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THE CITY OF NEW YORK
DEPARTMENT OF HOMELESS SERVICES
ADULT SERVICES

PROCEDURE 00-407

SUBJECT: Late/Overnight Passes	APPLICABLE TO: Adult Shelter Facilities	ISSUED: November 5, 1998 RE-ISSUED: March 28, 2000
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ADMINISTERED BY: Division of Adult Services	APPROVED BY:  Marcia Stevenson, Deputy Commissioner
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I. PURPOSE

To establish policy and provide guidelines on the use of Late Passes and Overnight Passes for applicants/clients who will return after curfew or be absent temporarily from an Adult Shelter.

II. APPLICABILITY

Applicable to all staff at Adult Services shelters, Program Administrators and Vacancy Control.

III. FORMS

407A/aa	One Night Late Pass/Spanish
407B/bb	Multi-Use Late Pass/Spanish
407C/cc	Overnight Pass/Spanish
408A/aa	Curfew Violation Referral/Spanish

IV. RELATED PROCEDURES

00-408	Curfew Violation
00-412	Client Belongings
00-420	Screening and Shelter Referral

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V. INTRODUCTION

The Department of Homeless Services permits the authorization of Late Passes and Overnight Passes to clients. For reasons other than emergencies, Late and Overnight Passes serve to facilitate Independent Living Plan goal attainment, such as employment or family reunification. When employment or a program obligates a client's return to a shelter after curfew on more than one night, a Multi-Use Late Pass is issued. Overnight Passes for assessment facility clients are limited to emergencies.

Staff advises clients that the shelter will hold their assigned beds until their expected return at the day and time specified on the Late Pass. The client will not have his/her lodging terminated in SCIMS at nightly curfew. Overnight Passes are limited in duration to not longer than two (2) consecutive nights. Shelters, however, must fill the bed of an Overnight Pass recipient with a client temporarily assigned under Code 3 (Temporary/Needs Assessment Shelter Bed) or Code 4 (Temporary) during the nights the permanent client will be absent.

A client is expected to request a Late or Overnight Pass from his/her assigned caseworker at least twenty-four (24) hours in advance of the date s/he plans to return after curfew. All pass requests will be reviewed by caseworkers and approved/disapproved prior to the client leaving the shelter. If a client cannot be present at the shelter during his/her caseworker's scheduled office hours, s/he must still request a pass from the Social Service Supervisor or Night Supervisor 24 hours in advance. Caseworkers will complete and issue the appropriate One Night Late Pass (Form 407A), Multi-Use Late Pass (Form 407B) or Overnight Pass (Forms 407C) to the client. Each time a pass is issued, a copy must be placed into the client's case record and a copy forwarded to the Shift Supervisor/Screening Staff.

Pass requests must be confirmed by: 1) an appointment notice or written proof of attendance, or 2) a call to the agency or family. Verification is mandatory for family emergencies. Late or Overnight Pass requests may be issued without prior notification for special circumstances. Administrative approval is required.

Upon returning to the shelter, the client surrenders his/her Late Pass to the screening worker and signs the bed roster. Staff notes the arrival time on Late Pass which is placed into the client's case record. An Overnight Pass recipient must meet with his/her caseworker upon return to the shelter.

A client, experiencing an emergency situation that will prevent timely return to the shelter, should notify the shelter by telephone before curfew to request an emergency pass from the Night Supervisor, who notifies Screening Staff. The case remains open until new arrival time. A client who does not return by the date and time specified on the Pass and does not notify the shelter, will be subject to the policies in the Curfew Violation Procedure (00-408).

Only Shelter Directors can authorize Overnight Passes beyond two consecutive nights. The client must keep his or her caseworker informed of the emergency by telephone. If the client has not called by the last day of the approved pass, the shelter terminates the case on the day the pass expires under Code 51 (Whereabouts Unknown). The client loses his/her shelter bed assignment.

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VI. DETAILED INSTRUCTIONS

1. ASSIGNED CASEWORKER

- a. Reviews client request for Late or Overnight Pass. Requests any documentation the client may have to support his/her request. Assists client as necessary to verify the request with telephone confirmation. Approves or disapproves the request for a Late or Overnight Pass. Records reason the client requested the pass and the anticipated arrival time and date in the case record. The caseworker is responsible for obtaining follow-up verification after the client returns from a Late or Overnight Pass.
- b. Considers the benefits of a Late or Overnight Pass for a client who has cooperated with his/her ILP.
- c. Prepares either the One Night Late Pass (Form 407A), Multi-Use Late Pass (Form 407B) or Overnight Pass (Form 407C) in triplicate for approved requests. Fills in planned arrival date(s)/time(s); signs/dates. Points out the shelter phone number that the client must call in an emergency. Issues the original Pass to the client. Copy to case record. Copy to Social Service Supervisor.
- d. If disapproves the Late or Overnight Pass request, informs the client that s/he must return to the shelter by curfew at 10 p.m. to avoid termination of lodging. Documents disapproval of pass request in the client's case record.
- e. If client does not call by the last day of approved Overnight Pass, terminates client's case the next day on SCIMS under Code 51 (Whereabouts Unknown).

2. SOCIAL SERVICE SUPERVISOR or NIGHT SUPERVISOR (If Social Services not available)

- a. Reviews for approval all Late or Overnight Pass requests made less than 24 hours in advance or if the assigned caseworker is not available, for emergencies and exception-to-policy situations. Carries out Steps 1a-e.
 - b. Batches all Pass requests on a daily basis and forwards to Shift Supervisor.
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3. NIGHT SUPERVISOR

- a. Enters Late and Overnight Pass authorizations into Shelter Log. Forwards all Late Passes to Screening Staff.
- b. Enters and initials the planned time of arrival next to the client's name on the shelter bed sign-in roster.
- c. Approves or disapproves emergency telephone request made by a client who will not return to the shelter by 10:00 p.m. curfew or by the stipulated time on the Late Pass. If approves:
 - (1) Completes One Night Late Pass (407A) in duplicate. Writes "Telephone Approval" on the form. Notes the reason for the lateness and the client's expected time of arrival at the shelter. Forwards original 407A and copy to Screening Worker.
 - (2) When the client returns, the sign-in process and the submission of forms to the Social Service Director remains the same as above.
- d. At 12 midnight, cross-checks the outstanding One Night Late Pass (Form 407A) or Multi-Use Late Pass (Form 407B) copies with the times listed next to the clients names on the shelter bed sign-in roster to identify the client(s) who did not sign in between 10:01 and 11:45 p.m. as was listed on their respective pass vouchers. Processes the missing clients as curfew violators, according to Curfew Violation Procedure 00-408.
- e. Similarly, follows Curfew Violation Procedure 00-408 for any client scheduled to arrive, but unaccounted for after midnight.
- f. Submits outstanding copies of Late Passes to the Social Service Director for review and case record filing.

4. SCREENING STAFF

- a. Process Late Pass clients as follows:
 - (1) Redeems One Night Late Pass (Form 407A) from the client.
 - (2) Collects Multi-Use Late Pass 407B only on the date it expires.
 - (3) Writes in the arrival time and disposition in the space provided on the original One Night Late Pass (Form 407A) or Multi-Use Late Pass (Form 407B) returned by client or provided by Shift Supervisor for emergency requests and on Shift Supervisor's copy.
 - (4) Has client sign bed roster next to Supervisor's initialed Late Pass notation. Refers client to bed, observing shelter lights out policy.
- b. Submits redeemed Late/Overnight passes to the Social Service Director for review and filing in case record.

ONE NIGHT LATE PASS

Client Name (Last, First)		Shelter
HA/BID#	BED#	24 Hour Phone #

This pass entitles you to return to your shelter after curfew (10:00 p.m.) up until the time specified. It is your responsibility to:

1. Arrive at or before the time specified below, sign the bed roster when you return to the shelter and observe lights out.
2. If you arrive after this time, you will be non-compliant with DHS curfew policy, will lose your bed and may have to stay at a temporary shelter until a bed becomes available at this shelter. Your belongings will be packed and held for no longer than one week, and you will be responsible for picking them up.

LATE PASS AUTHORIZATION PERIOD		<input type="checkbox"/> Request Made In Advance <input type="checkbox"/> Emergency (Reason) _____
Day _____	Date ____/____/____	
From _____ PM	To _____ AM PM	

Time Arrived _____ AM PM Disposition: _____ Referred to Bed _____ Referred to Shift Supervisor

Issued By: Print Name	Sign Name	Title	Date
Supervisor Signature	Date	Director Signature	Date

Actions to Staff: Original to Client. Copy to Case Record. Copy to Shift Supervisor

CURFEW VIOLATION REFERRAL

CLIENT'S SURNAME:	FIRST NAME:	H.A. Number:
<input type="checkbox"/> OFFICIAL SHELTER		<input type="checkbox"/> TEMPORARY SHELTER

cause you have not complied with this shelter's curfew policy, you are being referred to a bed at the Temporary Shelter
med below. You must present this referral form to staff at the Temporary Shelter in order to be admitted. You must
n the bed roster to receive a bed, and you must return to your OFFICIAL SHELTER as soon a bed is available there.

REFERRED TO (Temporary Shelter):	DATE REFERRED: ____ / ____ / ____
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DHS CURFEW POLICY

urfew at Department of Homeless Services shelters is 10:00 p.m. You must return to your Official Shelter or
essment Shelter and sign for a bed by curfew. Shelter doors are closed at 10:00 p.m., after which you may only
admitted with an approved Late Pass. You must get a Late Pass in advance from your Caseworker. If you
perience an emergency and cannot return to the shelter by curfew, you must call the Shelter's Supervisor-in-Charge

you do not comply with curfew, you will lose your bed. Your belongings will be packed and held for one week
ly, and you are responsible for picking them up. You will be assigned a bed at a Temporary Shelter. You are
pected to stay at the Temporary Shelter until a bed is available at your Official Shelter or Assessment Shelter, and
return to your Official Shelter or Assessment Shelter as soon as a bed is available there.

he information contained in this form has been explained to me and I understand its contents.

_____ Client Signature	____ / ____ / ____ Date
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<input type="checkbox"/> I have reviewed this form with the client and have given him/her the original signed form as admission to the Temporary Shelter.
<input type="checkbox"/> I have reviewed this form with the client, but the client refused to sign this form. S/he was given the original unsigned form as admission to the Temporary Shelter.

WITNESSING WORKER/SUPERVISOR		
_____ Print Name	_____ Sign Name	____ / ____ / ____ Date

Time Client Left Shelter	____ AM PM	Mode of Transportation:
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MULTI-USE LATE PASS

Client Name (Last, First)		Shelter
IA/BID#	BED#	24 Hour Phone #

This pass entitles you to return to your shelter after curfew (10:00 p.m.) on the dates and until the times specified. It is your responsibility to:
Arrive at or before the times specified below, sign the bed roster each night when you return to the shelter and observe lights out.
If you arrive after this time on any night, you will be non-compliant with DHS curfew policy, will lose your bed and may have to stay at a temporary shelter until a bed becomes available at this shelter. Your belongings will be packed and held for no longer than one week, and you will be responsible for picking them up.
You must see your caseworker and comply with your Independent Living Plan to renew this pass.

LATE PASS AUTHORIZATION PERIOD

Date	Approved Arrival	Time Arrived	Disposition	Date	Approved Arrival	Time Arrived	Disposition
1.				4.			
2.				5.			
3.				6.			

Issued By: Print Name	Sign Name	Title	Date
Supervisor Signature	Date	Director Signature	Date

Instructions to Staff: Original to Client. Copy to Case Record. Copy to Shift Supervisor

OVERNIGHT PASS

Client Name (Last, First)		Shelter
HA/BID#	BED#	24 Hour Phone #

This pass entitles you to spend the nights specified below at a location other than your shelter. Your shelter and bed authorization will remain in effect until you return, provided that:

- 1. You call your caseworker or Social Service Supervisor by the last day of your approved pass and return before curfew on that day.
- 2. If you arrive after curfew, or do not arrive on your scheduled day, your lodging will be terminated. Your belongings will be packed and held for no longer than one week, and you will be responsible for picking them up.
- 3. Upon your return, you must meet with your caseworker to update your Independent Living Plan.

OVERNIGHT AUTHORIZATION PERIOD

FROM: Day _____ Date _____	TO: Day _____ Date _____	NUMBER OF NIGHTS AUTHORIZED _____
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Issued By: _____

Print Name		Sign Name	
_____		_____	
Title	Telephone #	Date	
_____	_____	_____	
Supervisor Signature	Date	Director Signature	Date
_____	_____	_____	_____

Instructions to Staff: Original to Client. Copy to Case Record. Copy to Shift Supervisor