


THE CITY OF NEW YORK
DEPARTMENT OF HOMELESS SERVICES
ADULT SERVICES

PROCEDURE 00-408

SUBJECT: Curfew Violation	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 provide guidelines and detailed instructions for the screening and temporary assignment of clients who violate Department of Homeless Services nightly curfew rules.

II. APPLICABILITY

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

III. FORMS

- 402B/bb Shelter Client Transfer Referral/Spanish
- 407A/aa One Night Late Pass/Spanish
- 407B/bb Multi-Use Late Pass/Spanish
- 408A/aa Curfew Violation Referral/Spanish
- 408B/bb Attention All Residents - Notice Regarding Curfew/Spanish

IV. RELATED PROCEDURES

- 00-407 Late/Overnight Pass
- 00-412 Locker Assignment and Client Belongings

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V. INTRODUCTION

Curfew at Adult Services shelters is 10:00 p.m. Since curfew violators prevent effective system-wide bed use and disrupt shelter operations, it is the Department of Homeless Services (DHS) policy to terminate the lodging of a client unaccounted for at curfew on SCIMS under Code 51 (Whereabouts Unknown). The shelter reports the missing client's assigned bed as vacant when staff calls the Nightly Census into Vacancy Control after 10:00 p.m.

The client who arrives at his/her Official Shelter, Transfer Shelter or assessment facility after curfew will not be lodged unless s/he presents a Late Pass (See Late/Overnight Pass Procedure 00-407). Instead, the shelter contacts Vacancy Control to find and reserve a bed for the curfew violator that night at a Temporary Shelter (possibly including an available bed at the current shelter). Vacancy Control is responsible for making system wide bed assignments from 10:00 p.m. until 2:00 a.m. The Official Shelter, Transfer Shelter or assessment facility then gives the client a written referral and carfare or the DHS van service may collectively transport clients to the Temporary Shelter.

The Temporary Shelter lodges the curfew violator on SCIMS under Code 4 (Temporary). The next morning the shelter calls the Official Shelter, Transfer Shelter or assessment facility to check for a bed vacancy. The Temporary Shelter then closes the case on SCIMS under Code 84 (Reassigned to Another Adult Services Shelter) and provides the client with a written transfer and carfare or van transport for his/her return when a bed becomes available. If necessary, the shelter provides a bed, meals and emergency services for the number of days until a bed opens at the Official Shelter, Transfer Shelter or assessment facility.

When Vacancy Control assigns a curfew violator a bed at his/her Official Shelter, staff lodges the client under Code 1 (New Authorization).

The Shelter Director and Night Supervisor ensure that Screening Staff know how to process curfew violators according to this procedure and that under no circumstances does a shelter turn away a curfew violator until a referral has been made.

Staff should take exception-to-policy into account in situations when complying with curfew policy poses a question as to a client's safety or the client requires special handling. Exception-to-policy cases require supervisory approval and are exempt from this Curfew Violation procedure.

Notices regarding curfew rules and responsibilities are posted on bulletin boards and in the public areas of all shelters and are issued individually to clients as part of shelter orientation.

The belongings of curfew violators who do not return by 8 a.m. the next morning will be removed from their lockers and placed in storage for no longer than one week. The individual is responsible for redeeming his/her belongings (See Locker Assignment and Client Belongings Procedure 00-412).

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VI. DETAILED INSTRUCTIONS

I. SCREENING STAFF at Official Shelter, Transfer Shelter or Assessment Facility

- a. Checks bed roster sign-in sheets to identify a client who remains absent and unaccounted for after curfew at 10:00 p.m.
- b. Terminates the lodging of a curfew violator on SCIMS under Code 51 (Whereabouts Unknown).
- c. Reports the curfew violator's assigned bed as vacant when the shelter calls Vacancy Control to report the Nightly Census after 10:00 p.m.
- d. Processes the client listed on the current shelter roster who arrives after curfew, as follows:
 - (1) Requests shelter ID (e.g., a photo, a meal ticket). Asks why s/he missed curfew.
 - (a) The client with a legitimate One Night Late Pass (Form 407A) or Multi-Use Late Pass (Form 407B) automatically gains entrance to his/her currently assigned bed. Follows Late/Overnight Pass Procedure (00-407).
 - (b) Informs Night Supervisor if the client presents extenuating circumstances, appears seriously ill or dysfunctional, or if s/he requests to speak with the Night Supervisor.
 - (2) Calls Vacancy Control to reserve a bed for the client at another shelter. Vacancy Control either authorizes carfare distribution or arranges for DHS van service to transport clients.
 - (3) Fills out and issues Curfew Violation Referral (Form 408A) to the client. Explains why the shelter is referring the client to another shelter for the night and why s/he must return to his/her Official Shelter when a bed becomes available. Client signs the form. If the client refuses, notes on form. Worker signs. Advises client to present the referral form to shelter staff upon arrival at the Temporary Shelter. Provides carfare and travel directions or DHS van service transports the client.
 - (4) Submits one copy of Curfew Violation Referral (Form 408A) to Social Service Director for review and filing in client's case record.
- e. If a curfew violator returns after 2 a.m., assigns the client a bed at the shelter (when one is vacant). Do not call Vacancy Control or another shelter. (After 2 a.m., Vacancy Control no longer makes nightly bed assignments.)

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2. NIGHT SCREENING STAFF at Temporary (Receiving) Shelter

- a. Forwards Curfew Violation Referral (Form 408A) handed over by the arriving client to the Night Supervisor.
 - b. Prints client's name, H.A. number, and time of arrival at shelter on the bed roster.
 - c. Processes a temporary client to the assigned bed and locked space for belongings.
 - d. Lodges the client in SCIMS as Code 4 (Temporary).
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3. DAY SCREENING STAFF at Temporary (Receiving) Shelter

- a. Identifies client(s) lodged the previous night in SCIMS under Code 4 (Temporary).
 - b. Calls the Official Shelter, Transfer Shelter or assessment facility the next morning to reserve a bed and return the client. If a bed is not available, calls the client's shelter daily until there is a vacancy. Issues a meal ticket for the day(s) until there is a vacancy.
 - c. Fills out Shelter Client Transfer Referral (Form 402B). Enters "Return of Curfew Violator" as the reason for the transfer. Issues form to the client. Copy to shelter files. Provides carfare or DHS van service.
 - d. Terminates the temporary client's lodging on SCIMS under Code 84 (Reassigned to Another Adult Services Shelter).
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SHELTER CLIENT TRANSFER REFERRAL

CLIENT'S SURNAME:	FIRST NAME:	H.A. NUMBER:
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* You are being OFFICIALLY transferred on ___ / ___ / ___ to _____, because:

NAME OF SHELTER REFERRED TO:	ADDRESS OF SHELTER REFERRED TO:
CONTACT PERSON AT SHELTER REFERRED TO:	DATE REFERRED / TIME OF CALL:

* Beginning on ___ / ___ / ___ , your new shelter is your OFFICIAL SHELTER. You are not eligible to transfer for services at any other DHS or DHS contracted Adult Services shelter. You may not transfer to any other DHS or DHS contracted Adult Services shelter without agency approval.

Your Official shelter will provide the following services to you:

- 1) bed
- 2) locker
- 3) three meals a day
- 4) clothing
- 5) toiletries
- 6) carfare
- 7) recreation
- 8) social services

TRANSFER APPROVED BY: _____
Print Name Signature Date

I did NOT request a Supervisory Review and accept the transfer as a change in my official shelter.
Client's Signature (X) _____ Date: _____

I have had a Supervisory Review on ___ / ___ / ___ and I accept transfer to my new official shelter.
Client's Signature (X) _____ Date: _____

I have had a Supervisory Review on ___ / ___ / ___ , but continue to disagree with the change in my official shelter.
Client's Signature (X) _____ Date: _____

Client refused to sign; however, form was explained to client.

WITNESSING WORKER: _____
Print Name Signature Date

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

Day _____ Date ____ / ____ / ____	____ Request Made In Advance
From _____ PM To _____ AM PM	____ Emergency (Reason) _____

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

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

MULTI-USE 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.) on the dates and until the times specified. It is your responsibility to:

1. Arrive at or before the times specified below, sign the bed roster each night when you return to the shelter and observe lights out.
2. 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.
3. 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

CURFEW VIOLATION REFERRAL

CLIENT'S SURNAME:	FIRST NAME:	H.A. Number:
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<input type="checkbox"/> OFFICIAL SHELTER	<input type="checkbox"/> TEMPORARY SHELTER
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Because you have not complied with this shelter's curfew policy, you are being referred to a bed at the Temporary Shelter listed below. You must present this referral form to staff at the Temporary Shelter in order to be admitted. You must sign 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

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

If you do not comply with curfew, you will lose your bed. Your belongings will be packed and held for one week, and you are responsible for picking them up. You will be assigned a bed at a Temporary Shelter. You are expected 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.

The 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 ____/____/____
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Time Client Left Shelter: _____	AM	PM	Mode of Transportation: _____
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ATTENTION ALL RESIDENTS

CURFEW AT ALL ADULT SHELTERS IS 10:00 PM.

CURFEW IS STRICTLY ENFORCED.

YOU MUST RETURN TO YOUR ASSIGNED SHELTER AND SIGN FOR YOUR BED BY 10:00 PM OR YOU WILL LOSE YOUR BED.

If you violate curfew, you will be assigned to a Temporary Shelter, where you will sleep until a bed is again available in your Official Shelter. You are expected to return to your Official Shelter to get another bed, meals and all other services as soon as a vacancy becomes available.

If you must return later than 10:00 p.m. because you are working, etc., you must get a Late Pass in advance from your caseworker.

If you experience an emergency and cannot return to the shelter by curfew, call the shelter to inform the Night Supervisor that you will return and the reason why you will be late.

THE SHELTER DOORS WILL BE CLOSED AT 10:00 PM. YOU MAY ENTER AFTER THAT TIME ONLY WITH A VALID LATE PASS OR IF YOU HAVE A VALID REFERRAL OR TRANSFER.