PROCEDURE NO. 04-500

SUBJECT:	APPLICABLE	E TO:	EFFECTIVE DATE:
CLIENT RESPONSIBILITY FOR ADULT FAMILIES	ALL FAMILIES WITHOUT CHILDREN UNDER 21- YEARS OF AGE ("ADULT FAMILIES") ELIGIBLE FOR TEMPORARY HOUSING ASSISTANCE, ADULT FAMILY SHELTER PROVIDERS, AND DHS STAFF.		June 7, 2004
ADMINISTERED BY:		APPROVED BY:	
NYC DHS- DIVISION OF FAMILY SERVICES		Roger Newman, Deputy Commissioner	

FORMS TO BE USED

Form 101(A): Your Responsibilities in NYC Family Shelters

Form 101(B): Sus Responsabilidades en los Albergues para Familias de la Ciudad de Nueva York

Form 102(A): Client Acknowledgement of Responsibility Form (CARF)

Form 102(B): Formulario de Aceptacion de Responabilidades del Cliente (CARF)

Form 103: Service and Bi-Weekly Plan/ILP Instruction Sheet

Form 104: Service and Bi-Weekly Plan/Independent Living Plan for Families

Form 105(A): Client Apartment Review Checklist

Form 105(B): Lista del Reviso de Apartamento

Form 106(A): Client Apartment Rejection Form

Form 106(B): Formulario de Apartamento Rechazado por el Cliente

Form 107: Client Responsibility Sanction Recommendation Form

Form 108: DHS Sanction Review Committee Form

Form 109: Notice to Provider of Sanction Denial

Form 110(A): Notice to Client of Continued Shelter Eligibility

Form 110(B): Aviso de DHS al Cliente Sobre Eligibilidad de Albergue Continua

Form 111: Program Administrator Sanction Recommendation Form

Form 112(A): DHS-10B Notice to Discontinue Temporary Housing Assistance

Form 112(B): DHS-10B Aviso Para Descontinuar su Asistencia de Vivienda Temporaria (THA)

Form 113: AFIC Sanctioned Family Referral Form

Form 114(A): Notice to Client upon Return from Sanction

Form 114(B): Aviso al Cliente al Regresar de Sancion

Form 115(A): DHS-10A Notice of First ILP Violation

Form 115(B): DHS-10A Aviso Sobre la Primer Falta en Cumplir con el Plan de Subsitencia Independiente (ILP)

Form 116(A): DHS/DSS-4002S Application for Temporary Housing Assistance Upon Return from Sanction Form 116(B): DHS/DSS-4002S Application Para Albergue Temporal a el Cliente Cuando Regrese De Sancion

PURPOSE

The DHS principles state, "all homeless individuals or families should receive safe, temporary shelter; planning for permanent housing should begin immediately." This procedure will ensure that an adult family (hereinafter referred to as a "family") moves expeditiously from homelessness to permanent

housing, while improving the culture and safety of shelters. It also outlines the increased responsibility, accountability, and partnership required of all participants in the service system, as DHS, providers, and families focus with greater urgency on achieving permanency. The goal of this procedure is to achieve prompt movement into permanency while ensuring open and honest communication of standards and expectations from the first day of service.

DESCRIPTION

A family receiving Temporary Housing Assistance (THA) must follow an Independent Living Plan established to reflect its individual circumstances, seek and accept permanent housing, and avoid behavior that places others at risk. If a family fails to comply with these requirements, its THA will be discontinued based on this procedure. This procedure includes exemptions that would excuse sanction for noncompliance by distinguishing between families who are unwilling, as opposed to unable to comply with the standards of responsibility. Specifically, DHS will not subject a family to discontinuance of shelter for failure to comply with the Client Responsibility rules when such failure is due to the physical or mental impairment of an individual. When a State Hearing is timely requested, a family has the right to challenge DHS' decision to discontinue THA by requesting a State Fair Hearing and to remain in the shelter pending resolution of the hearing process.

PART I: CLIENT RESPONSIBILITY REQUIREMENTS

A. REQUIREMENTS OF MAINTAINING THA ELIGIBILITY

INFORMING A FAMILY OF THE RESPONSIBILITY

From the time a family begins receiving THA until the time that permanency is achieved, the family must be informed of its rights and responsibilities. A head of household and any additional responsible adult member(s) of a family found eligible for THA must sign the Client Acknowledgment of Responsibility Form (CARF) [Form 102], which sets forth the requirements for remaining eligible for THA. A failure to sign the CARF does not relieve a family of the responsibilities described in this procedure.

A family currently residing in a temporary shelter, as well as a newly entering family, will be presented with the CARF at the following times:

- Upon eligibility for THA at the end of a conditional placement, as part of the intake process;
- Within 10 calendar days of arriving at any shelter;
- Within 10 calendar days from effective date of the Client Responsibility procedure for all families eligible for THA; and
- Immediately upon discovering that the client's case file lacks an original of the CARF, either signed by the client or with a notation that the client refused to sign.

If a family refuses to sign, the Provider will indicate on the form a failure to sign and indicate the date of refusal. However, the family will still be expected to meet the requirements of the CARF. A copy of the form will be given to the family and the original will be placed in the family's case file.

After a family has signed the CARF, all family members must actively fulfill their obligations to develop and comply with the personalized ILP, seek and accept suitable housing, and refrain from Gross Misconduct, as defined in Part I, Section A (3).

COMPONENTS OF CLIENT RESPONSIBILITY

1. Independent Living Plan (ILP)

The ILP [Form 103 and 104] is a document developed and completed by a Provider together with a family, which will guide the family in its efforts to secure permanent housing as expeditiously as possible. The ILP establishes tasks, based on a family's personal circumstances, to be completed by the family and the Provider to assist the family in securing permanent housing. The Provider must reinforce the provisions of the ILP during appropriate points of contact with a family, and the family's compliance with the plan will be noted accordingly in a family's individual case file.

The ILP must be individualized and developed with a family, based on an assessment of the family's housing and housing related needs. The ILP must include a specific plan to obtain permanent housing and address tasks and responsibilities in light of a family's abilities. The ILP must take into account needs related to housing, including any mental or physical impairments or domestic violence safety issues, and must include specific tasks, activities, and timeframes for how these needs will be addressed.

At any point where additional information demonstrates a safety risk in connection with domestic violence, the ILP must be modified to address the circumstances.

The Provider should recognize and assist families in addressing issues such as domestic violence or mental illness, and appropriately reflect a plan consistent with the family's circumstances in the ILP. The family has the right to present grievances of the ILP requirements without fear of reprisal.

The Provider has the responsibility of working closely with the family and using appropriate case management to aid the family in complying with its responsibilities and in achieving permanent or other appropriate housing. Shelter staff is responsible for providing assistance, if necessary, to a family to meet these requirements.

a. Family Responsibility:

A family must adhere to any tasks, activities, timeframes and other requirements that have been outlined in the family's individual ILP to assist it in securing permanent housing. This can include such provisions as keeping appointments, attending training, establishing Public Assistance eligibility, securing employment, and/or establishing any other basis for housing assistance eligibility.

All requested documents should be submitted by a family to the Provider within thirty (30) days of a request. A family that cannot produce required documentation must demonstrate a suitable reason in order to be considered in compliance with the ILP. A family shall not be required to produce documentation of domestic violence when production of documentation would put the family at risk of violence or make it harder for the family to leave or remain safe from the abuser.

Examples of a family's responsibilities to ensure ILP compliance include, when relevant and appropriate to a family's personal circumstances:

Signing the ILP and subsequent updates, as an indication that the family has
participated in its development, understands it, and agrees to carry it out;

- Establishing Public Assistance eligibility, or securing employment or another method to pay for permanent housing;
- Participating in budget counseling, particularly for a family with a history of nonpayment of rent;
- Pursuing employment options, particularly for a family ineligible for public housing or rent subsidies;
- Participating, with any necessary assistance, in drug and alcohol treatment programs, when substance abuse interferes with a family's ability to seek, secure, and retain permanent housing;
- Participating, with any necessary assistance, in physical/mental health evaluations or mental health treatment services when mental health or physical problems interfere with a family's ability to seek, secure, and retain permanent housing;
- Participating in money management planning;
- Making every reasonable effort to resolve legal and other matters, including landlordtenant issues and outstanding warrants that interfere with a family's ability to move into permanent housing; and
- Complying with all housing search requirements set forth in Section 2 (a) below.

Completion of a family's personalized ILP will be measured by the family achieving the interim goals that assist it in securing and relocating into permanent housing.

Factors outside of a family's control that affect or prevent completion of the ILP, including whether an impairment influences the ability to comply, must be considered in any determination of whether the family is appropriately following its personal ILP. These determinations will be made on a case-by-case basis.

Non-compliance occurs when a family has unreasonably failed to develop, carry out, or complete an ILP. An infraction includes any unreasonable failure on the part of a family to complete the steps in the ILP in a timely manner, impacting the ability to obtain and move into permanent housing.

b. Provider Responsibility

A Provider and a family must actively participate in developing an individualized ILP and the Provider is responsible for assisting the family in the implementation of the established service plan. A Provider is responsible for working closely with a family and using appropriate case management to obtain evaluations and services designed to help the family achieve permanent housing.

A Provider is responsible for the following:

- Assisting a family in securing all appropriate documentation;
- Completing a family's intake assessment and ILP within 10 days of a family's arrival;
- Conducting at least bi-weekly meetings with all family members to discuss and update the ILP;
- Assisting a family in obtaining an evaluation by a certified, licensed, or accredited
 health or mental health care provider of a family's health needs, that identifies any
 impairments that any family member may have, and modifying the ILP accordingly;

- Assessing the need for services and making service referrals, including referrals for evaluation of a family member's physical or mental impairments, as well as the results of any evaluation and any refusal by a family to be evaluated;
- Assisting a family in identifying, addressing, or referring for issues such as domestic violence and mental illness, when needed;
- Assisting a family in preparing for permanent housing including assisting in completing applications, establishing housing assistance eligibility, securing permanent housing, social and mental health services, and employment services;
- · Assisting a family in establishing or maintaining eligibility for Public Assistance;
- Exploring income and employment options with a family that is ineligible for public housing or rent subsidies;
- Implementing and documenting progressive supervisory and administrative intervention to achieve compliance with the ILP;
- Notifying a family after the first violation of its ILP; and
- Updating a family's ILP for changes in the family's physical or mental health condition and adjusting future ILP's accordingly.

At any point where additional information demonstrates a safety risk in connection with domestic violence, the ILP must be modified to address the circumstances.

If a family fails to cooperate in developing and/or complying with the ILP and/or updates, a Provider shall document the family's non-compliance. The first time a family unreasonably fails to comply with the development, implementation or completion of its ILP/Updates, DHS or the Provider must inform the family of this determination by serving the Notice to Discontinue Temporary Housing Assistance (Shelter) First ILP Violation [Form 115] to the head of household. A family who has violated its ILP for the first time may remain in the shelter by immediately reapplying for shelter eligibility at its current shelter. The family also has the right to a Fair Hearing to contest the finding of the first ILP violation. The social services director, caseworker, or other appropriate staff will conference the family regarding the consequences of further noncompliance, explain that a second violation may result in the discontinuance of shelter for 30 days or longer, and will seek the family's cooperation. ILP infractions and notes from the conference(s) must be fully documented in the case file.

After the first ILP violation, if the shelter director believes that the subsequent failure of the family to comply with an ILP warrants the discontinuance of shelter eligibility, he or she may recommend a durational sanction as described in Part II, Section A "Sanction Initiation Process."

A family's unreasonable failure to comply with individualized ILP requirements two or more times may result in a sanction from shelter for 30 days, or until the failure ceases, whichever period of time is longer.

The noncompliance will be excused, and discontinuance action will not be taken, when the noncompliance is due to a mental or physical impairment. This will be evaluated on a case-by-case basis. The Provider must document the impairment and make any appropriate modifications to the ILP.

2. Seeking and Accepting Housing

A family is required to look for housing on its own and to accept suitable housing referrals from DHS and the Provider. A family may not refuse to sign a lease or in any other way reject any suitable housing, including permanent housing, reunification with family members, or other appropriate housing (except as provided in Part I, Section B, "Mental and Physical Health Impairment Exception to Client Responsibility").

a. Family Responsibility

A family must cooperate in the search for permanent housing, consistent with the ILP, in the following ways:

- Informing the Provider of any alternative housing options with relatives or friends;
- Obtaining and completing all appropriate permanent housing applications within 90 days of becoming eligible for shelter services;
- Actively looking for permanent or other appropriate housing consistent with the family's individualized ILP;
- Attending housing readiness workshops;
- Completing a Client Apartment Review Checklist [Form 105] for each apartment seen;
- Informing the Provider on a voluntary basis of any domestic violence safety needs that must be considered in locating permanent housing;
- Signing a Client Apartment Rejection Form [Form 106] when refusing an apartment;
- · Keeping all housing appointments, including appearing on time;
- Providing all legal and appropriate information required by the landlord or housing agency;
- Viewing and agreeing to accept all suitable housing options;
- Accepting the first suitable housing offer;
- · Signing and executing a lease for housing on the scheduled date; and
- Moving into secured housing on the designated date and time.

A family is responsible for seeking suitable permanent housing and for making an adult family member available for all housing related appointments, unless otherwise specified in the ILP, or if there is a previous medical or other approved appointment, including employment or welfare-related obligations of which the Provider has been made aware, an intervening demonstrated illness of a family member, or other legitimate emergency situation.

b. Provider Responsibility

A Provider is responsible for working closely with a family, based on the circumstances in its individualized ILP, using appropriate case management to obtain evaluations and services designed to help the family achieve permanent housing. A Provider is responsible for assisting a family in its transition into permanent housing. The requirements of a Provider include, but are not limited to:

Advising a family of the responsibility to seek and accept housing;

- Ensuring that all relevant housing applications are completed in an appropriate manner within 90 days of a family becoming eligible for shelter services, forwarded to their designated destination and that copies are retained for the case record;
- Documenting and following-up on all housing appointments and permanent housing applications;
- Verifying all housing rejections, including the reason for such rejections;
- Providing ongoing housing education to a family through workshops and/or individual counseling;
- Accompanying a family on housing searches, when appropriate;
- Preparing a family for housing interviews, including providing a housing checklist [Form 105];
- Providing a family with a list of suitable available apartments in a location consistent
 with a family's domestic violence status, if applicable, and advising a family that it is
 also responsible for seeking additional apartments on its own;
- Developing and monitoring an individualized permanent housing plan for a family
 who has earned income and is ineligible for government housing subsidies and
 assisting the family with money management planning; and
- Securing a medical or psychiatric evaluation for the family, when appropriate, to
 determine whether there is a physical or mental condition that may affect the
 suitability of particular housing.

DHS reserves the right to review an apartment's compliance with the Section 8 Housing Quality Standards and applicable local codes and regulations.

If a family fails to cooperate in seeking and accepting suitable housing, a Provider shall document the family's non-compliance. Only a family's unreasonable failure to comply with "seeking and accepting housing" requirements may result in a sanction being imposed.

A family may not unreasonably refuse any suitable housing, as long as the housing is suitable to the family's recognized needs, consistent with any domestic violence status as defined by local law, and is compliant with applicable local codes and regulations.

The client's unreasonable failure to comply with "seeking and accepting housing" requirements may result in the discontinuance of shelter for 30 days, or until the failure ceases, whichever period of time is longer.

Any noncompliance will be excused, and sanction will not be taken, when the noncompliance is due to a mental or physical impairment. This will be evaluated on a case-by-case basis. The Provider must document the impairment and make any appropriate modifications to the ILP.

At any point where additional information demonstrates a safety risk in connection with domestic violence, the ILP must be modified to address the circumstances, which may include revising suitable housing options.

3. Gross Misconduct

Shelter residents and staff are entitled to a safe environment that protects their personal safety and is conducive to the provision of services, which will help the family achieve independence.

a. Family Responsibility

A family must refrain from engaging in acts which endanger the health or safety of the family or others, or which substantially and repeatedly interfere with the orderly operation of a temporary housing facility.

Prohibited acts of dangerous conduct within a shelter include, but are not limited to:

- Violence or other conduct significantly impacting the safety of clients, staff, or others;
- Possession or sales of illegal drugs, firearms, or deadly weapons;
- Destruction or theft of property;
- Reckless behavior that creates a safety hazard in the shelter that may result in evacuation and/or injury, including, but not limited to, fire-setting or smoking in shelter; and
- Rape or sexual assault of clients or staff.

b. Provider Responsibility

A Provider is responsible for working closely with a family and using appropriate case management to obtain evaluations and services designed to help the family achieve permanent housing. To avoid incidents of Gross Misconduct and to ensure fairness to a family, the Provider must advise the family, both orally and in writing, that incidents of Gross Misconduct may result in the termination of the family's continued THA and, if appropriate, will result in notification to the NYPD or other governing City or State agency. A Provider is also responsible for:

- Documenting in a family's case record all incidents which endanger the family's health
 or safety or that of others in the facility or which substantially and repeatedly interfere
 with the orderly operation of the facility;
- Notifying the NYPD or other governing City or State agency of any incidents;
- · Completing a DHS Incident Report; and
- Notifying DHS staff.

If a family fails to cooperate with the rules regarding Gross Misconduct, a Provider shall document the family's non-compliance. In seeking a sanction for the non-compliant behavior, the shelter director may consider previous incidents, even those that occurred at another shelter, as long as the family's case file contains documentation of the previous infractions.

Except in extraordinary circumstances, the Provider should not consider a single instance of disruption of shelter operations that is not as dangerous as Gross Misconduct. When a family substantially and repeatedly disrupts shelter operations, the Provider must at some point determine when the infractions, taken together, become grounds for discontinuance of shelter. The Provider must also decide whether to sanction the entire family or whether an individual adult family member is responsible for the infraction.

The discontinuance of shelter for a sanctioned adult member or family's Gross Misconduct is for 30 days, or until the failure ceases, whichever period of time is longer. The noncompliance will be excused, and discontinuance action will not be taken, when the

noncompliance is due to a mental or physical impairment. This will be evaluated on a case-by-case basis. The Provider must document the impairment and make any appropriate modifications to the ILP.

At any point where additional information demonstrates a safety risk in connection with domestic violence, the ILP must be modified to address the circumstances.

B. MENTAL AND PHYSICAL HEALTH IMPAIRMENT EXCEPTION TO CLIENT RESPONSIBILITY

A family will not be sanctioned when noncompliance with Client Responsibility Requirements is due to a physical or mental impairment that prevents compliance.

A physical or mental impairment is defined as a physical or mental illness or condition that interferes with a person's ability to function, including, but not limited to dementia, mental illness, mental retardation, and substance abuse disorders.

The presence of a physical or mental impairment does not automatically exempt a family from sanction, unless the family's noncompliance is due to the physical or mental impairment. The noncompliance is not due to the impairment if a family member, despite his or her impairment, is able, but unwilling, to comply with Client Responsibility rules. In addition, an exemption from sanction due to a physical or mental impairment in one instance does not imply future exemptions from Client Responsibility requirements.

1. Family Responsibility

If a family member has a mental or physical condition that impedes its ability to comply with Client Responsibility rules, the family should take the following actions to the extent that it is feasible:

- Cooperate with the Provider in completing the mandated intake assessment within 10 days of
 entry into the shelter and notify an appropriate shelter worker of any relevant medical or
 psychiatric condition;
- Submit, within a reasonable time, a letter from a certified, licensed, or accredited health or
 mental health care provider confirming the medical or psychiatric diagnosis and explaining
 how the condition may affect the family's ability to comply with Client Responsibility rules
 and/or influence criteria for suitable housing;
- Alert the Provider to any change in a family member's medical or mental health condition, if
 that change will interfere with the family's ability to comply with Client Responsibility rules or
 will interfere with the ability to search for housing or the determination of what constitutes a
 suitable apartment; and
- Submit documentation, as expeditiously as possible after the refusal to accept an identified housing option confirming the physical or mental illness or condition and the specific reasons why the identified apartment is unsuitable.

2. Provider Responsibility

A Provider must help a family member to secure documentation regarding whether and how his or her impairment may affect the family's ability to comply with the ILP, seek and accept suitable housing, and adhere to the rules regarding Gross Misconduct. A Provider's responsibilities in this regard are the following:

- Requesting, during the assessment process, information about prior medical and mental health treatments:
- Requesting that a family signs appropriate releases for information, if necessary;
- Securing, within a reasonable time, a letter from a certified, licensed, or accredited health or mental health care provider confirming the medical or psychiatric diagnosis and explaining how the condition may affect the family's ability to comply with Client Responsibility rules and/or influence criteria for suitable housing;
- · Continuing to counsel the family to accept services and participate in an updated ILP; and
- Integrating a family's distinct physical and/or mental health condition into the ILP.

A Provider must alert a DHS Program Analyst of a family member's condition, if the cited condition impairs a family's ability to comply with Client Responsibility rules, and if all efforts to arrange for the family to undergo an evaluation or obtain documentation have been exhausted or if there is a question as to whether the documentation obtained accurately reflects the condition. The Program Analyst will alert the Program Administrator, who will contact the DHS Agency Medical Director or designee for appropriate assistance, if needed, and may ask the Provider to consult directly with the DHS Agency Medical Director or designee. This information will be documented in the family's case file.

A Provider must assist a family member whose mental or physical impairment interferes with the ability to comply with the individualized ILP by providing appropriate assistance and referrals and by developing a specialized plan that will assist the family in overcoming homelessness. Exemption from a sanction must not prevent the family from achieving permanency and Provider assistance is critical to a family securing permanent housing.

If, at any time, the family raises any health or mental health related issues that interfere with its ability to comply with the Client Responsibility rules or if shelter staff has reason to believe there are health or mental health related issues, the Provider must request documentation and assist the family in submitting the documentation within ten (10) days. The Provider must work with the family to address any problems in obtaining the necessary documentation to ensure that an impaired family member is not erroneously deemed to be non-compliant.

A family has the right to present grievances to the DHS Family Services American with Disabilities Act (ADA) liaison.

PART II: DISCONTINUANCE OF TEMPORARY HOUSING ASSISTANCE

A. SANCTION INITIATION PROCESS

Proper documentation and evaluation is critical to a sanction process. A family's individual case file must include, as appropriate, but not be limited to: Client Acknowledgement of Responsibility Form (CARF), intake assessment, Independent Living Plan and subsequent biweekly reviews, documentation of any intervening case management provided by a shelter's staff, Public Assistance correspondence, DHS Incident Reports, housing assistance applications and correspondence, domestic violence information, and mental or physical health reports.

1. Provider Responsibility

A Provider has the primary responsibility for initiating a recommendation, based on its discretion, to sanction a family it identifies as non-compliant with the Client Responsibility rules, taking into consideration the distinguishing characteristics of each family's case. The sanction process should only be initiated after the Provider has interviewed the family about the reasons for the alleged non-compliance, using the checklist Client Responsibility Sanction Recommendation Form [Form 107]. The Provider must conference the family to inform the family that a recommendation for a sanction is being made and discuss the consequences if a sanction is approved.

An appropriate shelter facility employee recommends a sanction to the shelter director, based on each case's factors. If, after reviewing the merits of the case, the shelter director decides to pursue a sanction recommendation, he or she attaches the Client Responsibility Sanction Recommendation Form [Form 107] to the family's case file, gives a copy of the form to the head of household, and submits all appropriate documentation to the DHS Program Administrator. A decision not to proceed with a sanction recommendation requires no further action.

2. DHS Staff Responsibility

As part of DHS' oversight of providers, DHS Program Analysts or Administrators may review whether sanctions are being requested in appropriate cases. During a review of a family's file and after consulting with the Provider and the head of household, if necessary, DHS staff can recommend a sanction if appropriate action by a Provider has not taken place. The staff can request corrective actions when a Provider is seeking sanctions for inappropriate cases. DHS must notify the shelter director immediately of a sanction initiation using the Client Responsibility Sanction Recommendation Form [Form 107]. The Provider must give the head of household a copy of the form.

B. REVIEW OF SANCTION RECOMMENDATION

At all levels of review to discontinue THA, a family's case file must be reviewed in order to determine whether or not the family's non-compliance is the result of a physical or mental impairment, whether any factors were beyond the control of the family, or if conduct by the Provider would excuse the non-compliance.

If the individual or family alleges that a physical or mental impairment interferes with its ability to comply with Client Responsibility rules, and DHS believes that the allegation is credible, THA will continue until a determination is made by an appropriate professional whether a mental or physical impairment is not the cause for non-compliance.

A DHS Program Administrator must review the sanction recommendation within one (1) business day of receipt of all information. At any point, the Program Administrator may request additional documentation from the shelter director, and extend the time for review, up to three (3) business days from the date requested documents are submitted. The Program Administrator can approve or disapprove a sanction recommendation based on the merits of the individual case. A decision to disapprove a sanction recommendation must be documented with the reasons for the decision, on the Notice to Provider of Sanction Denial [Form 109], which is given to the shelter director, and a copy is kept for DHS records. The family will be notified of its continued THA with the Notice to Client of Continued Shelter Eligibility [Form 110], given to the Provider by the Program Administrator.

A decision to approve a sanction recommendation based on the circumstances of the case must be documented on the Client Responsibility Sanction Recommendation Form [Form 107], attaching all

supporting documentation. This will be submitted to the DHS Sanction Review Committee, which will include a DHS manager and agency counsel. The Program Administrator will also notify the Provider of the decision to forward a recommendation to the Committee for its review with the Program Administrator Sanction Recommendation Form [Form 111].

Within three (3) business days of receiving the Program Administrator's sanction recommendation, the Sanction Review Committee will make a determination to approve or disapprove the recommended sanction and notify, in writing, the DHS Program Administrator and the shelter director. At any point, the Committee may request additional documentation from the shelter director, and extend the time for review, up to three (3) business days from the date requested documents are submitted.

A decision to disapprove a sanction recommendation will be documented on the DHS Sanction Review Committee Form [Form 108]. This document will be provided to the shelter director who is responsible for notifying the family, using the DHS Notice to Client of Continued Shelter Eligibility [Form 110], within 24 hours of receipt of the decision. The family remains in the shelter and no further action is required.

A decision to approve a sanction recommendation will be documented on a Notice to Discontinue Temporary Housing Assistance [Form 112]. This document will be provided to the shelter director and Program Administrator and the procedure in Section C will be followed.

All final determination forms by DHS must be placed in a family's case file.

C. IMPLEMENTING THE SANCTION RECOMMENDATION

Upon the decision to discontinue shelter eligibility, DHS or Provider staff will serve the Notice to Discontinue Temporary Housing Assistance personally on the family within two (2) business days of the decision being rendered and request the head of household's signature. DHS or Provider staff must make reasonable efforts to serve the family personally, and, if unable to do so, must leave the Notice under the family's door and place the Notice into the family's mailbox, then note the method used to serve the family on the Notice of Discontinuance of THA. Provider staff should also keep a copy of the Notice to give to the family in cases where the Notice is left under the family's door.

The client has a right to a case conference with the shelter director or his or her designee to review the sanction. The client must contact the shelter director or his or her designee by 5:00 pm on the first business day after the Notice to Discontinue THA has been served. The shelter director or his or her designee must hold the conference by 5:00 pm on the second business day after the Notice to Discontinue THA has been served. If the client does not schedule the conference within this timeframe or appear at the appointed time, the client will waive the right to a conference. If as a result of the conference the shelter director or his or her designee believes the sanction was inappropriate, the shelter director or his or her designee must immediately contact the DHS Program Administrator who will coordinate with the Sanction Review Committee to discuss and consider the shelter director's concerns.

If a client requests a conference, he or she is still entitled to a State Fair Hearing.

If a family wants to appeal the DHS decision to discontinue THA, in order to remain in the shelter pending the hearing decision, the family must request a State Fair Hearing within ten (10) days of receiving the Notice to Discontinue Temporary Housing Assistance, which will be specified in the Notice. The Notice will also specify that upon the family's request, the Provider will make the shelter's fax machine available during regular business hours to request a State Hearing. As soon as the family informs the Provider that it is requesting a State Fair Hearing, the shelter director must notify the DHS Legal Unit. If a family requests a fair hearing in a timely manner upon receiving the DHS decision to discontinue THA, the family may remain in the facility until a fair hearing decision is issued unless other suitable housing options are available

to the family. If the State overturns a sanction, the family may remain in a shelter and continue to receive THA; if the State upholds a sanction, the family is no longer eligible for THA and will be directed to leave the facility by 10:00 PM on the day notification of the Fair Hearing decision was received.

When a sanction is enforced, the entire family will be requested to leave the shelter, except in cases which allow for the non-sanctioned family member(s) to either (A) continue residing in shelter if the remaining members still constitute a family unit or (B) apply for services in the adult shelter system if they do not constitute a family unit. The individual(s) sanctioned will be ineligible for shelter service until the non-compliant behavior has ceased (see Section D, Part 3 below).

A Provider must notify DHS of any final determination. DHS will enter the appropriate sanction code into the Client Tracking System (CTS) and notify the Division of Adult Services that THA has been discontinued.

D. SANCTION ENFORCEMENT/READMISSION

If a sanctioned family returns to the Adult Family Intake Center (AFIC) for housing assistance, it will sign the Reception Log. A reception worker will then interview the family, check CTS to confirm the sanction, and complete an AFIC Sanctioned Family Referral Form [Form 113].

1. READMISSION FOLLOWING 30-DAY SANCTION PERIOD

If a family who has been sanctioned for noncompliance returns to the AFIC <u>after</u> the 30-day sanction period has elapsed, the designated DHS staff member must agree to readmit the family if the family demonstrates that the behavior that caused the sanction has ceased, or if the continued noncompliance is due to a physical or mental impairment that occurred during the sanction period, provided the applicant is otherwise eligible.

The designated DHS staff member will explain the Client Responsibility requirements to the family before asking all members to sign the Application for Temporary Housing Assistance Upon Return from Sanction [Form 114]. This reasonably ensures that the family knows its responsibilities and is aware of the possibility of further sanction for failure to comply with the requirement that it violated. If a family member refuses to sign the form, staff will indicate the date of refusal on the form and explain to the family that the sanction period continues.

If all family members sign the form, the DHS designee must inform the family that it will be conditionally provided shelter until a DHS staff member or appropriate shelter designee determines whether the behavior that resulted in the sanction has ceased and if the family is otherwise eligible. This assessment of behavior under Client Responsibility standards will occur simultaneously with the eligibility determination process. If a family member demonstrates at any point that the behavior has not ceased, the entire family will be found ineligible for THA and the sanction will continue.

If the assessment determines that the behavior that resulted in the sanction has not ceased, the designated staff member must seek approval from the DHS Program Administrator to continue the family's sanction beyond 30 days. If the Program Administrator concurs, the staff member records the decision to deny the family's request for shelter on Application for Temporary Housing Assistance Upon Return from Sanction [Form 114] and serves the form to the head of household. The staff member informs the family that it has the right to a Fair Hearing to appeal DHS' action, but that such a request does not entitle the family to the continued receipt of shelter. The shelter director directs the family to leave the premises and advises that the family may apply for shelter

when the behavior that caused the sanction has ceased or a Fair Hearing finds in favor of the family.

If any non-sanctioned members of a family choose to re-apply as a family without the sanctioned individual(s), the non-sanctioned individuals will undergo a separate eligibility determination consistent with the applicable eligibility requirements.

If the assessment determines that the behavior that led to the sanction has ceased and if the family is otherwise eligible, the designated staff member records the decision to accept the family into the shelter on the Application for Temporary Housing Assistance Upon Return from Sanction [Form 114] and serves the form to the head of household.

2. READMISSION PRIOR TO THE END OF A 30-DAY SANCTION PERIOD

If a family who has been sanctioned for noncompliance returns to the AFIC before the 30-day sanction period has elapsed, DHS may on rare exception and pursuant to the paragraph below agree to readmit the family. The family members must demonstrate that the behavior that resulted in the sanction has ceased, or that continued noncompliance is due to a physical or mental impairment that arose after the sanction. A family who has been sanctioned for acts of violence will not be eligible for re-admittance to the shelter before the 30 day sanction period has elapsed. The family will not be provided with overnight accommodations unless there is a Winter Alert (see Section E below).

The designated DHS staff member will explain the Client Responsibility rules to the family members before asking all of them to sign the Notice to Client Upon Return From Sanction [Form 114A]. This reasonably ensures that the family knows its responsibilities and is aware of the possibility of further sanction for failure to comply with the requirement that the family violated. If a family member refuses to sign the form, staff will indicate the date of refusal on the form and explain to the family that the sanction period will then continue. If the family signs the form, the staff must determine whether the behavior that caused the sanction has ceased. This may include consulting with the shelter staff from the original facility and conferring with the DHS Program Administrator. The Deputy Commissioner of Family Services must approve all decisions to readmit a client before the end of the 30-day sanction period. A decision to readmit a family before the end of the 30-day sanction cannot be reversed.

If any non-sanctioned members of a family choose to re-apply as a family without the sanctioned individual(s), the non-sanctioned individuals will undergo a separate eligibility determination consistent with the applicable eligibility requirements.

3. READMISSION AS A SINGLE ADULT

In cases where only one family member is sanctioned, the sanctioned individual can reapply for admission into the family services shelter system if s/he constitutes a family at the time of reapplication. The individual and family will then be assessed as outlined above in parts 2 and 3.

If the sanctioned individual applies for admission into the adult services shelter system, behavior assessment and re-admission will be coordinated with the Family Services Division through the sanctioning Program Administrator.

E. WINTER ALERT

DHS will not enforce a sanction on winter alert days declared by the Department of Health or when temperature within New York City falls below 320 F. When the Winter Alert is lifted, the family must leave the shelter to begin or continue the sanction.

DHS will not turn away a family whose sanction period has not expired and who returns on a Winter Alert day. DHS must inform the family that it must leave the shelter when the Winter Alert ends. The time spent in the shelter during the Winter Alert does not reduce the sanction period.