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 | ADMINISTRATIVE DIRECTIVE |
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TRANSMITTAL: 96 ADM-20

TO: Commissioners of
 Social Services

DIVISION: Temporary
 Assistance/
 Services and
 Community
 Development

DATE: December 27, 1996

SUBJECT: Responsibilities of Homeless Individuals and Families

SUGGESTED

DISTRIBUTION: Public Assistance Staff
 Directors of Services
 WMS Coordinators
 Staff Development Coordinators
 Agency Attorneys

CONTACT

PERSON: Call 1-800-343-8859 and ask for the following:
 Temporary Assistance: Team 1, 3-0332; Team 2,
 4-9344; Team 3, 4-9307; Team 4, 4-3231; Team 5,
 3-1469; Team 6, 212-383-1658
 Housing and Adult Services: Jane Wagner 518 432-2403

ATTACHMENTS:

Attachment A: Sample Budget - available on-line
 Attachment B: Informational Notice - available on-line
 Attachment C: Model Independent Living Plan -
 available on-line
 Attachment D: Filing References - available on-line

FILING REFERENCES

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
See Attachment D	See Attachment D	See Attachment D	See Attachment D	See Attachment D	See Attachment D

I. PURPOSE

The purpose of this directive is to advise social services districts (SSDs) of the enactment of 18 NYCRR 352.35 regarding the provision of temporary housing assistance (THA) and of procedures for reviewing and acting upon applications for THA by homeless families and individuals. Additionally, this directive describes the eligibility requirements with which a homeless individual or family must comply in order to receive THA.

II. BACKGROUND

Homelessness among families and individuals in the State of New York has continued to grow despite the commitment of considerable resources for prevention and the development of permanent and supportive housing. The demand for temporary housing for homeless persons at times exceeds the supply of available resources. This directive more clearly defines the responsibilities of persons applying for and receiving THA, to ensure that THA is being provided only to persons who have no other available housing or the means to secure other housing. Additionally, THA must be provided with regard to the ability of individuals and families to live independently and their needs for housing-related assistance must be identified. Failure to ensure that THA is provided only to those persons who have no other housing resources and failure to identify the housing-related needs of homeless persons results in fewer available resources for those persons who are most in need of THA. To address these issues more clearly, the Department promulgated 18 NYCRR 352.35 which establishes standards for SSDs to provide THA. These regulations also set forth the housing-related responsibilities of homeless persons who apply for and receive THA.

III. PROGRAM IMPLICATIONS

If information in this directive conflicts with any information provided in previous transmittals of the Department, this directive supersedes such other information.

As a result of these regulations and procedures, THA will be provided only to persons who do not have other available resources, and who comply with the requirements outlined in this directive.

As a condition of eligibility for THA, individuals and families must comply with the requirements of 18 NYCRR 352.35 of Department regulations as implemented by this directive. SSDs must deny or discontinue THA in accordance with this directive.

IV. REQUIRED ACTION

A. DEFINITIONS

ASSESSMENT

Assessment is the evaluation of an individual's or family's housing and housing-related public assistance and care needs including, but not limited to, the availability of housing, the need for THA, employment and educational needs, the need for preventive or protective services, the ability to live independently, and the need for treatment of physical and mental health problems, including substance abuse.

INDEPENDENT LIVING PLAN

This is a plan developed and/or revised by an SSD and/or its designee, with the cooperation of an individual or family, which sets forth a strategy for meeting such individual's or family's housing-related public assistance and care needs as identified in an assessment, and for obtaining housing other than temporary housing. Additionally, it establishes such individual's or family's responsibilities during their receipt of THA and it specifies the conditions upon which THA will be provided. An independent living plan also must specify the temporary housing facility, if any, to which the individual or family has been or will be referred, any requirements of such facility, and the expected duration of the individual's or family's receipt of THA.

TEMPORARY HOUSING

Temporary housing includes family shelters and shelters for homeless pregnant women authorized by 18 NYCRR 900 and 1000 , room and board authorized by 18 NYCRR 352.8(b) which is provided to a homeless person on a temporary basis, hotel/motel facilities authorized by 18 NYCRR 352.3(e) and shelters for adults authorized by 18 NYCRR 491.

TEMPORARY HOUSING ASSISTANCE

This is a public assistance benefit provided temporarily for an eligible homeless individual or family to meet the costs of temporary housing.

B. PUBLIC ASSISTANCE

1. Assessment

Responsibility of SSD:

The SSD must conduct an assessment, as defined above, whenever an individual or family applies for or is receiving THA. This assessment is something that is already being done in most SSDs. The SSD should conduct the assessment at the time that the THA is requested, or as soon as possible thereafter. SSDs

must conduct an assessment for individuals and families already receiving THA, if an assessment has not already been done. If an assessment has not been done, it must be completed at the time of the recipient's next recertification.

Assessment is an evaluation by the SSD of the individual's or family's housing and housing-related public assistance and care needs. This evaluation should include, but not be limited to, the exploration of such things as the availability of alternate temporary or permanent housing in the community, the need for and amount of THA, employment and educational needs, the need for preventive or protective services, the ability to live independently and the need for treatment of physical and mental health problems, including substance abuse. Assessment and planning activities should be coordinated with child welfare in instances where a family has an existing child welfare services case.

Once the SSD has identified an individual's or family's housing-related needs, it must evaluate if the needs are a contributing factor to the homelessness, and whether addressing the needs will assist the individual or family to alleviate the homeless situation. For example, the SSD would evaluate whether an educational deficit or substance abuse problem directly contributes to the individual's or family's need for THA.

The SSD must record the results of the assessment in the applicant's or recipient's case record.

Responsibility of Individual or Family:

When an individual or family applies for or receives THA, they must cooperate in the completion of an assessment conducted by the SSD. This means that they must cooperate in securing requested documentation for such things as income, resources, unavailability of alternate housing, and physical or mental incapacity, collateral sources of documentation if necessary, etc. to enable the SSD to determine eligibility for THA. Where physical or mental incapacity is claimed, or suspected by the SSD, it may require the applicant to participate in an evaluation to determine if a physical or mental impairment is present.

If the individual or family is unable to produce required documentation, they must be able to explain the reason. Where the applicant needs assistance in obtaining information or documentation relevant to the verification of eligibility, the SSD will attempt to assist the applicant to obtain such information or documentation.

When an individual or family fails to cooperate in completing the assessment, and the failure is not due to a verified mental or physical incapacity of the individual or family

member, the SSD must deny THA. Mental or physical incapacity is further discussed in section B.5.

Examples of failure to cooperate in the assessment include failure to comply with child support enforcement activities, failure to comply with job search requirements, failure to apply for SSI and failure to provide information regarding prior housing arrangements.

2. Independent Living Plan

Responsibility of SSD:

SSDs or their designees must develop Independent Living Plans (ILPs) for eligible individuals and families, only if the SSD has determined that such a plan will assist the individual or family to obtain and maintain housing other than temporary housing. Although SSDs remain responsible for appropriateness and content of ILPs, they may delegate the responsibility for the development of the ILP to a designee, i.e., a THA provider or other agent. When SSDs are determining whether an ILP would assist the individual or family to move out of temporary housing, SSDs must consider such factors as the specific circumstances of the individual or family. The types of circumstances which must be considered in determining whether an individual or family should have an ILP include, but are not limited to: a determination that substance abuse is occurring; a history of eviction for destruction of housing; a requirement to participate in court mandated activities relating to child neglect or reunification of the family; a history of treatment for mental illness; a current issue relating to domestic violence; or the individual or family has never managed their own permanent housing. In addition, SSDs must consider the number of times the individual or family has been homeless in the past, the length of time an individual or family has been homeless, and the average length of stay in temporary housing in the SSD.

In developing ILPs, SSDs must consider the differing characteristics and service needs of families and of single adults. For example, homeless single adults tend to exhibit a higher incidence of social dysfunction, mental illness, chronic drug and alcohol use, and prior incarceration or institutionalization than is found among homeless families.

Taking into consideration the distinct characteristics and service needs of individuals and families, SSDs must be consistent in requiring ILPs, so that individuals and families in similar circumstances are treated similarly. In addition, to the extent that resources are available to address identified housing-related needs, SSD's must be consistent in requiring components in ILPs, so that individuals and families in similar circumstances are subject to similar requirements.

Where the SSD has determined that an ILP is appropriate, the SSD or its designee must develop the ILP based upon the assessment that has been conducted by the SSD. The ILP represents the strategy for obtaining housing other than temporary housing. The ILP sets forth the individual's or family's responsibilities while receiving THA and specifies the conditions upon which THA will be provided. The ILP also must identify the facility, if any, to which the individual or family has been or will be referred by the SSD or its designee, any requirements of such facility, and the time frame the SSD or its designee estimates the individual or family will receive THA. A model ILP is included as Attachment C.

The ILP must be individualized and tailored to the specific circumstances of the individual or family. The ILP must describe the efforts the individual or family will make to leave temporary housing and enter permanent or other appropriate housing. Other appropriate housing includes, but is not limited to, adult homes, unsupervised and supervised Single Room Occupancy Hotels (SROs), residential drug treatment programs, community residences, family-type homes for adults and Job Corp programs.

The ILP should contain only those activities that directly relate to the individual or family ending their dependence on THA. Some examples of provisions that might be included in an ILP are:

- participating in budget counselling for those with a history of non-payment of rent;
- participating in drug and alcohol rehabilitation programs for those whose substance abuse interferes with their securing and retaining permanent housing;
- making a certain number of housing search contacts per week;
- participating in mental health evaluations or programs for those whose mental health problems interfere with their securing and retaining permanent housing; and
- paying income to the THA provider.

If the SSD has an agreement or contract with a temporary housing provider, individuals and families who are referred to such a provider also may be assessed by facility staff. This second assessment may result in the ILP being revised. However, the temporary housing assistance provider cannot make or change eligibility determinations. Revisions to an ILP may occur at this time due to the availability or lack of supportive services necessary to address a housing-related need, or due to changing circumstances of the individual or family.

Some examples of situations where an ILP may need to be revised include:

- an individual or family member has a substance abuse problem and an appropriate program becomes available;
- an individual or family member has just been identified as having a substance abuse problem;
- domestic violence is occurring;
- an individual or family member exhibits mental health problems;
- a service program is no longer available; and
- adults or children join the family in temporary housing.

The SSD or its designee must consult with the individual or family in the initial development of the ILP, and any subsequent revisions to it. This process will assist in informing an individual or family of the expectations that the SSD and/or THA provider has for the individual or family while they are in receipt of THA. An individual or family does not have a right to unilaterally change the ILP or to refuse to accept the ILP or a portion of it. The SSD or its designee must provide an individual or family with a copy of their ILP, including any subsequent revisions to it.

An individual or family does not have the right to a fair hearing concerning the contents of the ILP. However, an individual or family may challenge the discontinuance of THA in a fair hearing for failure to comply with ILP requirements. In addition, an individual or family may maintain at a fair hearing that the elements of their ILP which they did not comply with are not directly related to their need for THA and, therefore, failure to comply with these elements should not subject them to discontinuance of THA.

When an individual or family unreasonably fails to cooperate in developing, carrying out or completing an ILP, and the failure is not due to a verified mental or physical incapacity of the individual or family member, the SSD must discontinue THA.

An individual or family who fails to comply in developing, carrying out or completing an ILP must be able to demonstrate that the reason for failure was legitimate. The legitimacy of a particular reason will depend upon the individual circumstances. Examples of legitimate reasons include, but are not limited to:

- failure to attend a budgeting class due to the verified illness of a child;

- failure to go to a counseling session due to lack of transportation or funds for transportation;
- failure to attend an appointment with a caseworker due to a lack of notification of the appointment time and place; and
- failure to conduct a housing search due to verified illness.

An example of an unacceptable reason is where the individual states that he/she does not want to attend classes or meet with counsellors until the individual or family is in permanent housing.

The first time the individual's or family's THA is discontinued for unreasonably failing to cooperate in developing, carrying out or completing an ILP, the individual or family may reapply for THA. Subsequent unreasonable failures to comply with the ILP disqualifies the individual or family from receiving THA until the failure ceases, or for 30 days, whichever period is longer.

Responsibility of Individual or Family:

When an individual or family receives THA and the SSD determines that an ILP is appropriate, the individual or family must cooperate in developing, carrying out and completing an ILP. This means that they must meet with the SSD and other appropriate staff to participate in the process of establishing and/or revising their ILP.

An individual or family must comply with the requirements of the ILP. Generally all ILPs will include such requirements as meeting periodically with caseworkers or examiners, looking for permanent housing, addressing issues which are barriers to attaining and/or retaining housing, refraining from violent and/or disruptive behavior and complying with the rules of the THA provider. Individuals and families may have additional requirements that apply, such as attending budgeting or parenting classes, if it has been determined that such activities will assist the individual or family to end their dependence upon THA.

3. Housing

Responsibility of Individual or Family:

An individual or family must actively seek housing other than temporary housing, as required by the SSD. In addition, an individual or family must not unreasonably refuse or fail to accept any appropriate housing offered by the SSD including, but not limited to, permanent housing, reunification with family or relocation to other appropriate residential facilities (e.g., a substance abuse residential treatment program). Examples of reasonable refusals include: a

verified medical condition which would be adversely affected by the housing, or remoteness of the housing in relation to necessary medical services or employment when not accessible by public transportation or other means of transportation.

Responsibility of SSD:

An EAF allowance must be provided to eligible persons in danger of becoming homeless, under 18 NYCRR 372.4, for transportation and child care necessary to permit parents to search for permanent housing. See 94 ADM-20 for additional information.

When an individual or family fails to comply with the THA requirements and appears unable to comply, the SSD must determine if a physical or mental impairment exists which causes noncompliance. If the SSD determines that a physical or mental impairment is not the cause of noncompliance, the SSD must discontinue THA until the failure ceases or for 30 days, whichever period is longer.

4. Behavior

Responsibility of Individual or Family:

An individual or family must not commit acts which endanger the health or safety of themselves or others. Acts of violence, including the use or display of weapons, or selling drugs are examples of behavior which endangers the health and safety of themselves or others.

An individual or family must not interfere with the orderly operation of the temporary housing facility. Repeated violation of the rules of the facility may constitute substantial interference in the orderly operation of the facility. For example, if a person repeatedly fails to return by curfew and a staff member must leave an assigned security post to provide entry, the behavior may substantially interfere with the orderly operation of the facility. Similarly, stealing or destroying property also will be a basis for termination of THA, if such behavior is repeated and substantially interferes with the orderly operation of the facility.

Responsibility of SSD:

When an individual or family engages in acts which endanger a person's health or safety, or which substantially and repeatedly interfere with the orderly operation of the temporary housing facility, the SSD must determine if a physical or mental impairment exists which causes noncompliance. If the SSD determines that a physical or

mental impairment is not the cause of noncompliance, the SSD must discontinue THA until the failure ceases, or for 30 days, whichever period is longer.

In a family with two or more adults, the SSD must only discontinue the THA of the adult member of the family who committed a violent act or who failed to comply with other requirements for receiving THA, unless this would result in the separation of the child(ren) from the caretaker relative.

5. Physical or Mental Impairment

Responsibility of SSD:

At the time of application, SSDs are responsible for evaluating an individual's or family's housing related public assistance and care needs, including the need for treatment of physical and mental health problems. Such assessment provides the SSD with an opportunity to identify mental or physical impairments which may result in behavior or actions that interfere with the individual's or family's ability to comply with THA requirements, or the ability to access and maintain housing other than temporary housing.

SSDs also are responsible for evaluating whether an individual or family has a mental or physical impairment when an individual or family fails to comply with the requirements for receiving THA and this failure will result in a discontinuance of THA. Temporary housing assistance may not be denied or discontinued when the reason for failure to comply is due to a physical or mental impairment. When such a physical or mental impairment appears to be present, the SSD must refer the individual or family for an evaluation by an appropriate professional.

Some examples of behavior or conditions which may indicate mental impairment include: severe anxiety/nervousness; acting out/hallucinations; disorientation/confusion; inappropriate responses/reactions; non-responsiveness; bizarre appearance/inappropriate dress; unusual or inappropriate mood/depression; agitated, disruptive or hostile behavior; and poor concentration or attention span. Additional indicators of mental impairment may include: multiple/extended hospitalizations; periodic confinement in a mental institution; history of treatment in mental health clinic or by a private therapist; high medication usage; and uncontrolled or semi-controlled epilepsy or history of seizures.

Some examples of conditions which may indicate physical impairment include: when the individual has restricted mobility/inability to walk without aid; amputation/paralysis of limbs; uncoordinated body movements/palsy; memory loss/

blackout; poor vision/blindness/inability to read print; and poor hearing/deafness.

6. Other Requirements

In addition to meeting the above requirements, individuals and families applying for or receiving THA must comply with all other public assistance requirements applicable to them. Failure to comply with these other requirements will render the person ineligible for public assistance including THA, and may render the entire case ineligible, depending upon the particular requirement. The sanction for violation of one of these requirements would be for the period authorized in the regulation that establishes the requirement. These requirements include, but are not limited to, the following:

- Requirements for participating in employment and training programs, in accordance with Part 385 of Department regulations. This includes looking for work, engaging in training, accepting jobs and work assignments, and participating in rehabilitative services;
- Requirements for participating in rehabilitative services as required in Parts 370 and 385 of Department regulations;
- Requirements for participation in the child support enforcement program as required in sections 351.2(e)(2)(iv), 369.2(b) and 370.2(d) of Department regulations;
- Requirements to apply for SSI as required in sections 369.2(h) and 370.2(c)(5);
- Requirements to locate and utilize resources as required in section 351.2(e) of Department regulations. These resources include, but are not limited to, individual or family financial assets, income from employment, pensions, work-related benefits, health insurance, small business, real and personal property, securities, cash on hand, bank accounts, insurance, trust funds, estate settlements, servicemen's benefits, in-kind income, contributions from relatives and friends, support orders, eligibility for or receipt of benefits, services and social resources available through family relationships and community programs; and
- Requirements to accept the offer of a home for Home Relief applicants and recipients as required in section 370.2(c) of Department regulations.

If any of these requirements are included in an individual's or family's ILP, the sanction for failure to comply will be the one authorized in the regulation that establishes the requirement, not the sanction contained in 352.35(c)(2).

7. Application of Income and Resources

Income

When an individual or family has available income, either earned or unearned, the SSD must budget the income to reduce the need for public assistance, including the need for THA. The budgeting methodology is the normal public assistance monthly budgeting methodology (see attached sample budget, Attachment A). As a result of budgeting income, some of the individual's or family's income may have to be used to pay for some or all of the cost of temporary housing. This is not a new requirement.

In some cases, this income would be sufficient to make the individual or family ineligible for public assistance if they were residing in the community. However, when budgeting the income of a homeless individual or family, the SSD must use the actual cost of the temporary housing and either

- the appropriate personal needs allowance (if 3 meals a day are provided) and any appropriate special needs allowance, or;
- the basic allowance, home energy allowance, supplemental home energy allowance, any applicable restaurant allowance (if less than 3 meals a day are provided), and any appropriate special needs allowance must be used in establishing the monthly standard of need and in applying the Gross Income Test. Thus, such individuals or families may be eligible for public assistance when homeless.

When a homeless individual or family has income and is in temporary housing less than a full calendar month, a per diem public assistance deficit must be calculated. This is done by dividing the monthly public assistance deficit by the number of days in the particular month. For example, a homeless person is in a motel for 15 days in June and the monthly public assistance deficit is \$600. The deficit to be met by the SSD is \$20 per day or \$300 for those 15 days. The remainder of the cost of the temporary housing for those 15 days must be met by the homeless person. See 94 ADM-20 for more detail regarding budgeting for homeless persons.

Resources

A homeless individual or family may have resources which are available to meet the costs of temporary housing. These resources must be used to reduce the need for THA. For example, the individual may have \$500 in a bank account. This must be applied toward the cost of the temporary housing.

Responsibilities of the Homeless Individual or Family:

The homeless individual or family must cooperate with the SSD's efforts to determine available income and resources, and must apply for and use any benefits and resources that will reduce or eliminate the need for THA.

The homeless individual or family also must provide their available income and resources to providers of THA for the client share of the cost of such care, as determined by the SSD.

Responsibilities of SSD:

The SSD must deny or discontinue an individual's or family's THA, if it determines that the individual or family is required, but is not applying available income and/or resources to their share of the cost of THA.

8. Notification Requirements

Until the information can be included in the Client Information Booklets, SSDs must give individuals and families seeking or receiving THA, the attached notice entitled, "Responsibilities of Individuals and Families Seeking and Receiving Temporary Housing Assistance and the Consequences of Failure to Meet These Responsibilities" (Attachment B).

9. Documentation

SSDs are responsible for documenting the assessment, the ILP, including revisions, and any instances of unreasonable failure to comply with the ILP and other requirements governing the provision of THA. In addition, SSDs must document any referrals for evaluation of physical or mental impairments, as well as the results of the evaluations.

Where SSDs have designated an agent to develop and revise ILPs, the SSD must require the agent to maintain appropriate documentation of the ILP, referrals, results of evaluations and any instances of failure to comply with the ILP or other requirements for receiving THA.

Documentation must be maintained in the individual's or family's case record.

C) PROCEDURES FOR DENYING OR DISCONTINUING TEMPORARY HOUSING ASSISTANCE

1. Referrals

If the individual or family appears to be unable to comply with the requirements of the assessment or the ILP because of a physical or mental impairment, THA may not be denied or discontinued until a determination is made by an appropriate professional that a mental or physical impairment is not the cause for non-compliance. If the individual or family alleges that a physical or mental impairment is the reason for non-compliance, and the SSD believes that the allegation is credible, THA may not be denied or discontinued until a determination is made by an appropriate professional that a mental or physical impairment is not the cause for non-compliance. THA may not be denied or discontinued while this determination is being made.

An individual or family whose THA is denied or discontinued may still be eligible for other public assistance. For example, when an individual fails to accept the offer of appropriate alternative housing but otherwise complies with the other public assistance requirements, the SSD would only discontinue the THA. However, the individual or family still may be eligible for the basic allowance, the Home Energy Allowance, the Supplemental Home Energy Allowance, a restaurant allowance and any other special needs allowance. In addition, if the individual or family begins to incur a permanent shelter cost after having THA denied or discontinued, they may be eligible for a regular shelter allowance.

Prior to denying or discontinuing THA for failure to comply with requirements of the assessment or ILP, the SSD also must evaluate the individual's or family's need for Protective Services for Adults (PSA), and/or Preventive or Protective Services for Children. If the SSD believes that such services may be needed, the SSD must make a referral to the appropriate service. If Preventive or Protective Services are found to be necessary, provision of such services would be under the same standards as govern any Preventive or Protective Services case. THA cannot be denied or discontinued while the SSD is determining the need for such services. If a referral is made, THA cannot be denied or discontinued until there has been a final determination made by PSA or Preventive or Protective Services for Children that such services are not needed. If services have been determined to be needed, THA cannot be denied or discontinued if it is determined that the services are necessary to protect the health and safety of the individual or family. THA may be denied or discontinued once

it is determined that the services are no longer needed to protect the health and safety of the individual or family.

2. Protective Services for Adults (PSA)

SSDs must assess each homeless individual to determine if a referral should be made to PSA. A referral must be made to PSA if all of the following three factors are present:

- a) The individual lacks the means to meet essential needs for food, clothing, shelter or medical care, to secure entitlements to which he/she is entitled or to protect himself/herself from harm because of a physical and/or mental impairment; and
- b) The individual will be at an identifiable risk of harm due to abuse, neglect or financial exploitation by another person or persons, or by other hazardous conditions caused by the action or inaction of himself/herself or others; and
- c) No other service provider, relative or other interested person is available to provide the necessary assistance.

Because the service delivery responsibilities of the various types of shelter programs administered and/or supervised by SSDs differ, the situations in which it is appropriate to make a PSA referral on behalf of a homeless individual also differ, as discussed below.

Shelters operated by SSDs, regardless of size, are required to provide case management and other supportive and rehabilitative services to their residents, which include securing and arranging for necessary medical and mental health evaluations and placements into more appropriate levels of care. Other shelters which serve 20 or more residents also may provide these services to their residents, although they are not required to do so. Therefore, for all shelters operated by a SSD and other shelters which provide case management, social and rehabilitative services to their residents pursuant to Part 491 of the Department's regulations, PSA referrals only should be made if the following criteria is met. A PSA referral should be made when a resident is being involuntarily discharged or transferred from a shelter, appears to meet the aforementioned eligibility criteria, and efforts by shelter staff to secure necessary evaluation(s) and/or placement in a more appropriate level of care, including involuntary admission to a psychiatric facility pursuant to Article 9 of the Mental Hygiene Law, have been unsuccessful.

For residents of shelter programs which do not provide case management services to their clients and for individuals

housed in room and board situations or hotels/motels, a referral to PSA should be made any time all of the criteria set forth above in subparagraphs (a), (b), and (c) appear to be present.

When shelter staff make a referral to PSA, PSA intake staff will review the information provided by shelter staff to determine if a PSA assessment is warranted. If the adult appears to be eligible for PSA, or if PSA eligibility cannot be ruled out based on information which the intake worker is able to obtain, a PSA investigation/assessment must be initiated and a home visit must be conducted. If a life threatening situation exists, PSA is required to take action to address the emergency as soon as possible, but no later than 24 hours after the receipt of the referral. For other referrals, a home visit must be made to the client within three working days and an assessment completed within 60 days of the referral. PSA also is required to notify referral sources whether or not the client is eligible for services.

The services available under PSA can include: investigation and assessment; counseling for clients and their families; advocacy and case management which includes arranging for the provision of necessary services and benefits for the client and assuring the coordinated delivery of such services; arranging for alternative housing arrangements and residential care placements when needed; financial management including acting as a client's representative payee; providing homemaker and housekeeper/chore services within specified limits; and pursuing legal interventions on behalf of clients who do not have the capacity to act on their own behalf, including but not limited to securing orders of protection, petitioning the court for guardianship and acting a guardian when no one else is willing and capable of acting in this capacity.

Although a person in need of PSA has the right to refuse services, a SSD, as part of its PSA responsibilities, must initiate the appropriate legal interventions to authorize the provision of involuntary services when it believes that there is a serious threat to an adult's well being and the adult is incapable of making decisions on his or her behalf because of mental impairments.

3. Protective Services for Children (CPS)

SSDs will need to ask families, whose THA is being discontinued, how the children will be cared for. This inquiry must consider whether the parent has a plan for meeting the shelter needs of the child(ren), whether the plan is adequate, whether the parent has the capacity to carry out the plan and whether the child(ren) have special needs related to shelter.

SSDs should apply the statutory standards relating to the reporting of suspected child abuse or maltreatment which is, that the person has reasonable cause to suspect abuse or maltreatment. The elements for maltreatment in this situation are:

- a) a child's condition has been impaired or is in imminent danger of impairment; and
- b) such impairment or imminent risk of impairment is the result of the failure of the parent or other person legally responsible to exercise a minimum degree of care in providing adequate shelter though financially able to do so or offered financial or other reasonable means to do so.

The SSDs must apply the facts to the above definition in each case. If the SSDs conclude that there is reasonable cause to suspect maltreatment, a call is to be made to the SCR.

In all cases, the SSDs must apply the statutory standards for maltreatment. One key factor is whether the child(ren) have been impaired or placed in imminent danger of impairment. It is also important in these cases to consider the mental and physical capacity of the parent to provide care and the existence of any special needs of the child. The other key element is whether the parent or other person legally responsible exercised a minimum degree of care: that is, what actions has the parent taken to secure adequate shelter. The failure by the parent or other person legally responsible to have a plan to provide shelter may be applied as evidence of a failure to exercise a minimum degree of care. In such case, however, the element of impairment or risk of impairment must also be evaluated.

The SSD should not call the SCR where the parent informs the SSD that the parent has a plan for the shelter of his or her child(ren) and such plan does not otherwise identify a risk to the child(ren). In such a case, the element of imminency of risk is not met because the child(ren) will not be homeless. The element of failure to exercise a minimum degree of care is not present because the parent has made what appears to be a viable plan for shelter.

However, the SSD should call to the SCR where the parent informs the SSD that the parent has no plan for shelter or that the plan is inadequate to meet the shelter needs of the child(ren). In such a case, there is imminency of risk because the parent and child(ren) will be leaving the shelter program without an adequate plan for shelter. The absence of a plan or an adequate plan relates to the parent's failure to

exercise a minimum degree of care. (Note: Care should be taken to assess these issues to allow sufficient time for the local CPS unit to intervene prior to discharge from the shelter.)

A problematic category of cases is where the parent refuses to inform the SSD of the parent's shelter plans. As stated above, the SSD should assess the parent's past history, particularly the parent's capacity to provide shelter to the child(ren) in the past. Any special conditions or needs of the child(ren) should be assessed. It is suggested that the SSD inform the parent that should the parent remain unresponsive concerning shelter plans for the child(ren), based upon an analysis of the facts referenced in this paragraph, the SSD would call the SCR.

In all cases, the assessment noted above regarding impairment or risk of impairment and minimum degree of care must be carried out. When calling the SCR, the SSD should be prepared to state the facts of the case in regard to these standards for maltreatment.

Questions or concerns regarding the care of children in families with housing-related issues, should be directed to the NYS Child Abuse and Maltreatment Register at 1-800-635-1522 (mandated reporters only) or 1-800-342-3720 (general). The NYS Child Abuse and Maltreatment Register operates 24 hours a day, 7 days a week. Child Protective Specialists are continually available for consultation, information and/or referrals, and to determine the acceptance or denial of reports of suspected child abuse or maltreatment.

V. MEDICAL ASSISTANCE IMPLICATIONS

Medical Assistance eligibility for homeless individuals is not impacted by this Directive. The SSDs should refer to Administrative Directive 94 ADM-20 for instructions on processing Medical Assistance Only cases.

VI. SYSTEMS IMPLICATIONS

None.

VII. EFFECTIVE DATE

This Directive is effective January 1, 1997, retroactive to January 1, 1996.

Rose Pandozy
Deputy Commissioner
Division of Services and Community
Development

Patricia A. Stevens
Deputy Commissioner
Division of Temporary
Assistance

Temporary Housing Assistance (THA)
Budget Example

Ms. Samantha Stevens is a mother of three living in Westchester County. She pays \$900 per month in rent plus heat (electric). She is in receipt of UIB of \$493 per month and \$400 in social security benefits for her three children. She has been evicted and has no available alternative housing arrangements. She has no liquid resources.

She comes into the agency seeking assistance with her housing expenses. Since she has not previously applied for assistance we must first determine whether she and her children have unmet PA needs.

(1). Calculation of PA Standard of Need

4 person Pre-add	307.00
<u>+4 person combined HEA's</u>	<u>68.70</u>
4 person Total Basic Needs	375.70
+Actual Cost of	
Temporary Shelter	1,470.00
<u>+Restaurant Allowance</u>	<u>364.00</u>
(64+100+100+100)	
Total Needs (rounded down)	2,209.00

(2) Calculation of Income

Social Security Benefits	400.00
<u>+UIB</u>	<u>493.00</u>
Total Income	893.00

(3) Calculation of PA Deficit

Total Needs	2,209.00
<u>-Total Income</u>	<u>893.00</u>
Deficit	1,316.00

Ms. Stevens' family is eligible for an ADC grant of \$1316 a month, or a per diem public assistance deficit equal to the monthly grant divided by 30 days then multiplied by the number of days in the period and rounded down to the nearest penny. Ms. Stevens is in the shelter for 10 days and eligible for a benefit of \$438.66 (rounded down to the nearest penny) for those 10 days. The remainder of the cost of the temporary housing for those 10 days must be met by Ms. Stevens.

IMPORTANT INFORMATION ABOUT TEMPORARY HOUSING ASSISTANCE

If you need Temporary Housing Assistance because you are homeless, it is very important that you read this!

You might not get Temporary Housing Assistance if you do not follow some important rules.

Sometimes when you lose Temporary Housing Assistance because you do not follow the rules, you may be able to get that help again right away if you will follow the rules.

Other times, when you lose Temporary Housing Assistance you cannot get temporary housing assistance again for 30 days, even if you agree to follow the rules. The amount of time that you lose eligibility for Temporary Housing Assistance will depend on which rule you violate.

Some of the rules that you will have to follow in order to prevent losing Temporary Housing Assistance help are listed below.

1. You must help social services staff to find out if you are eligible for emergency housing assistance.
2. You may be required to meet with social services staff or a person appointed by social services to help develop an Independent Living Plan for you. If an Independent Living Plan is developed for you, you will receive a copy of the plan. The Independent Living Plan will tell you about the rules that you must follow.
3. You must actively look for permanent housing and you must not unreasonably refuse permanent housing that is offered by social services staff.
4. You must behave in a manner that does not interfere with the orderly operation of the Temporary Housing Facility where you are staying. You must not commit acts which endanger anybody's health or safety.

It is important for you to know that if you fail to follow the rules you might lose eligibility for Temporary Housing Assistance for a period of time!

FILING REFERENCES

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
95 ADM-3		Part 351	131	PASB	GIS Message
94 ADM-20		Part 352	143-B	XIII-D-all	87 IM/DC006
93 ADM-10		Part 358	Article 9-B	IX-F-1, X	87 IM/DC009
91 ADM-43		Part 365		XIV-H-all,	87 IM/DC023
90 ADM-40		Part 366		XV,	87 IM/DC025
90 ADM-19		Part 370		XVI-all,	92 IM/DC008
90 ADM-13		Part 372		XVII-all,	
90 ADM-9		Part 381		XXIV-C-1,	
90 ADM-8		Part 397		XXIII-M-	
89 ADM-13		Part 457		all,	
89 ADM-2		Part 491		MARG	
88 ADM-50		Part 900		pp.392-399	
88 ADM-4		Part 1000		406-407	
87 ADM-42				FSSB	
86 ADM-23				V-A-4.1	
86 ADM-7				V-B-2.1	
83 ADM-52				V-B-2.2	
82 ADM-75				V-E-1.3	
				VIII-H-all	
				XI-C-5.4	
				XVI-C-3	
				V-3.1	