

117 - ONGOING ASSESSMENT AND SERVICES

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PREFACE: CORE VALUES

The foundational philosophy of the Family Support and Child Welfare Services Section of the North Carolina Division of Social Services and the NC Multiple Response System (hereinafter MRS) is family centered practice. One of the strategies of MRS is to intensify the collaboration between Child Welfare and Work First. Therefore, Work First has embraced family centered practice and the 6 principles of partnership in its policies and practices. All involvement with any family should reflect the six (6) principles of partnership, which are:

1. Everyone desires respect
2. Everyone needs to be heard
3. Everyone has strengths
4. Judgments can wait
5. Partners share power
6. Partnership is a process

The principles of family centered practice reflect the belief that the family is its own primary source of information. The family is viewed as a system within a larger social and environmental context. As a result, interventions focus on accessing the family's immediate and extended community through needs assessment, resource identification, and service delivery. Family centered practice respects the family's right to self-determination and assumes the family has the capacity to grow and change when provided the proper supportive services.

I. INITIAL ASSESSMENT

A thorough assessment can be one of the strongest tools to aid families in removing barriers to employment and achieving self-sufficiency. Once the initial screening and assessment have been completed as described in Section 101 of the Work First policy, then it is necessary to engage the family in ongoing assessments to ensure the most appropriate family case plan (MRA-Plan of Action) is designed and the family is connected to the most appropriate services. The purpose of this section is to provide guidance on working with more difficult situations such as those cases containing individuals with physical or mental disabilities, issues of substance abuse, domestic violence, limited education, and other barriers to self-sufficiency.

A. Employment and Assessment Planning

This assessment and planning process begins with an Employment Services assessment with each Work First family. The information gathered during the assessment will assist the caseworker and the participant to establish immediate, short-term, and long-term goals. Use the information and goals from the assessment and planning to develop

the Plan of Action of the Mutual Responsibility Agreement (DSS-6963B).

B. The Purpose of Employment Services Assessment

The purpose of assessment and planning is to identify a family's strengths and resources needed to achieve employment. Assessment should help each family identify and begin to resolve the circumstances, which have contributed to their need for Work First benefits. These strengths and needs should be identified on the Mutual Responsibility Agreement (DSS-6963A) and documented in the case record. In addition, the Plan of Action of the MRA should reflect expected outcomes of employment and self-sufficiency.

Planning is a process which should prepare the family for independence from the welfare system by the end of the 24-month time limit, where applicable, and after longer periods of time in some instances. Therefore, the planning process should:

- Identify family strengths to build upon. Strengths are current family resources available to help alleviate barriers and assist with overcoming challenges. Identifying barriers determines resources needed to assist families with achieving employment and self-sufficiency, i.e., transportation, day care, uniforms, substance abuse counseling, etc.
- The result should be an appropriate plan for immediate, intensive program participation (35 hours/week), with expected begin and end dates for each activity. For example, Job Search/Job Readiness: begin MM DD YY and end MM DD YY. Assign each activity with the purpose of improving a participant's employability. This includes the initial plan and any reassessment necessary to evaluate a participant's progress and participation in assigned activities.
- Help the family learn to identify the specific circumstances that have contributed to the family's need for *Work First Family Assistance*.
- Help the family learn to identify specific activities required and resources needed.

C. Assessment Requirements

When a work eligible individual has completed his/her first twelve (12) weeks in the Work First Employment Services program and remains unemployed or continues to exhibit signs and symptoms of substance abuse, domestic violence, or other barriers to self-sufficiency, then a more structured assessment may be required. The strategies and work requirements may need to be refined as the family begins to assume increased responsibility for its future independence. At a minimum, the MRA Plan of Action should be updated every 12 weeks, although more frequent ongoing contact may be necessary, particularly for more challenging cases.

Assessment and planning should be done throughout the family's Work First experience. It is important to recognize that assessment is an on-going process, not a one-time event. The process is described here as it should initially occur and reoccur with each subsequent discussion with the parent. It is important to access all available, relevant information prior to the first assessment and planning interview. Reviewing existing information will help the caseworker focus on the family's strengths and needs and prevent the need to ask for information already available. Use information already gathered about the family during the application process for *Work First Family Assistance* (i.e., WFFA Eligibility Workbook, initial screening forms, county-developed intake forms, etc.). It is not appropriate to collect information the family has already provided to the agency.

An MRA Plan of Action is required to initiate Employment Services. It should be comprehensive and individualized. This process will guide mutual decisions regarding the strategies to promote the family's independence from the welfare system in the context of time-limited benefits and cash or cash-like resources. As an ongoing process, assessment and planning allows modification to a family's plan for self-sufficiency as the family transitions from one activity or set of activities to another in pursuing self-sufficiency. It is not possible to get all pertinent information about a family in the initial interview. As the caseworker becomes better acquainted with the family and develops a relationship, which promotes mutual trust and shared responsibility, the family's course to achieving self-sufficiency will become more clearly defined. For example, during this process, the caseworker and the family might jointly evaluate job retention skills such as conflict resolution, interpersonal skills, budgeting, and parenting skills, as well as the family members' ability to adapt to full-time employment, which can sustain independence. As such, the assessment and planning process is ongoing and should be modified as family circumstances change. Even once the family stops receiving *Work First Family Assistance*, the planning process may continue.

The planning process should also inform both the caseworker and the family of existing job-seeking and job-keeping skills as well as any potential barriers. The initial assessment of the participant's ability to complete the following tasks may be evaluated by providing actual opportunities to demonstrate job-seeking and job-keeping skills. This will offer the participant a chance to "learn by doing." Some of these competencies include:

- **Completing a Job Application** - A participant should be able to complete a job application accurately, which includes an accurate work history and references.
- **Researching Job Opportunities** - A participant should be able to identify job openings that match his or her particular skills and interests. This requires a participant to identify existing skills that were acquired through work experience and life situations that can be transferred to a new or different work setting.

- **Demonstrating Interviewing Skills** - A participant should be able to participate in a mock interview that reflects appropriate demeanor, the ability to respond to an employer's questions, and the ability to ask questions regarding job requirements, work environment, and other pertinent issues.
- **Demonstrating Appropriate Interview Attire/Demeanor** - At a minimum, a participant should be able to demonstrate appropriate attire and behavior to conduct a job search or participate in a job interview.

If a participant does not have the skills or resources to accomplish the above responsibilities, refer the participant to community and agency resources.

Information can be gathered in many ways -- from standardized tests to face-to-face interviews. Regardless of the method used, they should be "packaged" in a way that best suits the needs of the family. Participants who have a strong work history and are clear about occupational interests may not require the same level of assessment or job preparation as individuals with little or no prior job experience. There are a variety of instruments that can provide important information to both the caseworker and the participant. Instruments such as interest inventories can help define a participant's occupational interests and serve as a useful tool for providing valuable information early in the assessment and planning process. Other tools that evaluate educational and occupational skill levels can promote realistic and attainable employment goals. As earlier stated, the Mutual Responsibility Agreement (DSS-6963) may be a useful place to record some of this information in addition to documentation in the case narrative. A sample job application is a particularly useful tool. These are inexpensive, readily available, and can provide significant clues to an individual's skills and employability. Preliminary determinations can be made regarding the individual's ability to read, write, and follow instructions. In addition, information provided on a job application can reveal education level, work experience, interests, and prior experience in securing and retaining employment.

Employers may require a high school diploma, or the equivalent, to perform a specific job. If this credential is a job requirement, the caseworker should assist the participant to obtain and provide the necessary documentation.

If the job does not require a high school diploma, or if the participant's educational skill level is not equivalent to the required high school skill level, the caseworker must assess the individual's current skill level and identify strategies to upgrade those skills as appropriate. A high school diploma or other credential may be an appropriate goal for the participant but may require more time than is feasible under time-limited benefits. One goal of assessment and planning is to assist participants to recognize the need and opportunities for life-long learning. For example, an individual may seek employment with a company that supports a workplace literacy program that would enable his or her continued skill

development while also providing wages. In addition, an individual may need to work and pursue educational goals at the same time. This may be realistic, particularly when family support systems/resources are available. Among other things, the assessment process should reveal:

- Whether the individual has sufficient knowledge of an occupation in which he has expressed interest;
- If the individual is aware of the skills required to perform the job;
- If his current skills are adequate to perform the job; and
- If the individual is aware of the training required to prepare for the job/occupation

It is critical that the caseworker assists families in establishing realistic goals in the context of time limits, work requirements, and available resources.

The need for Supportive Services can be identified early in the assessment and planning process. Since participation in *Work First* should be intensive, the appropriate support for accessing program activities must also be in place. **The family should be the first resource as the caseworker and the participant explore transportation, childcare, and other supportive service needs.** Whenever possible, participants should be responsible for identifying these needed services and resources. The caseworker may need to discuss their responsibility for securing these services early on; however, the caseworker should continue to set the expectation and guidance to enable the family to accomplish this independently. The caseworker's role is to provide information and guidance, which eventually enables families to:

- Identify and evaluate existing resources;
- Make informed decisions which best meet their needs; and
- Secure the necessary services to support program participation and employment.

D. Screenings, Assessments, and Referrals

The following screenings should be completed for Work First applicants and/ or recipients as defined below:

1. Substance Abuse (Audit/DAST-10)-required at application refer to Work First policy Section 104B. The Audit and DAST-10 can be complete at review, if appropriate refer to Work First policy Section 201.
2. Substance Abuse Behavioral Indicator Checklist is a tool available for use if the participant is exhibiting signs that may be consistent with substance abuse. Refer to Section 104B for further guidance.
3. Mental Health-The Emotional Health Inventory (EHI) is a voluntary mental health screening for Work First applicants and recipients. Refer to Section 104B for further guidance.
4. Family Violence Option-Work First applicants are required to be

- notified of Family Violence Option. Case managers should refer to Work First Section 104D for further guidance on the notification and screening process.
5. Family Assessment-The Work First Assessment Form DSS 6901 can be used as the initial assessment of entrance into the Work First Employment Services Program. This tool will assess the individual's ability to participate in the work program.
 6. Vocational Assessment- A referral to Vocational Rehabilitation (VR), if appropriate. An appropriate referral would include the individual's interest in becoming work ready.
 7. Reassessment-The Work First Family Strengths and Needs Assessment Form or the DSS 6901 are appropriate for reassessing the family's situation. The Work First Family Assessment of Strength and Needs may be more appropriate for an ongoing assessment. Refer to II below.

II. Ongoing Assessments

The ongoing assessment is a more structured follow up with challenging cases. In reassessing these more difficult cases the Work First case manager should review the Social, Economic, Environment/Home, Mental Health, Activities of Daily Living, Physical Health and Summary of Strengths (S.E.E.M.A.P.S.) dimensions (see below for further explanation). This is a best practice assessment guide for case managers. If the above assessment tools have been completed during the initial information gathering process then the case manager should continue the assessment process by completing the Work First Family Assessment of Strengths and Needs Form (DSS-5298).

The Work First Family Assessment of Strengths and Needs will explore the following major domains:

- A. Social**-ask questions to determine what individuals, organizations and systems are connected to the family. Are these resources social support systems on which the family can depend? Does the family use resources in the community and how? Are there problems at school? Do the children have age appropriate knowledge of physical and sexual relationships? Are pre-teen or teenage children sexually active? What non-traditional connections does the family have?
- B. Economic**-includes a discussion of the family's finances. Are the caretakers or other adults able to pay bills and manage money? Is the family's available income reasonable enough to live on? If the income seems appropriate, but the family/residence appears to be needy, is there a comprehensible explanation about where the money goes? Is the family using LIEAP, EA, Food and Nutrition Services, childcare services? What source does the money come from (child support, work, SSI, etc., WFFA)? What are current and future career goals? Are they content with the current job? What is the work history for each adult member of the home? What job skills does the work eligible individual possess? What is their educational level

- C. Environment/Home**-How does the residence appear from the outside (Is it in good condition, etc.)? Is the home safe? Are there obvious hazards such as old refrigerators, non-working cars, etc.? How does the home appear inside? Is there a working phone, a computer system?
- D. Mental Health**-Do the members of the family have any mental illnesses? Are family members able to attend to the conversation? Do members of the family have a history of emotional difficulties or impulse problems? Does the family communicate well with each other, as well as with others? Are there indicators that the persons in the family have substance abuse addictions? Assess how the family expresses anger. What is the major belief system of the family? Have any of the children been diagnosed as "hyperactive" (which can sometimes be a sign of depression)? Does the family receive counseling or have they in the past? Has a medical provider prescribed medications for any mental health problem for a member of the family?

NOTE: At this level of involvement in the case, the Audit and DAST-10 screenings have been completed. Refer to Section 104B on the completion of the substance abuse tools. The Audit/DAST-10 tools are completed at application and at review (if necessary). However, there may be a need to assess further. For further assessment, use the Substance Abuse Behavioral Indicator Checklist II (attachment D in Section 104B). A new assessment tool entitled "The North Carolina Work First Family Assessment of Strengths and Needs" is available to assist the Work First case manager in identifying the strengths and needs of the family to aid in family case planning.

- E. Activities of Daily Living**- Is appropriate clothing available for the family (appropriate as to weather, size, cleanliness, etc.)? What activities does the family participate in? Does the family own a car? Is public transportation available and convenient? Is support needed in learning how to manage or organize the household or how to budget limited resources? Are the family members employable? Do the parents know how to discipline the children in the home? Do the children attend childcare? If so, where? How are the children performing in childcare, are they socializing well with other children? Are there any behavioral concerns from the childcare provider?
- F. Physical Health**-Are there any special medical concerns for family members? Is anyone in the family chronically ill and/or physically disabled? Does the family engage in regular exercise and have healthy meals? Have the children been vaccinated and are they up to date? Who are the medical/dental providers for the family?

Summary of Strengths- Assess the overall major strengths of the family. Review the issues of substance abuse, domestic violence, etc. Family strength can come in the form of interests, hobbies, skills, talents, resources and other capacities, both formal and informal extended community supports. Assess all family unit members for strengths.

Scoring-The highest score represents the area the family has a need. Once the need has been identified, the worker should refer the participant to the appropriate service. To score an item accurately, enter only one score for each item. Once each item has been scored, the worker should identify the strengths and needs. Strengths are those items with the lowest score and needs are those with the highest score. These strengths and needs will be used in the family case planning process.

Signatures-The TANF Strengths and Needs Assessment form requires the signature of the case manager and the participant.

III. Keys To Effective Use Of Assessment Instruments

A. Testing Instruments

The information-gathering process is important to both the caseworker and the *Work First* participant. Many assessment tools provide valuable and necessary information. However, the caseworker should exercise caution when using any standardized or pre-packaged assessment instrument. Some thoughts to consider:

- **Understand the purpose of each instrument** utilized to ensure that test results actually address the questions the caseworker and the participant have about his employability. This process will enable the caseworker and the participant to select the appropriate combination of assessment tools.
- **Acknowledge that no one test can sufficiently describe an individual's strengths or weaknesses** and should **not** be relied on as the sole determinant when choosing program activities to enhance job opportunities. Use tests only as tools to guide the joint decision-making process. Test results can contribute to the development of strategies to enhance a participant's employment prospects.
- **Recognize that unnecessary testing can be overwhelming and may discourage individuals whose previous testing experiences have been negative.** Do not require an individual to engage in a battery of tests. Many tools provide similar information or will provide information that the caseworker can better derive from asking or observing the participant. If recent assessments and planning have been conducted by other agencies such as schools, Mental Health, or Vocational Rehabilitation, utilize this information rather than require duplicate assessment. **The caseworker must obtain written permission from the participant prior to requesting this information from other providers.**

Testing instruments that measure occupational and educational skills and interests can be found in several locations. Public and private employment agencies, counseling/guidance offices in secondary schools or colleges, and community rehabilitation programs can be valuable resources as the caseworker begins to explore the availability and appropriate mix of assessment tools for utilization with planning.

When test administration requires prior training or a specific credential, refer the individual to the appropriate resource or agency, e.g., Vocational Rehabilitation, Community College. Tests of this nature can often provide in-depth information regarding a person's skills and aptitudes. If the caseworker uses an assessment and planning instrument of this type, always ensure that the caseworker and the participant understand the results and the implications for program participation as thoroughly as possible.

Many interest inventories are readily available and do not require testing experience. Oftentimes the caseworker can administer the interest inventory. In some cases, these tools can be self-administered. Interest inventories can be particularly useful to a participant who has little or no work experience and is unclear about job and work setting preferences. Intensive case management for Work First families will allow for frequent updates. Assessment and planning is a continual process. The outcome of assessment and planning should be clearly defined goals and strategies the caseworker and the participant jointly develop in the Plan of Action of the Mutual Responsibility Agreement. The caseworker may need to refine the strategies and work requirements as the caseworker gains understanding of the specific strengths and resources needed and as the family begins to assume increased responsibility for its future independence. At a minimum, the MRA Plan of Action should be updated every 12 weeks, although more frequent ongoing contact, evaluation of progress, assistance with any family issues, and communication with families is encouraged. Update MRA's on a case-by-case basis depending on each family's individual circumstances. The caseworker will update the MRA at different times and frequencies with different families. Examples of reasons to update an MRA include:

- The completion of an activity;
- New employment;
- Sudden changes in attendance at assigned activities;
- The family is sanctioned; **and**
- Family circumstances which prompt reassessment of appropriate activities.

Review progress in program activities at regular intervals, particularly when an individual is enrolled in an activity for an extended period of time (E.g., attendance and actual skill acquisition should be regularly evaluated for Job Search or any Work Experience activity.). If progress is not satisfactory to the participant, the supervisor, or to the caseworker, conduct reassessment to determine appropriate solutions. Use new information to modify specific tasks/expectations included in the MRA Plan of Action.

B. Critical Elements of Assessment and Planning

A skillful assessment should be based upon several critical elements or guiding principles. They are:

1. The family can be its own best resource.

While a crisis or series of crises may prompt the family to apply for Work First Family Assistance the potential for resolving those crises and preventing future crises lies with the family. Effective planning will contribute to the family's understanding of the dynamics of these crises. It should result in a clearer understanding of how the actions of each member promote or deter independence. This understanding should foster ownership in the process of becoming self-supporting.

2. All families possess strengths.

Families in crisis often find it difficult to recognize that their family system possess strengths. An assessment and planning process can help families recognize and build upon those skills and abilities, which have enabled them to negotiate daily life situations in the past.

Furthermore, assessment and planning should be founded on the belief that the family has the ability to identify and pursue solutions. Some families may require more time and assistance than others to develop the skills and confidence to accomplish this belief. The caseworker's support of their efforts to accept this responsibility must begin during the assessment and planning process. Success in meeting these expectations can enhance self-esteem and ultimately lead to increased motivation.

3. The plan for self-sufficiency belongs to the family.

The assessment and planning process must reflect the importance of the family's role in the development of the Mutual Responsibility Agreement. The caseworker must ensure that family members clearly understand their responsibilities as well as agency and community resources available in support of their self-sufficiency efforts. It is critical that the caseworker continually encourages the family to communicate and actively participate throughout the assessment/planning process.

C. Issues To Be Considered During the Assessment Process

To help families achieve self-sufficiency, the caseworker must begin to identify the family's immediate, short-term, and long-term goals and resources. Initially, assess and address any immediate crisis that may hinder a family's ability to participate in Employment Services. In addition, assess a family's current level of employability and existing resources such as reliable transportation, family support for sick childcare, and community affiliations that support family efforts. (Is there former work history? If yes, what type?)

After assessing strengths, an assessment of resources needed should occur, with an identification of available agency and community resources needed to assist with transition from Work First to employment and self-sufficiency. There is a broad array of topics that should eventually be

addressed during the assessment and planning process, i.e., functional educational level, skills, interests, and abilities. When and how these topics are approached is the case manager's responsibility. At all times, the caseworker should consider, among other things, the family's comfort in sharing information. Building rapport with families will encourage open communication and establish the partnership necessary to recommend activities that will lead to self-sufficiency.

The caseworker and the family must analyze assessment and planning information together. It is important that the assessment and planning process direct families toward attainable goals. Early success in program activities will have a significant effect on future family effort and accomplishments. Many families have been convinced, by previous negative experiences, that they are unable to become self-sustaining. Attaining immediate and short-term goals will reinforce and motivate a family's continued effort and success.

IV. Reassessment of Cases Prior to Three (3) or Twelve (12) Months of Termination

Section 105A requires that a full assessment be completed on families within specified months on the time clock. This full assessment should include an offer for a voluntary screening for disabilities. If the participant declines the voluntary screening, document the MRA and the case record to reflect such. The case manager should only offer the voluntary screening; it cannot be required unless the family has agreed on the MRA to complete the screening. If the screening has been agreed to on the MRA, then follow normal compliance requirements as outlined in Section 103 and Section 120 of the Work First policy.

The voluntary screening for mental health is the EHI. Refer to Section 104 for completion of the EHI.

V. HOME VISIT ASSESSMENTS

It is suggested that a home visit be made in the initial and ongoing assessment process, as observations made during the home visit may be helpful in identifying barriers to successful employment. Work First case managers should avoid making home visits that are punitive in nature. Rather, the case manager should use this opportunity to observe the family in their natural environment

County agencies have the option on whether home visits are made for Work First participants.

A. Joint Home Visits

There may be times when the family is involved with Child Welfare and a joint home visit may be appropriate. If such conditions exist, then inform the family that a joint visit will be made. When notifying the family, discuss the purpose of the joint visit. This may be an ideal opportunity to share that Child and Family Team (CFT) meetings will include both workers, if the family has not been made aware of this previously. Further, it is best

practice to discuss the joint development of family case plans and any concerns the family may express.

B. Work First and Child and Family Team Meetings

Work First case managers should attend the CFT meetings when it includes a family the Work First case manager is working with to achieve self-sufficiency. During this meeting, or within seven (7) days after the meeting, an updated Mutual Responsibility Agreement (MRA) should be developed with the family reflecting the decisions from the CFT meeting. Use the federally defined work activities as listed in Section 118 to ensure that activities on the MRA will help meet the work participation rate.

Refer to Section 1412 of Chapter VIII Protective Services of the Family Support and Child Welfare Manual for the full definition of CFT meetings. The excerpt below is from the CPS policy manual.

A Child and Family Team (CFT) is a group of persons identified by and with the family who are committed to the child and family and are invested in helping them change. The CFT utilizes a team decision making approach to improve the agency's decision making process; to encourage the involvement, support and "buy-in" of the family, extended family, and the community to the agency's decisions; and to develop specific, individualized, and appropriate interventions for children and families. The use of the team decision-making approach is both a philosophy and a practice. As a philosophy, it reflects the belief that families can solve their own problems most of the time if they are provided the opportunity and support. No one knows a family's strengths, needs and problems better than that family. The team decision-making approach is also a practice in that it describes the basic method by and through which DSS seeks to serve children and families.

VI. FEDERAL DISABILITY LAWS AND EMPLOYMENT REQUIREMENTS

The Personal Responsibility and Work Opportunity Reconciliation Act requires that Title II of the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act of 1973 (Section 504) apply to TANF programs. The ADA (42 USC Section 12101 *et seq.*; 28 CFR Part 35) applies to counties and other local governments administering all or part of the TANF program, and Section 504 (29 USC Section 794; 45 CFR Part 84) applies to entities which receive federal funding, either directly or indirectly, through a grant, contract, or subcontract. The two significant elements of Section 504 and Title II of the ADA are:

- Individualized treatment and;
- Effective and meaningful opportunity.

Individualized treatment means that individuals with disabilities should be treated on a case-by-case basis and not on stereotypes and generalizations. Further, individuals with disabilities must be afforded the opportunity to benefit from Work First in the same manner as those individuals who do not have disabilities. Exempting individuals with disabilities from work requirements denies these individuals access to services and may result in discrimination.

Section 504 and ADA requires that agencies:

- ensure equal access to employment programs for qualified individuals with disabilities through the provision of appropriate services;
- adopt methods of administration which do not discriminate against and ensures equal access and opportunity to qualified individuals with disabilities; and
- modify policies, practices, and procedures to provide equal access that allows qualified individuals with disabilities to participate in and benefit from employment programs unless doing so would fundamentally change the program or cause an undue hardship.

A. ADA's Definition of Disability:

A disability is defined as a physical or mental impairment that substantially limits major life activities. Major physical or mental impairments include but are not limited to: visual, speech, and hearing impairments, mental retardation, emotional illness, specific learning disabilities, cerebral palsy, epilepsy, muscular dystrophy, multiple sclerosis, orthopedic conditions, cancer, heart disease, diabetes, tuberculosis, and HIV.

B. Equal Access

To ensure that individuals with disabilities have equal access to employment programs, the Work First case manager must first assess the participant's specific abilities and limitations. Individuals with a disability should not be routinely "exempted" from the Work First Employment Services program activities. At the conclusion of the assessment, the MRA should reflect the strengths of the participant and include activities such as a Vocational Rehabilitation assessment and evaluation to ensure the participant receives necessary services through the Work First program. Referrals for Functional Assessments have also proven to be successful in identifying areas that need to be addressed.

C. Reasonable Accommodations

Qualified individuals with disabilities must be provided reasonable accommodations so they have an opportunity to participate in and benefit from services and programs that are as effective and meaningful as those available to individuals without disabilities are. A reasonable accommodation is any reasonable change in the way the Work First program administers the program or the way it requires the participant to do something. Exempting the Work First participant for "good cause" when they are unable to meet work requirements because they have a disability or are caring for a family member with a disability is not an alternative to evaluating the need for accommodations.

Any applicant or recipient that meets the ADA definition of disabled and those individuals caring for family members who are disabled should be

provided reasonable accommodations, if needed. Reasonable accommodations may include but are not limited to:

1. Part-time work activities
2. Exemption from work activities
The MRA may reflect medical appointments, vocational evaluations, etc. these appointments are necessary to establish evidentiary support for limited or no work activities; -this should be carefully monitored to ensure the participant is fully benefiting from the Work First program.
3. Job restructuring-which includes part-time or modified work schedules, modification of equipment and examinations, provision of qualified readers, interpreters, or job coaches.
4. Additional supervision in work activities
5. Assistance with application for benefits, notification process for those with learning disabilities
6. Specialized child care for a child with a disability

The Work First case manager should consider accommodations even when scheduling appointments and determine if the individual needs to be seen with little waiting periods or has medical related appointments that conflict with the scheduled appointment time.

Work First applicants or recipients are not required to ask for “reasonable accommodations” to receive an accommodation. Rather a statement such as “My knees hurt when I stand a long time” should be treated as a request for an accommodation. Possible accommodations may include scheduling appointments at a convenient time without a long wait or making a home visit.

D. American with Disabilities Act and Electing Counties:

The protections provided to individuals with disabilities under ADA, a federal civil rights law, are applicable to all counties including electing counties. Therefore, electing counties must comply with Work First policy relative to the ADA.

For more information on federal disability regulations visit the United States Department of Health and Human Services Office for Civil Rights website at www.hhs.gov/ocr.

E. Documenting the Request for Reasonable Accommodations

When an individual requests an accommodation to participate in the Work First program, the case manager must document the request in case record. The following information should be included in the documentation:

1. The Work First participant’s or family member’s disability
2. How the disability makes it difficult for the individual to participate in the work program

3. Requests for accommodations
4. Whether the request was granted or denied
5. What kind of accommodation was provided, if any

F. Grievance Procedures

An individual, who has requested an accommodation and believes that he/she has not been adequately accommodated, should notify the Work First case manager verbally or in writing. Within 7 workdays of the receipt of notification, the county should have a meeting to include the individual and/or his/her representative and appropriate staff. The county has 14 workdays from the date of the meeting to respond to the request. The county must notify the individual of the decision in writing within the 14 workdays from date of the meeting. Do not sanction the individual during the grievance period for failure to comply with the disputed activity. Rather, develop an MRA with appropriate activities in which the individual can complete. To establish if an individual can participate in full or limited work activities, use medical evidence that has been previously provided by the participant. The county may consider using the Child and Family Team meeting model during the grievance decision-making process.

If the participant believes he/she has been subjected to discrimination based on disability and prefers not to use the established grievance procedure as indicated above, he/she may file a complaint with the Office of Civil Rights (OCR). Complaints must be filed within 180 days from the date of the alleged discrimination. A complaint form is available from OCR at <http://www.hhs.gov/ocr/discrimhowtofile.html>. The complaint can be filed online at OCRcomplaint@hhs.gov, or it can be mailed or faxed to the OCR Regional Office at the address listed below.

The Work First participant can get further assistance with questions and complaints by calling OCR (toll-free) at 1-800-368-1019 (voice) or 1-800-537-7697 (TDD). He/she can also send an email to OCRMail@hhs.gov or contact the regional office for North Carolina at:

Office for Civil Rights
U.S. Department of Health & Human Services
61 Forsyth Street, SW. - Suite 3B70
Atlanta, GA 30323
(404) 562-7886; (404) 331-2867 (TDD)
(404) 562-7881 FAX

If individual does not use OCR's form, their complaint should include the following information:

1. Name, address and telephone number.
2. If filing a complaint for someone else, include that person's name, address and telephone number.
3. The name and address of the organization or person the individual believes discriminated against them.

4. How, why and when the individual believes they (or the person on whose behalf is filing the complaint) were discriminated against.
5. Any other information that would help OCR understand the individual's complaint.

The complaint must be filed within 180 days of the date when the discrimination happened. The OCR may extend the 180-day period if "good cause" can be shown.

North Carolina General Statute § 168A provides other remedies for persons with disabilities. Refer to the agency ADA coordinator to assist with any established local protocol.

G. Voluntary Disclosure

The county department of social services should inform the applicant or recipient that disclosure of a disability is voluntary. This includes screening for a disability, including learning disabilities and mental health disorders. Nonetheless, counties must inquire about an individual's health related limitations to determine the appropriate work assignments. The participant does not have to provide the information. However, discuss with the Work First participant that:

1. an impairment is suspected and disclosure is voluntary;
2. screenings and other resources are available to identify the impairment;
3. the benefits of identifying the impairment include accommodations and services for those individuals with documented disabilities;
4. If he/she chooses not to disclose a disability or cooperate with efforts to identify the disability, he/she may be required to participate with work activities without accommodations.

Counties should document in writing when an individual with a suspected disability refuses to participate with efforts to verify the disability and chooses to participate in work activities without accommodation. To document this refusal, the counties should include an acknowledgement statement on the MRA such as the following statement:

(Work First participant's name) has been informed of his/her right to be screened for a suspected disability but has chosen to participate without accommodation. (Work First participant's name) understands that he/she will be required to complete assigned activities without accommodations and may face sanctions for failure to complete the assigned activities.

Counties are not limited in their ability to assess non-health related barriers, if the assessment is not intended to identify a disability. For example, assessments may be conducted to determine a participant's education or literacy level.

H. Exceptions to Voluntary Disclosure

There are times when identification and treatment of a disability are necessary for program administration. Under these circumstances, a participant may be required to participate in efforts to evaluate a suspected disability and participate in necessary treatment. Those circumstances may include:

1. If a participant claims to be unable to work or has limited work capacity, the individual may be required to substantiate his/her claim by participating in screening and evaluations as agreed on the MRA. Failure to comply may result in a sanction of benefits in accordance with Section 120 of the Work First policy.
2. If a participant has demonstrated an inability to successfully participate in work activities or employment and the worker has reason to believe this is due to a disability or work limitation, the county may require the participant to be screened or evaluated to establish the necessary services to support the participant in achieving success in the Work First program. If the screening or evaluation determines that the participant requires treatment, the participant may be required to participate in the necessary treatment as a condition of the MRA. Failure to comply may result in a sanction of benefits in accordance with Section 120 of the Work First policy.

Individuals with confirmed disabilities must be provided with reasonable accommodations and services to support their participation in employment and work related activities. Consult with the county ADA coordinator for further guidance

I. The 24 Month Time Limit

When a work eligible adult becomes disabled or the accommodations necessary for participation cannot be provided the 24-month time clock can be stopped. Refer to Section 105A for further guidance on stopping the 24-month time clock.

VII. SERVICES and REFERRALS

Once the assessment has been complete, the Work First worker should develop an MRA that clearly lists the required activities for the participant, as well as the supportive services that will enable the family to be successful in complying with the MRA.

A. Case Management

Case Management means planning and directing the provision of, and/or directly providing, services. This includes keeping track of what has been provided and what can be provided in relation to the family's needs. Activities include determination and coordination of conditions and methods of service delivery that will best support the family's efforts toward self-sufficiency.

This means assuming the role of prime agent who assures dependable and coordinated provision of services to the client as he or she moves toward self-sufficiency. Case management activities assist families to independently conduct routine tasks such as recognizing family health needs, utilizing maternal and child health programs, and performing daily household management tasks, which contribute to self-sufficiency.

Case management includes, among other things, gathering information through various methods, such as home visits, interviewing, formal testing, and self-assessment instruments. It includes coordination with agency staff and other community resources when appropriate to prevent duplicative assessments and services. The purchase of diagnostic evaluations to assess an individual's self-sufficiency needs is an allowable use of funds. Time spent arranging for a consultative examination is considered case management.

Case Management activities may include:

- Initial assessment and periodic reassessment of families' needs and participants' job readiness;
- Examination of constructive ways to resolve work-related and family-related issues;
- Mutually-developed strategies (by the participant and worker) for self-sufficiency;
- Identification of responsibilities of both the participant and agency in facilitating the completion of plans;
- Planning and monitoring a participant's job search activity;
- Arranging and/or providing transportation;
- Arranging child/adult care;

B. Case Management Support

Staff other than the case manager provide Case Management Support when necessary, to strengthen the family and to support successful completion of Work First or other service plans. Case Management Support functions include, but are not limited to:

- Instruction in household management, consumer education, time management;
- Arrangement and provision of transportation;
- Other supportive services;
- Assisting with home visits and other functions related to case management; or
- Child care coordination and placement.

C. Child Care

Counties may use Work First Block Grant funds to purchase or provide childcare for eligible families. Work First expenditures for child care for individuals in education or training is considered cash-like assistance. It is not considered assistance for employed individuals.

D. Work-Related Expenses

Work-related expenses are related to accepting or retaining employment (i.e., equipment, tools, uniforms, car repairs, and insurance, etc.) These items may be purchased or provided, as needed, to enable the recipient to accept and maintain employment. These work-related expenses should be non-recurring. Because payment of these expenses is based upon the availability of local resources, counties are encouraged to develop a policy that ensures equitable and consistent payment of work-related expenses.

E. Transportation Services

Transportation services can be purchased (or reimbursed directly to the participant) to support active program participation and/or employment when no other transportation resource is available. When purchasing this service from a transportation service or private citizen, counties are encouraged to negotiate the lowest possible cost with the provider. These arrangements can either be a vendor or purchase contract. The rate of reimbursement paid to participants is left to county discretion. When establishing the rate of reimbursement, counties are encouraged to consider the cost of vehicle maintenance, as well as fuel costs. Counties that do not provide Participation-related Expenses (covering car repairs and insurance, etc.) should consider setting a reimbursement rate that accurately reflects the total cost of transportation. In all cases, counties should provide a justifiable and equitable rate of reimbursement.

F. Participation Expenses

Participation expenses include miscellaneous items or services needed by the family in order to participate in an activity agreed upon by the caseworker and the family, such as special shoes, uniforms or tools, registration fees, insurance coverage, etc. Work First funds can be used for this purpose for families that meet the requirements in this section.

G. Health Support

Health support includes services provided by county staff (other than *Work First* case managers*) to help families:

- Identify and recognize health-related needs similar to alcohol and drug dependency;
- Access family planning services;
- Cope with limited functioning and incapacity resulting from age, disability, or handicap;
- Provide counseling and continuity of treatment; and
- Secure admission to medical institutions, drug treatment facilities, and other health-related centers.

NOTE: Counties may use MOE funds for medical services. TANF funds cannot be used for medical services.

H. In-Home Aide

In-home aide services are provided by county staff (other than *Work First* case managers*) to provide paraprofessional services which assist families with home management tasks, personal care tasks, or supervision. In-home aide services also enable family members to remain in the home and function in that home for as long as possible. *Work First* funds can only be used to pay for services defined as "primary services." These services are further defined in the Family Services Manual in addition to the minimum competency requirements for in-home aides.

I. Personal and Family Counseling

Personal and family counseling services are provided by qualified county staff (other than *Work First* case managers*) or purchased from a qualifying agency to resolve serious emotional conflicts.

J. Individual and Family Adjustment

Individual and family adjustment services are provided by county staff (other than *Work First* case managers*) to enable the participant and/or family to recognize, understand, and cope with obstacles to reaching their goals. These obstacles include household management, consumer affairs, family life, alcoholism, drug addiction, mental retardation, emotional disturbances, and school-related problems, etc.

K. Day Care For Adults

Day care for adults provides organized day activities and services purchased from an outside agency that promote personal independence, social, physical, and emotional well-being. These services may cover the cost of food, transportation, and attendance fees. In all cases, adult day care services must be provided in a home or center that has been certified to meet State standards.

L. Counseling and Problem-Solving

Counseling and problem solving provide counseling to the family that enhances the family's problem-solving, decision-making, and conflict resolution skills to begin to eliminate barriers to self-sufficiency and build upon family strengths.

M. Advocacy

One of the primary functions of becoming self-sufficient is assisting families in learning to advocate. Families should know how to:

- Access appropriate services in a timely manner;
- Access the highest quality of service, as well as ensuring the service is fair and equal;

- Advocate for themselves to pursue self-sufficiency through employment and other goals.

* When these services are provided to a Work First recipient by a Work First Case Manager, they are regarded as Work First Case Management Services.

VIII. Vocational Rehabilitation and Social Security Administration Referrals

For those individuals with a confirmed disability or those claiming a disability a referral should be made to the local Vocational Rehabilitation (VR) office for a screening, assessment, and evaluation. Include this activity on the MRA and support it with services such as transportation, as the worker and participant determine to be necessary. Further, include that the participant must adhere to the eligibility rules and recommendations of VR to include the commitment to self-sufficiency or standard sanction rules will apply. Make the participant aware that VR is an employment focused program and is dedicated to working with those that seek to become self-sufficient.

For individuals, who have a disability, a referral to the Social Security Administration (SSA) may be appropriate. Continue to follow policy on re-assessment of the family, development of the MRA, and all other Work First policies. A referral to the SSA, VR or any other service provider does not absolve the county from working with the family to achieve self-sufficiency. The assessment tools (6901 and the Work First Family Assessment of Strength and Needs) may provide supporting evidence to assist an applicant in obtaining SSI benefits. The case manager should be assisting the Work First individual in applying for SSI, if appropriate.

IX. Interpreter Services

If an applicant or recipient requires an interpreter, the local department of social services must provide such services for the applicant or recipient. Generally, this service should be provided during the initial contact with the applicant. Refer to the county Title VI Coordinator for local protocol.

X. Substance Abuse/Domestic Violence

Substance abuse continues to be a barrier for Work First applicants and recipients to becoming self-sufficient. In cases where substance abuse is present, refer the applicant/recipient to the Qualified Professional in Substance Abuse (QPSA) as discussed in Section 104B of the Work First policy. Each county department of social services should have access to a QPSA. Contact the Local Management Entity (LME) to determine who the QPSA is for the county. Work First has legislative priority for QPSA services (refer to NCGS § 108.29 1(a)).

The Family Violence Option (FVO) remains available to Work First families experiencing violence in the home. Refer to Section 104D of the Work First policy for further guidance.

XI. Protective Services

There are times when the Work First worker must make a referral to Child Protective Services (CPS) on a Work First family. The Work First worker is a mandated reporter and must report to CPS any suspicion of child abuse and neglect. Abuse and neglect does not have to be proven prior to making the referral to CPS. Likewise, the needs of the elderly or special needs adult should be addressed and any concerns of abuse or neglect should be reported to Adult Protective Services (APS).

XII. Resources and Service Provision

Generally, supportive services are available to Work First families including child only cases, those cases under sanction, and those with limited participation due to a disability. Child only cases are considered eligible for services as long as they have an eligible child in the home and the services are to directly benefit the child. Local departments of social services should complete a thorough assessment of the family's situation and provide services based on the assessment findings.

NOTE: This policy is intended to allow county departments of social services maximum flexibility in service provision to Work First families. There is no implication that families must receive services but only that the family will be assessed for eligibility for services. County departments of social services will continue to make the determination, as to the services in which the family receives. This decision should be made with the family.

Other community and government resources are often critical to the success of these families. Examples of such resources are vocational rehabilitation, literacy assistance, and adult day care. Once the caseworker refers a family to a service provider, maintain documentation of all services provided and the need for them in the family's case record. This will assist in ensuring the services provided are appropriate.

While there is no monetary limit established for services, an effort should be made not to use Work First to duplicate existing available resources or services. Therefore, it is crucial that the case worker/case manager for Work First collaborates with all service providers such as CPS, Vocational Rehabilitation, the area Mental Health, the Domestic Violence provider and so forth. When agency resources permit, it is possible to purchase services and or resources to meet the needs of Work First participants. Section 118 of the Work First policy provides additional guidance on the provision of supportive services.