Provision of Services

Requirements for the Provision of Services by County Departments of Social Services

Division of Aging and Adult Services

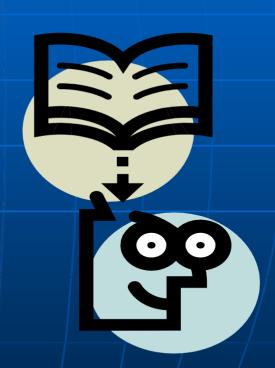
Manual

Developed in Conjunction with:

- NC Division of Social Services
- NC Division of Child Development
- NC Division of Services for the Blind

Use this Manual in Conjunction with

- Program Manuals
- SIS Manual
- Fiscal Manual



Applications

- DSS-5027 or Approved Equivalent
- All Applicants must have Application
- All Applications must be Signed by the Client or the Representative

Exceptions to Application Requirement

- Evaluation of the need for protective services for adults
- Guardianship services for adults
- Protective services for children
- Foster care services for children
- Employment program services

Who Can Sign the Application?

- The Applicant
- Applicant's Representative
- DSS Agency Staff

Opportunity to Apply

Everyone has the right to apply

Applications may be made by:

- An individual acting on his own behalf
- By someone acting responsibly for the applicant
- By DSS agency staff

Methods for Making Application

In person at the agency office, the applicant's home or another designated location

OR

Through a written request — mailed or electronic Document the request by transferring to the 5027

Application Documentation Requirements

- Identification of individual
- Clear identification of service (s)
- Date of request
- Signature of applicant (if by an X, must have someone witness)
- Signature of worker determining eligibility

Exceptions – Signature Requirement

- Guardianship
- APS Evaluation
- CPS

What is the Date of Application?

- The date the applicant signs the DSS-5027
- The date of request for Guardianship
- The date of the APS/CPS report
- The date a written request was stamped as received by DSS

Client Rights and Responsibilities

Client has the Right to Request

- A fair hearing
- The right to confidentiality

Client has the Responsibility

- To provide accurate information
- To notify the agency of any changes within 5 days

Additional Application Documentation Requirements

- When the signature of the a/r would create a barrier to receipt of service the social worker may sign the 5027 and document in the record the request and circumstances
- Health Support Services-Family Planning Component must always have the signature of the applicant and not the representative
- For APS/CPS the accepted report must be maintained in the case record in addition to the DSS 5027

Residency Requirements

- US Citizen
- Resident of NC
- Person living in NC at time of application with intent to remain
- Person who enters NC seeking employment
- A child living in NC on other than temporary basis

County Residence

- Legal residence determines which county is responsible for social services required by the person
- A person has legal residence in the county in which he resides
- A legal residence continues until a new one is acquired
- If a person is in a hospital or other institution he does not necessarily have legal residence in the county in which the facility is located

County Residence Continued

- A minor has the legal residence of the parent or other relative with whom he resides
- If a minor does not reside with a parent or relative and is not in a foster home, hospital, mental institution, nursing home, boarding home, educational institution, confinement facility, or similar institution or facility, he has the legal residence of the person with whom he resides

County Residence Continued

 Any other minor has the legal residence of the mother, or if her residence is not known, the legal residence of his father. If his mother's or father's residence is not known, the minor is a legal resident of the county in which he is found

If Two or More Counties Disagree about the Legal Residence

- In situations involving a minor either county DSS may refer the issue to the NC Division of Social Services
- In situations of disagreement on residency of adults the county DSS may contact the Adult Program Representative

Eligibility Determination

Conditions of Eligibility

- Must meet basic eligibility criteria applicable to the program and/or funding source
- Must meet the conditions of need specified in the target population
- Must provide information required to make an eligibility decision

Basis for Establishing Eligibility

- Signed, dated application (unless exempt)
- Agency's determination that the individual meets conditions of eligibility
- Availability of the service in the county
- Availability of the service in the individual's category

Basis for Denial and Termination of Services

- The client failed to cooperate in determining or redetermining eligibility
- The client cannot be located
- The client does not meet/no longer meets eligibility under the funding source or the target population criteria
- The service is not available in the county
- The agency has exhausted funds for the service

- The client notified the agency he/she no longer needs the service
- The client moved to another county
- The client is in an institution in which funding source prohibits provision of the services
- The client failed to utilize the service or cooperate in service delivery
- The client failed to meet any other condition in policies governing the delivery of services

Documentation of Eligibility

Document information pertinent to meeting condition of eligibility in the individual's service record

- Assessment
- Case narrative
- Comments section of 5027

Document the eligibility decision, date of decision and service worker making decision on 5027

- Section B8
- Section C
- Section F

Documentation of Eligibility Continued

- For services provided without regard to income (except for child care services) only the beginning date of service is needed
 - Beginning date is the eligibility date
 - Section C Notice of Action Taken
- For services provided with regard to income the beginning and ending date must be documented

Eligibility Redetermination

- At least every 12 months for child care services, transportation and health support
- Eligibility for services provided without regard to income is based on need and shall continue until no longer appropriate
- Redetermination is required when new information is obtained that affects eligibility
- Service specific information is redocumented as required by policy in the appropriate manual

Notices of Action

Written notification to client or representative is required when agency takes any action affecting the client's receipt of services, with some exceptions





No Notice Required

- When APS/CPS evaluations are initiated or terminated
- When DSS applies for services for an individual for whom they have custody or guardianship
- When DSS applies for services on behalf of an individual who is incompetent or incapacitated
- DSS is terminating services based on factual information confirming the death of the client
- The service is terminated at the end of an established period of eligibility and the individual has not requested that the service be continued

Notice Requirements

All notices must at a minimum contain a clear statement of:

- The specific service requested/provided and the individual for whom provided
- The action which was or is to be taken
- The reasons for which the action was or is to be taken
- The policy supporting this decision
- The right to both local and state hearings and the method to obtain these hearings
- The right to be represented at these hearings by a personal representative or attorney (obtained at client expense)
- The right upon timely request to continue services pending an appeal hearing and decision in cases involving termination or modification of assistance

Notification Time Frames

- Notice of initial eligibility decision must be delivered to the client or mailed <u>and</u> postmarked no later than 15 calendar days after the decision or within 30 calendar days of the date of application whichever comes first
- For additional services requested while client is receiving services the notice must be given or sent no later than 15 calendar days after the date of the request
- Notice of termination or modification of service is required 10 work days prior to the proposed action

Exceptions to 10 Day Notice

- Action is beneficial to the client
- Client requests the termination of the service
- Client is admitted to an institution and (not able to accept) services
- The client has moved to another county or state

Prompt Provision of Services

- Initial service requests must be provided within 15 calendar days of the date the notice of eligibility is given to the client
- Additional Service requests during ongoing period of eligibility must be provided with 30 calendar days of the date the request is received by the agency

When Services Cannot Be Provided Promptly

When a requested service cannot be provided promptly the application must be denied UNLESS, for SSBG funded services, the DSS has adopted a local waiting list policy that provides otherwise

Waiting List Policy

- Must be in writing and must be approved by the county DSS board
- Waiting list policy must designate whether the waiting list is used for purposes of meeting prompt provision requirements or to respond to inquiries about services or both
- Must assure that all individuals are treated equitably in terms of the manner in which they are advised of the upcoming availability of services
- Must designate a reasonable time period not to exceed 90 days that an individuals name can remain on the waiting list prior to service provision or notification that service cannot be provided

Inquiry Lists-Best Practice

An Inquiry List can be used instead of a waiting list

- A list of individuals with interest in a DSS provided service
- Prospective clients need to know when a service will not be available to them due to limited funding or discontinuance of the service
- Agency may provide alternative referrals aimed at particular problems
- Inquiry list people still need contact every 90 days for updates and to determine continued interest
- Inquiry list also needs to be in writing and have DSS board approval

Quarterly Reviews

- Must review and document the client's situation and service plan at least quarterly from the date of application
- Must be done during the month it is due based on the month of application
- Must be clearly labeled and dated in the record

Services that Do Not Require Quarterly Review

- Transportation
- Child Care
- Foster Care
- Adoptions
- Housing and Home Improvement

Appeals and Fair Hearings

Requirement to provide Information to the client:

Each applicant or recipient shall be notified in writing of his/her right to appeal the denial of the application for services and the right to a fair hearing, unless exempt from notice

The DSS-5027 contains information that advises the applicant/recipient of his/her right to a fair hearing, procedures on how to obtain one, and documents that the information was provided

Time Frames and Documentation

- Request must be made within sixty (60) calendar days from the effective date of the action (Date notice is sent or given to the client)
- Notice of appeal may be given verbally or in writing
- Request must be documented in the record and referenced

Time Frames and Documentation - Continued

• Failure to notify the agency before the end of the 60th day constitutes a waiver of the right to a hearing, except for good cause shown

 The waiver shall not affect the right to reapply for the service(s)

Right to Continued Services

Recipient has the right to continue to receive service(s) at the present level pending local decision, providing:

- Termination or modification is for other than the lack of public funds to pay for the service
- Appeal made prior to the effective date of termination or modification
- Notification that she/he may be required to pay the cost of the service if appeal is lost
- May waive the right to continue to received the services(s) prior to the hearing and must be documented

Access to Records

- The applicant/recipient shall have adequate opportunity prior to and during the hearing to review all documents and records that will be used during the hearing
- The applicant/recipient shall also have access to all information in his/her record
- Rules pertaining to confidentiality and access to client records are found in NCAC 69

Record Keeping Requirements

A Service Record must be

- Opened and maintained on each applicant for services
- Opened and maintained on recipients of protective services
- Updated and documented as necessary to reflect changes in a client's circumstances.
- All information must be kept current

Record Keeping Requirements

All changes must be documented in the service record. These include, but are not limited to

- Addition of a service
- Termination of a service
- Re-determination of eligibility
- Changes in the client's circumstances
- Any action taken by the agency that affects the client's receipt of a service

Eligibility Documentation

The Division of Social Services, the Division of Child Development, the Division of Services for the Blind and The Division of Aging and Adult Services make available standard forms that are designed to address the cumulative documentation requirements applicable to all of the service programs and funding sources outlined in the Provision of Services Manual

Narrative Recording

- Includes any report, social work assessment or study that is prepared by the service worker or received by the service worker
- Should only include that information which contributes to a valid basis for reliable conclusions about the client and his/her situation
- Should be objective, without prejudice and pertinent to the delivery of services and achievement of goals
- May be in the form of a summary or general case dictation

Narrative Recording

Narrative recording serves the following purposes:

- Documentation of the client's need/lack of need for the service
- Completion of the quarterly reviews
- Provision of quality service to the client and to identify unmet needs
- Meeting the needs of supervision and administrative planning
- Achieving more effective practice

Retention of Records

- Government Records Branch of NC provides guidance on retention of records
- Web site: [http://www.ah.dcr.state.nc.us/records/default.htm]
- Office of Controller notifies when records are released from all audits

Social Services Block Grant

The NC Department of Health and Human Services is the designated agency in NC to administer through its divisions or their local counterparts the Social Services Block Grant (SSBG)

Every two years NC is required to develop a plan for the administration of the SSBG.

The current plan can be found at: http://www.dhhs.state.nc.us/dss/publication/index.htm

Mandated SSBG Services

- Adjustment Services for the Blind
- Adult Placement Services
- Family Planning Services
- Foster Care for Children
- In Home Aide
- Protective Services for Adults
- Adoption
- Child Care
- Foster Care for Adults
- Health Support Services
- Individual and Family Adjustment
- In Home Aide for the Blind
- Protective Services for Children

SSBG Services Provided With Regard to Income

- Child Care Services
- Transportation (exception for services provided through CIA contract)
- The Federally Funded Sterilization Resource Item of Health Support Services

Income Maintenance Status

- Current recipient of Work First Family Assistance
- Work First Services for Low Income Families as defined in G.S. 108A-24
- A person whose needs were taken into account in determining the needs of Work First recipients
- A child for whom foster care maintenance or adoption assistance payments are made
- SSI recipient
- SA recipient

Income Eligible Status

- Individuals may be determined eligible on the basis of that individual's income unit's monthly gross income
 - Determine Income unit
 - Determine amount of gross monthly income
- See NCAC 71R.0503

Questions/Comments