (Describe) \_\_\_\_\_

Non-NYS      Where \_\_\_\_\_  
Regular \_\_\_\_\_  
IEP \_\_\_\_\_  
Other (Describe) \_\_\_\_\_

High School Vocational Certificates Earned or Vocational Training received

Have you been enrolled in any educational programs since you left school?

N \_\_\_\_\_ Y \_\_\_\_\_ What type:

GED Prep (When, where, etc.) \_\_\_\_\_

Certificate/Skills Programs (When, where, skills, etc.) \_\_\_\_\_

College Courses/Degrees (When, where, degree, etc.)

---

---

On-the-Job Training (OJT) (When, where, skills, etc.)

---

---

What were your best/favorite subjects in school? \_\_\_\_\_

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What would you say are your work-related strengths? \_\_\_\_\_

---

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Name \_\_\_\_\_ Date \_\_\_\_\_

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# POTENTIAL BARRIERS TO EMPLOYMENT

What is your age? \_\_\_\_\_

Are you a U.S. citizen? Y \_\_\_ No \_\_\_ Citizenship Status \_\_\_\_\_

Do you have dependent children?

N \_\_\_ Y \_\_\_ Please list:

- 1) M F Age \_\_\_\_\_ Custody Y N Joint
- 2) M F Age \_\_\_\_\_ Custody Y N Joint
- 3) M F Age \_\_\_\_\_ Custody Y N Joint
- 4) M F Age \_\_\_\_\_ Custody Y N Joint
- 5) M F Age \_\_\_\_\_ Custody Y N Joint

Are you pregnant? N \_\_\_ Y \_\_\_ Due date \_\_\_\_\_

If you are a custodial parent of dependent children:

Are you (or will you be) a single parent? N \_\_\_ Y \_\_\_

Are your children in need of or currently in childcare (including school-aged children)?

N \_\_\_ Y \_\_\_ Ages \_\_\_\_\_

Special needs \_\_\_\_\_

Preferred Care Arrangements \_\_\_\_\_

Emergency/ Back-up Care Arrangements \_\_\_\_\_

Are there adult family members who you are responsible to care for?

N \_\_\_ Y \_\_\_ Explain \_\_\_\_\_

Do you have a current NYS Driver's License? N \_\_\_ Y \_\_\_

If you answered Y: Do you have access to a car? N \_\_\_ Y \_\_\_

How do you plan to get to work? \_\_\_\_\_

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If you answered N: Why not? \_\_\_\_\_

Do you have access to public transportation? Y \_\_\_ N \_\_\_

How do you plan to get to work? \_\_\_\_\_

Are you dependent upon alcohol and/or drugs? N \_\_\_\_\_ Y \_\_\_\_\_

Are you currently in treatment for alcohol/drug dependence? N \_\_\_ Y \_\_\_  
Where? \_\_\_\_\_

Have you ever been treated for alcohol/drug dependence? N \_\_\_\_\_ Y \_\_\_\_\_  
When? \_\_\_\_\_ Where? \_\_\_\_\_

Have you ever been convicted of a crime? N \_\_\_\_\_ Y \_\_\_\_\_  
If you answered Y: Felony or Misdemeanor (s) \_\_\_\_\_  
Currently on probation? N \_\_\_\_\_ Y \_\_\_\_\_  
Currently on parole? N \_\_\_\_\_ Y \_\_\_\_\_  
Date of release if you have been incarcerated \_\_\_\_\_

Are you involved in legal issues that require frequent court appearances?

N \_\_\_ Y \_\_\_ Explain \_\_\_\_\_

Do you have physical, mental, or medical impairments that would interfere with your ability to work?

N \_\_\_ Y \_\_\_ Explain \_\_\_\_\_  
\_\_\_\_\_

Do you have significant dental problems or need dentures?

N \_\_\_\_\_ Y \_\_\_\_\_ Explain \_\_\_\_\_

Is your housing unstable or are you homeless?

N \_\_\_\_\_ Y \_\_\_\_\_ Explain \_\_\_\_\_

Do you have limited skills or a lack of training and/or education?

N \_\_\_\_\_ Y \_\_\_\_\_ Explain \_\_\_\_\_

Do you have a limited or poor work history?

N \_\_\_\_\_ Y \_\_\_\_\_ Explain \_\_\_\_\_

Has it been more than 6 months since you were last employed? N \_\_\_ Y \_\_\_

How long? \_\_\_\_\_

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Is your English Language proficiency limited or is your speech heavily accented?

N \_\_\_\_\_ Y \_\_\_\_\_ Explain \_\_\_\_\_

Do you work slowly or have trouble getting work done on time?

N \_\_\_\_\_ Y \_\_\_\_\_ Explain \_\_\_\_\_

Do you lack self-confidence, have difficulty with decision-making or organization?

N \_\_\_\_\_ Y \_\_\_\_\_ Explain \_\_\_\_\_

Do you have difficulty with impulse control or anger management?

N \_\_\_\_\_ Y \_\_\_\_\_ Explain \_\_\_\_\_

Are there any additional factors that may be barriers to your full employment?

N \_\_\_\_\_ Y \_\_\_\_\_ Explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name \_\_\_\_\_

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# Tests of Adult Basic Education Forms 7 and 8 Survey

## LOCATOR TEST

### Reading

NAME \_\_\_\_\_

DATE \_\_\_\_\_

SCORE \_\_\_\_\_

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Tests of Adult Basic Education Forms 7 and 8 Survey

READING TEST LEVEL

Test 1 Reading

NAME \_\_\_\_\_

DATE \_\_\_\_\_

SCORE \_\_\_\_\_

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# Tests of Adult Basic Education Forms 7 and 8 Survey

## MATHEMATICS TEST LEVEL

### Test 2 Mathematics Computation

### Test Applied Mathematics

NAME \_\_\_\_\_

DATE \_\_\_\_\_

SCORE \_\_\_\_\_

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**TECHNOLOGY ASSISTANCE PROGRAM**

Nubian Directions II

**COMPUTER SKILLS ASSESSMENT**

Name: \_\_\_\_\_ Case #: PA \_\_\_\_\_ XX

Phone: \_\_\_\_\_ Date: \_\_\_\_\_

Do you own a computer? \_\_\_\_\_

Do you know how to type? \_\_\_\_\_

Have you ever used a computer? \_\_\_\_\_ If no, stop.

Have you taken computer classes? \_\_\_\_\_

If yes, where? \_\_\_\_\_ Date \_\_\_\_\_

Do you have a resume? \_\_\_\_\_

Do you know how to use a computer keyboard? \_\_\_\_\_

Do you know how to use a computer mouse? \_\_\_\_\_

Do you know how to use the Start menu on a computer? \_\_\_\_\_

Do you know how to open a Microsoft Word document? \_\_\_\_\_

Do you know how to save a Microsoft Word document? \_\_\_\_\_

Do you know how to access the Internet? \_\_\_\_\_

Do you know how to conduct an Internet search? \_\_\_\_\_

Do you know how to read an Internet job board? \_\_\_\_\_

Do you know how to fill out a job form on the Internet? \_\_\_\_\_

Do you know how to write and send an e-mail? \_\_\_\_\_

Do you have an email account? \_\_\_\_\_

What time would you prefer? (Check all that apply): 9am -1 pm 2 X per week \_\_\_\_\_

1pm - 5pm - 2X per week \_\_\_\_\_ 5pm - 7pm - 4X per week \_\_\_\_\_

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# ASSESSMENT ESSENTIALS - SUMMARY SHEET

Name \_\_\_\_\_ SS # \_\_\_\_\_ Session Date \_\_\_\_\_

## Learning Disabilities Screening (Washington State Screening)

Notes/Score \_\_\_\_\_  
\_\_\_\_\_

## Academic Skills

Locator \_\_\_\_\_  
Reading TABE Survey Level/Form \_\_\_\_ / \_\_\_\_ Grade Level Score \_\_\_\_  
Math TABE Survey Level/Form \_\_\_\_ / \_\_\_\_ Grade Level Score \_\_\_\_  
Writing Sample \_\_\_\_\_  
\_\_\_\_\_

Testing Notes \_\_\_\_\_  
\_\_\_\_\_

## Education/Skills

Highest Grade/Level \_\_\_\_\_  
Graduation Status \_\_\_\_\_  
Computer Skill Level \_\_\_\_\_  
Education Notes \_\_\_\_\_  
\_\_\_\_\_

## Work History

Resume? N \_\_\_\_\_  
Y \_\_\_\_\_ Is it up to date? N \_\_\_\_\_ Y \_\_\_\_\_

How Long Unemployed \_\_\_\_\_ Longest job \_\_\_\_\_  
Employment Notes \_\_\_\_\_  
\_\_\_\_\_

## Potential Barriers

Barrier Notes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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# ASSESSMENT - NO TABE TEST - SUMMARY SHEET

Name \_\_\_\_\_ SS # \_\_\_\_\_ Session Date \_\_\_\_\_

## Learning Disabilities Screening (Washington State Screening)

Notes/Score \_\_\_\_\_  
\_\_\_\_\_

## Academic Skills

No Testing

Writing Sample \_\_\_\_\_  
\_\_\_\_\_

Testing Notes \_\_\_\_\_  
\_\_\_\_\_

## Education/Skills

Highest Grade/Level \_\_\_\_\_

Graduation Status \_\_\_\_\_

Computer Skill Level \_\_\_\_\_

Education Notes \_\_\_\_\_

## Work History

Resume? N \_\_\_\_\_  
Y \_\_\_\_\_ Up to date? N \_\_\_\_\_ Y \_\_\_\_\_

How Long Unemployed \_\_\_\_\_ Longest job \_\_\_\_\_

Employment Notes \_\_\_\_\_  
\_\_\_\_\_

## Potential Barriers

Barrier Notes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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