

# ARKANSAS REGISTER

## Transmittal Sheet



Sharon Priest  
Secretary of State  
State Capitol Rm. 01  
Little Rock, Arkansas 72201-1094

For Office Use Only: Effective Date \_\_\_\_\_ Code Number 016.20.01--010

Name of Agency Arkansas Department of Human Services  
Department Division of County Operations  
Contact Person Sandra Miller, Assistant Director, DCO, OPPD Phone 682-8251  
Statutory Authority for Promulgating Rules Arkansas Code 20-76-401 as amended by  
Arkansas Act 1264

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<u>8/18/01</u>	Adopted by State Agency	<u>8/14/01</u>

### CERTIFICATION OF AUTHORIZED OFFICER

I Hereby Certify That The Attached Rules Were Adopted  
In Compliance with Act 434 of 1967 As Amended.

*[Signature]*

Signature

Director

Title

6/26/01

Date

FILED  
AR. REGISTER DIV.  
01 AUG - 8 PM 3:46  
SHARON PRIEST  
SECRETARY OF STATE  
STATE OF ARKANSAS

**3350**      ***Minor Parent Non-Compliance***

Failure to comply occurs when a minor parent who is subject to the minor parent work activity requirement fails to satisfactorily participate without good cause in education or vocational education training.

A minor parent who is subject to the minor parent work activity requirement is a minor parent who has at least one child who is also included in the TEA cash assistance case.

**Note:** Refer to TEA 3510-3511 for good cause procedures.

**3351**      ***Minor Parent Progressive Sanction***

If good cause is not established and the minor parent does not state a willingness to cooperate, the non-compliance progressive sanction levels are:

- **Level I** - first three months of non-compliance - TEA payment reduced by 25% of the amount for which the family is eligible.
- **Level II** - subsequent months of non-compliance - TEA payment will be reduced by 50% of the amount for which the family is otherwise eligible.

**NOTE:** The case will not be closed due to the non-compliance of a minor parent.

The Case Manager will maintain contact with the minor parent during the months that he or she is under a work requirement non-compliance sanction. The purpose of the contacts will be to counsel and encourage the minor parent to come into compliance. The Case Manager will discuss any problems or issues that may be preventing participation in education or vocational education training activities and attempt to find solutions.

The case record will be clearly documented to reflect the contacts that are made or attempted.

The sanction will be lifted and the TEA payment increased to the amount for which the family is eligible at any time following two weeks of full compliance.

FILED  
AR. REGISTER DIV.  
01 AUG - 8 PM 3:06  
SHARON PEDEST  
SECRETARY OF STATE  
STATE OF ARKANSAS  
BY \_\_\_\_\_

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## **3500      Employment Services - Non-Compliance**

The purpose of the non-compliance process is to encourage the applicant or recipient to comply with the work activity requirement so that the months the family receives TEA assistance are productive in assisting the adult in successfully reaching the goal of full time employment while safeguarding the health and well being of the children.

### **3501      *Defining Failure to Comply***

Failure to comply occurs when a person who is required to participate in the program:

- fails to participate in a work activity;
- refuses to accept employment;
- terminates employment without good cause; or
- otherwise fails to comply with his or her Employment Plan.

### **3510      *Good Cause***

The non-compliance process will be stopped if the person demonstrates that he or she had good cause for not complying. The determination of good cause is a county office decision.

Good cause for failure to comply will be found to exist if:

1. The individual is the parent or other relative personally providing care for a child under age six (6) years and child care is not available.
2. Child care (or day care for any incapacitated individual living in the same home as a dependent child) is necessary for an individual to participate or continue participation in the program or to accept employment and such care is not available.
3. Transportation is unavailable.
4. The working conditions would be a risk to the person's health or safety.
5. The worksite is only available because of a labor dispute.

6. The individual was subject to discriminatory practices based on age, sex, race, religion, disability, political affiliation, veteran status, color or national origin.
7. The offer of employment is not a specific job at a stated wage which meets the Federal minimum wage.
8. The failure to participate was due to events beyond the customer's control, which include, but are not limited to: inclement weather, family emergency, natural disaster, a short term illness which temporarily prevents employment, or mail loss.

**3511        *Determining Good Cause***

Once failure to comply with TEA work requirements has been established, the following procedures will be followed:

1. Contact the client to give him or her an opportunity to explain why he or she failed to comply and make a determination of good cause, if appropriate. This contact should be in writing (DCO-1, letter, etc.). If the contact is made by phone or face-to-face, the case record must be documented accordingly. The worker should provide the client, at a minimum, the following information:
  - a. The specific act of non-compliance;
  - b. A reasonable time (e.g., 10 days if contacting the client by mail) to establish good cause prior to applying the sanction.
  - c. That if the sanction is imposed, it will result in the cash assistance payment being reduced or terminated; and
  - d. That the sanction months in which benefits are received will continue to count toward the individual's 24-month time limit.
2. If the client contacts the county office and good cause is determined to exist, then all non-compliance procedures will stop and the participant will be rescheduled for an appropriate activity.

**NOTE:** Any time a client meets a deferral reason, the non-compliance process will be stopped.
3. If good cause does not exist but the client states a willingness to cooperate, the non-compliance procedures will be delayed. The client will be required to engage in an appropriate activity for a period of 2 (two) weeks before terminating the non-compliance procedures. If the client

does not satisfactorily complete the two weeks of participation then the sanction will be imposed.

**NOTE:** If the worker becomes aware that the client had good cause for failing to complete the two weeks of participation, consideration of that will be given. However, it is not necessary to formally provide the person with an opportunity to show he or she had good cause in this situation.

4. In the event good cause is not established and the participant does not state a willingness to cooperate, the cash assistance payment will be reduced or terminated in accordance with the Progressive Sanction (refer to TEA 3520).
5. An adequate notice, Form DCO-1421, Notice of Work Activity Non-Compliance will be sent to the client advising that a sanction is being imposed.

#### **3520            *Non-Compliance Progressive Sanction***

An act of non-compliance opens the progressive sanction. The progressive sanction levels are:

- **Level I** - first three months of non-compliance, TEA payment reduced by 25% of the amount for which the family is eligible.
- **Level II** - fourth, fifth and sixth months of non-compliance, TEA payment reduced by 50% of the amount for which the family is eligible.
- **Level III** - seventh and subsequent months, closure of TEA case or continuation of the 50% reduction sanction at the county's discretion.

**NOTE:** The months of non-compliance do not have to be consecutive.

A home visit will be completed during the first month of non-compliance. The purpose of the visit is to counsel and encourage the adult to come into compliance and to assess the safety and well being of the children. Every attempt will be made to complete this visit in the first 30 days of the sanction. Contacts with the sanctioned individual will be made each month he or she is in non-compliance. A home visit will again be completed in the sixth month of non-compliance. The purpose of this visit is to collect information on the safety and well being of the children, to encourage the adult to come into

compliance and to ensure the client is aware that the next level of the sanction is possible case closure.

Forms DCO-1420, Sanction Documentation Checklist and DCO-1422, Child Health and Safety Screening Checklist, will be completed during the home visit.

Upon compliance for two consecutive weeks any time during the progressive sanction, the sanction will be lifted and the payment will be increased to the amount for which the family is eligible. However, any subsequent acts of non-compliance will result in the appropriate sanction level (e.g. 25% or 50%) in the progressive sanction being imposed.

Upon compliance for two consecutive weeks during the first month of the progressive sanction, the sanction will be lifted and a supplement will be made to the TEA payment for that month. The first month of the progressive sanction is the only month in which this supplement can be issued.

**NOTE:** If the non-complying member is a minor parent refer to TEA 3350-3351.

**Example 1:** In August, Ms. Brown failed to participate in her assigned work activity. The Case Manager sent Ms. Brown a good cause notice. Ms. Brown did not respond. At the end of the notice period, a sanction was imposed and her TEA payment for September was reduced by 25%. This opened the progressive sanction. In the first 30 days of the sanction, the Case Manager made a home visit to discuss the sanction process, to assess the safety and well being of the children and to try to get Ms. Brown to come into compliance. Ms. Brown refused. Ms. Brown continued to refuse to comply during October and November. The system reduced her December TEA payment to 50% of the full amount. Ms. Brown continued to be in non-compliance in December, January and February. During February, month six of non-compliance, a home visit and a case staffing were completed. The decision was made by the county to close the case at the end of the sixth month of non-compliance. An advance notice, form DCO-1421, Notice of Work Activity Non-Compliance Sanction, was sent to Ms. Brown advising that her TEA case will be closed.

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**Example 1 - Progressive Sanction**

Month	Complied?	Sanction (Level)	Month of Non- Compliance
September	No	25% (I)	1
October	No	25% (I)	2
November	No	25% (I)	3
December	No	50% (II)	4
January	No	50% (II)	5
February	No	50% (II)	6
March	No	Closure (III)	7

**Example 2:** In October, Ms. Roberts failed to participate in her assigned work activity. The TEA Case Manager sent Ms. Roberts a good cause notice. At the end of the notice period, Ms. Roberts had not responded. Her November TEA payment was reduced by 25%. On November 3, Ms. Roberts contacted the Case Manager and stated she was willing to participate. Ms. Roberts complied for two weeks before the end of November, and her reduced November payment was supplemented to the full amount and the sanction lifted. Ms. Roberts complied with her work requirement until January, when she failed to comply again. February is the second month of non-compliance.

**Example 2 Progressive Sanction**

Month	Complied ?	Sanction (Level)	Month of Non-Compliance
November	No	25% (I)	
November	Yes	Lifted	1
December	Yes	None	
January	Yes	None	
February	No	25% (I)	2

**Example 3:** Mr. Thomas was in the fourth month of a progressive sanction when his TEA case closed because he moved to another state. His case remained closed for three months. He returned to the state and re-applied for TEA. Because he was under a sanction at the time of closure of his case, he was required to comply for two weeks prior to approval of his application. He refused to comply. His application was approved at the 50% reduction level, as he had previously been in non-compliance for four months.

**Example 3 Progressive Sanction**

Month	Complied?	Sanction (Level)	Month of Non-Compliance
January	No	25% (I)	1
February	No	25% (I)	2
March	No	25% (I)	3
April	No	50% (II)	4
May	Case closed		
June	Case closed		
July	Case closed		
August	No - case Re-opened	50% (II)	5

**Note:** If the cash assistance payment has already been reduced for other non-compliance reasons by 25% (e.g. child support), the payment will not be reduced again in Level I of the sanction due to a work activity non-compliance. In the fourth month of non-compliance, the TEA payment will be reduced to 50%.

**3521 Applying the Sanction**

Prior to imposing the progressive sanction in the initial month of non-compliance, a notice of good cause will be sent to the client. If good cause is determined not to exist and the individual does not state a willingness to participate, the progressive sanction will be imposed.

The progressive sanction will be imposed as follows:

**Level I - first three months of non-compliance - 25% Reduction**

If it is determined that good cause does not exist and the client does not state a willingness to participate, the Case Manager will send an adequate notice, DCO-1421, Notice of Work Activity Non-Compliance, advising the client that the TEA payment has been reduced by 25%.

- If the client appeals the reduction within ten days from the date of the notice, the payment will be restored to the amount it was prior to the sanction pending the Administrative Hearing decision.



- If a sanction for other non-compliance reasons has been imposed, a notice via DCO-1421 will be sent to the client advising of the non-compliance with the work activity requirement. The client will be advised that because the cash assistance payment has already been reduced by 25% for other non-compliance reasons, the payment will not be further reduced at this time. The client will also be advised that if the sanction for other non-compliance reasons is lifted, the payment will remain at the reduced amount and continue the progressive sanction until he or she has complied with the work activity requirements.
- A home visit will be made during the first 30 days of the initial month of the progressive sanction to assess the safety and well being of the children and try to get the client to come into compliance. Forms DCO-1420, Sanction Documentation Checklist and DCO-1422, Child Health and Safety Screening Checklist will be completed during the visit. (Refer to TEA 3522)
- The Case Manager will contact the client each month he or she is in non-compliance.

**Level II - fourth, fifth and sixth months of non-compliance - 50% Reduction**

- If the client has been in non-compliance for three months, the TEA payment will be reduced to 50% of the amount for which the family is eligible effective the fourth month of non-compliance.
- The system will reduce the payment and a system generated notice will be sent to the client.
- The Case Manager will continue to maintain monthly contacts each month the individual is in non-compliance.

**Level III - Closing the Case** (If deemed appropriate)

The Case Manager will complete a home visit in the sixth month of non-compliance. The purpose of this home visit is to try to bring the client into compliance and to collect information on the health and safety of the children and other information for the case staffing. (Refer to TEA 3522). Forms DCO-1422, Child Health and Safety Screening Checklist and DCO-1420, Sanction Documentation Checklist, will be completed during the home visit. A case staffing will be completed to determine whether to close the case or allow the case to remain open at the 50% level. The County Administrator will make the decision whether to close the case or allow the case to remain open at the 50% level.

**Note:** Form DCO-1422, Child Health and Safety Screening Checklist, is used as

a basic screening tool to help the county determine how well the health and safety needs of the children are being met while the adult is under the sanction. In addition, the observations of the Case Manager documented on form DCO-1422 will be used to determine if any referrals should be made, e.g. referral to DCFS for an assessment. This information, as well as information documented on form DCO-1420 and any other information gathered during the case staffing will be used in determining whether to close the case or allow it to remain open at the 50% reduction level. The County Administrator will approve the decision by signing form DCO-1420.

The client will be sent an advance notice of closure via form DCO-1421 if the decision has been made to close the case.

If the client appeals any of the sanction actions within 10 days of the date of the action, the TEA payment will be restored to the amount it was prior to that appeal pending the Administrative Hearing decision. If good cause is determined to exist at any time, the sanction will be lifted.

**NOTE:** If the non-complying individual is the minor parent of one or some of the children included in the case, the case will not be closed. Refer to TEA 3350-3351.

### **3522      *Home Visits and Contacts During the Progressive Sanction***

The primary purpose of the home visit is to discuss with the client the importance of coming into compliance, encourage compliance, identify any previously unknown barriers and to complete a basic screening on the safety and well being of the children.

- **First 30 days** - The TEA Case Manager will complete a home visit during the first 30 days of the sanction.

**Note:** A case will not be closed solely because a home visit could not be completed.

Contact will be made with the client in each month of non-compliance. This contact should preferably be a face-to-face contact in the office but may be made by phone or by another visit to the family's home. If an appointment is scheduled for the contact (either at the county office or at the client's home), no adverse action will be taken on the case if the client fails to keep the appointment.

If a deferral reason is established at any time during the sanction, the Case Manager will lift the sanction.

- **Sixth month of non-compliance** - A home visit will be completed during the sixth month of non-compliance. The purpose of this visit is to collect information on the safety and well being of the children, to discuss with the client the importance of coming into compliance, and that the next level of the sanction is possible case closure. A case will not be closed until a home visit has been completed or every attempt has been made to complete the visit.

A case staffing will be completed during the sixth month of non-compliance. The case staffing will be completed whether or not the county was successful in completing a home visit.

Since the time-limit clock continues to run during the non-compliance months, it is of the utmost importance for the worker to attempt to contact and counsel the sanctioned adult during this time. The purpose of the contact and counseling is to encourage and ultimately get the sanctioned adult into compliance and moving toward self-sufficiency before his or her sanction progresses further and the case is closed due to the sanction or reaching the time limit.

During the home visits and contacts the following items should be discussed with the sanctioned adult and documented on the DCO-1420, Sanction Documentation Checklist:

- Emphasize that the time-limit clock continues to run even though the grant has been reduced, and inform the adult of the number of months remaining in the time limit.
- Assess how well are the children's basic needs being met on the reduced payment.
- Discuss any known problems or issues that are preventing the client from complying and attempt to find solutions to those to encourage the adult to attempt compliance again (e.g., on-going transportation or child care arrangement problems, learning disability, etc.).
- Discuss any problems or issues that may not have been apparent previously, which may be preventing the adult from complying (e.g., a domestic violence situation, substance abuse, etc.)
- Discuss what actions the adult is taking on his or her own to ready the family for self-sufficiency when cash assistance is no longer available.
- Offer the adult the opportunity to come into compliance to have the sanction lifted.

Form DCO-1422, Child Health and Safety Screening Checklist will also be completed documenting information regarding the health and safety of the children. The case record will be clearly documented to reflect that the monthly contacts were made or attempted. If, at any time, the client states his or her willingness to comply, the worker will engage the client in an appropriate activity. The sanction will be lifted following two weeks of full compliance in that activity.

### **3523      *Lifting the Sanction***

Following the imposition of a work activity sanction, the sanction will be lifted when:

- the client complies for a period of two consecutive (2) weeks; or
- the individual meets a deferral reason.

Any time the client states a willingness to comply, the worker will engage the client in an appropriate activity. The sanction will be lifted following two consecutive weeks of full compliance in that activity.

**Note:** "Imposition of the sanction" means the TEA payment was reduced by 25%, 50% or the case was closed.

### **3524      *Reapplication After Closure***

#### Cases closed due to reaching six months of non-compliance

- If a client whose case has been closed due to non-compliance reapplies for TEA, the application will be held pending until he or she has complied for two weeks. Supportive services will be provided to these individuals so that the work activity requirement can be met prior to approval of the application.
- If the applicant does not participate for two weeks, the TEA application will be denied.
- If the applicant participates for two weeks, the application will be approved for payment at the full amount.
- A subsequent act of non-compliance by the client will result in case closure or the reduction of the TEA payment to the 50% level at the discretion of the county based on the home visit and case staffing.

Cases closed due to other reason while under non-compliance

- If a sanctioned client reapplies for TEA and the individual's case was closed while in sanction status, the applicant will be required to comply for two weeks prior to approval of the application.
- If the applicant complies for two weeks, the application will be approved at the full payment amount.
- If the applicant refuses to comply, the application will be approved at the reduced payment level the individual was at when the case closed.

**Example 1:** Mrs. Sanford's TEA case closed due to non-compliance with the work requirement in December. In February, Mrs. Sanford re-applied for TEA. Because her case was closed after six months of non-compliance, her application was held pending until she complied for two weeks. Mrs. Sanford complied and her application was approved. In April, Mrs. Sanford failed to comply without good cause. Following a home visit and staffing, her case was closed due to non-compliance.

**Example 2:** Mr. Cage had been under a work requirement non-compliance sanction for four months when his only child left the home. Three months later, his child returned and he reapplied for TEA. If he is otherwise eligible, he will be given the opportunity to comply for two weeks prior to the approval of his application. If he fails to comply, his application will be approved with a 50% reduction in payment. However, because he has already received assistance four months while in non-compliance, he may only receive two more months at the 50% level. A decision to close the case or leave it open at the 50% level will be made in the sixth month.

Arkansas Department of Human Services  
Division of County Operations  
Sanction Documentation Checklist

Client's Name \_\_\_\_\_ Case Number \_\_\_\_\_  
Date of contacts (Mo. 1) \_\_\_\_\_ (Mo. 2) \_\_\_\_\_ (Mo. 3) \_\_\_\_\_  
(Mo. 4) \_\_\_\_\_ (Mo. 5) \_\_\_\_\_ (Mo. 6) \_\_\_\_\_  
Type of contact: ☐ Home visit ☐ Office visit ☐ Phone

**Section I:**

Discussed With Client:

☐ Number of months remaining in time limit # \_\_\_\_\_

☐ 50% further reduction of benefits for continued non-compliance

☐ How family is meeting the children's basic needs on the current reduced TEA payment

☐ Barriers that are preventing compliance

Possible solutions suggested

☐ New or previously unidentified barriers to compliance (e.g. domestic violence, substance abuse)

☐ Self initiated self-sufficiency actions taken by client

☐ Case closure after 6<sup>th</sup> month of sanction

☐ Offer of opportunity to comply accepted Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, EP update completed Yes \_\_\_\_\_ No \_\_\_\_\_

## **INSTRUCTIONS**

### **DCO-1420, Sanction Documentation Checklist**

#### **Purpose**

The Sanction Documentation Checklist is used to document information discussed with the sanctioned individual during the home visits and monthly contacts. Section II is used to document the decision that is made on the case action that is being taken during the sixth month of non-compliance.

#### **Completion**

Completion of Section I of the checklist is self-explanatory.

The Case Manager will complete Section II after the sixth month case staffing has been done. The Case Manager, ES/TEA Supervisor and the County Administrator will sign the form after the staffing has been completed and action determined.

#### **Routing and Retention**

Form DCO-1420 will be retained in the TEA case record, and will remain until the case record is destroyed.

**Arkansas Department of Human Services  
Division of County Operations**

**Notice of Work Activity Non-Compliance Sanction**

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE: \_\_\_\_\_  
FROM: \_\_\_\_\_

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**SECTION I - NOTICE OF WORK ACTIVITY NON-COMPLIANCE SANCTION**

You have been notified that \_\_\_\_\_ is not complying with the TEA work activity requirement. You were asked to contact your Case Manager if there is a good reason for not complying. You have not provided a good cause reason for non-compliance or stated a willingness to comply. Therefore, the following sanction is being taken on your TEA case:

- ☐ A 25% reduction in the TEA payment amount. Your TEA payment will be reduced to \$ \_\_\_\_\_ effective \_\_\_\_\_.
- ☐ Your TEA payment is not being reduced at this time because you are currently under a 25% reduction sanction for another reason. If that sanction is lifted your payment will remain reduced until you comply with your work activity requirement.
- ☐ Your TEA cash assistance case is being closed effective \_\_\_\_\_.

Your TEA payment can be returned to the full amount by complying with your work activity assignment. Contact me if you want to comply.

- ☐ While your case is under sanction, the months you receive TEA payments at the reduced amounts will continue to count toward your 24 month time limit.

You have \_\_\_\_\_ months remaining in your 24 month time limit.

Our policy supporting this action is **Transitional Employment Assistance (TEA) 3520 and 3350**. If you appeal this action by  your assistance may be continued at its present level until a hearing decision is issued. However, if the county office action is upheld you will be liable for repayment of monies paid to you to which you were not entitled.

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**PLEASE READ THE BACK OF THIS NOTICE FOR INFORMATION ABOUT WHAT TO DO IF YOU DISAGREE WITH THIS ACTION.**

\_\_\_\_\_  
Case Manager's Signature

\_\_\_\_\_  
Phone Number



## **SECTION II            YOUR RIGHT TO A HEARING**

If you disagree with the action we plan to take you may request and receive a Hearing.

If you request a Hearing by the date shown in the box  on the front page, your assistance may be continued at its present level pending a decision on your appeal. If assistance is continued at its present level you will be required to repay the additional benefits if the hearing decision is not in your favor. The latest date you may file an appeal is 30 days from the date of this notice.

If you wish to discuss this action with your case manager, you may contact him/her at your local county office.

## **SECTION III           HOW TO FILE FOR A HEARING**

If you are not satisfied with the decision on your case, you may request a Hearing by writing or by talking to an employee of the local Department of Human Services office or by writing the Appeals and Hearings Section, P. O. Box 1437, Little Rock, AR 72203-1437.

## **SECTION IV           YOUR RIGHT TO REPRESENTATION**

If you request a Hearing, you have the right to appear in person and to be represented by a lawyer or other person you select. If you wish to have a lawyer, you may ask your local Human Services Office to help you arrange for one. If free legal services are available where you live, you may ask your Human Services Office for their address and phone number.

Prior to the hearing, you and/or your representative have the right to review your record and other evidence that will be presented at the hearing. You have the right to present evidence in your own behalf, to bring witnesses, and to question any person who is presented as a witness against you.

## **INSTRUCTIONS**

### **DCO-1421, Notice of Work Activity Non-Compliance**

#### **Purpose**

Form DCO-1421 is used to notify a TEA recipient of a Work Activity Non-compliance sanction. The form will be sent when the individual's TEA benefit is reduced by 25% and when the case is closed due to the sanction. A system generated notice is sent when the sanction moves from the 25% level to the 50% level.

#### **Completion**

Section I - The effective date of the 25% reduction will be the first day of the first month in which the TEA payment is affected.

The effective date of closure will be the first day of the seventh month of the sanction. The date shown in the box is the date by which the recipient must file an appeal to have benefits continued pending the hearing. This date must be 10 days from the date of the notice.

The number of months remaining in the client's 24 month time limit will be completed in the blank space.

#### **Routing and Retention**

The original DCO-1421 will be sent to the recipient with a copy filed in the case record. The copy will be retained until the case record is destroyed.

Arkansas Department of Human Services  
Division of County Operations  
TEA Home Visit

Child Health and Safety Screening Checklist

Client's Name \_\_\_\_\_ Case Number \_\_\_\_\_

☐ 1<sup>st</sup> Month Home Visit      Date of Visit \_\_\_\_\_  
☐ 6<sup>th</sup> Month Home Visit      Date of Visit \_\_\_\_\_

1. Child's physical living conditions are hazardous and immediately threatening.

☐ No

☐ Yes - Please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Client appears unable to meet the child's immediate needs for food, clothing, shelter and medical or mental health care.

☐ No

☐ Yes - Please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Client has not, or will not, provide supervision necessary to protect child from potentially serious harm based on the child's age and/or developmental stage.

☐ No

☐ Yes - Please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Child appears fearful of client, other family members, or other household members.

☐ No - ☐ Child was not present

☐ Yes - Please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Client's behavior toward child(ren) is violent or out of control.

☐ No

☐ Yes - Please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Client's suspected substance abuse appears to be seriously affecting the ability to supervise, protect or care for the child(ren).

☐ No

☐ Yes - Please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Client's mental health seriously affects ability to currently supervise, protect, or care for the child

☐ No

☐ Yes - Please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Client receives and accepts assistance/support from family and/or friends.

☐ No

☐ Yes - Please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Other - Please explain

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Referrals and agency actions taken:

☐ Referred to DCFS

☐ Referred for housing assistance

☐ Referred for emergency shelter

☐ Referred to food bank

☐ Referred for clothing

☐ Referred for substance abuse/  
mental health services

Other referrals, actions and/or solutions \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Instructions

### DCO-1422, Child Health and Safety Screening Checklist

#### Purpose

Form DCO-1422 is used to document observations made by the Case Manager during the non-compliance sanction home visit regarding the health and safety of the children. The information documented on this form and information from other sources is used for the sixth month non-compliance case staffing when the county determines whether to leave the case open at the 50% reduction level or close the case.

#### Completion

The Case Manager will document his or her observations for each item listed in the screening checklist by checking yes or no. If yes is checked, the Case Manager will explain in the space provided using the following guidelines:

1. Child's physical living conditions are hazardous and immediately threatening:
  - ✓ Leaking gas from stove or heating unit
  - ✓ Dangerous substances or objects stored in unlocked lower shelves, under sink or out in the open.
  - ✓ Lack of water or utilities, and no alternative provisions made or are inappropriate.
  - ✓ Open windows/broken/missing windows.
  - ✓ Exposed electrical wires.
  - ✓ Excessive garbage or rotted or spoiled food which threatens health.
  - ✓ Serious illness or significant injury has occurred due to living conditions and these conditions still exist (e.g., lead poisoning, rat bites).
  - ✓ Human or animal waste throughout living quarters.
  - ✓ Guns and other weapons are not locked.
2. Child's immediate needs for food, clothing, shelter, medical or mental health care not being met:
  - ✓ No food provided or available to child, or child deprived of food and drink for long periods of time.
  - ✓ Child without minimally warm clothing in cold months.
  - ✓ No housing or emergency shelter, child is sleeping in street, car, etc.
  - ✓ Housing is unsafe, without heat or other utilities.
  - ✓ Child's immediate and dangerous medical condition is not being treated, or prescription for treatment is not being given.
  - ✓ Child appears malnourished.
  - ✓ Child has exceptional needs which client cannot/will not meet.
  - ✓ Child shows effects of maltreatment, such as serious emotional symptoms and lack of behavior control or serious physical symptoms.
  - ✓ Client's mental capacity precludes appropriate care of the child(ren).
3. Supervision necessary to protect child from serious harm based on child's age and /or developmental stage is not being provided:
  - ✓ Client does not attend to child to the extent that need for care goes unnoticed or unmet.  
(E.g., although client is present, child can wander outdoors alone, play with dangerous objects, play on unprotected window ledge, or be exposed to other serious hazards).
  - ✓ Client leaves child alone (time period varies with age and developmental stage).
  - ✓ Client makes inadequate and /or inappropriate baby-sitting or child care arrangements or demonstrates very poor planning for child's care.

- ✓ Client's whereabouts are unknown.
- 4. Child appears fearful of client, other family members, or other household members.
  - ✓ Child cries, cowers, cringes, trembles, or otherwise exhibits fear in the presence of certain individuals or verbalizes such fear.
  - ✓ Child exhibits severe anxiety (i.e., nightmares, insomnia) related to situations associated with a person in the home.
  - ✓ Child has reasonable fears of retribution or retaliation from caretakers, other household members or others having access to the child.
- 5. Client's behavior toward child(ren) is violent or out of control.
  - ✓ Extreme physical or verbal, angry or hostile outbursts at child.
  - ✓ Use of brutal or bizarre punishment (e.g. scalding with hot water, burning with cigarettes, force feeding, killing or torturing animals as punishment).
  - ✓ Domestic violence likely to negatively impact the child.
  - ✓ Use of guns, knives, or other instruments in a violent way.
  - ✓ Violently shakes or chokes baby or young child to stop a particular behavior.
  - ✓ Behavior that seems out of touch with reality, fanatical, or bizarre.
  - ✓ Behavior that seems to indicate serious lack of self-control (e.g., reckless, unstable, raving, explosive).
- 6. Client's suspected substance abuse appears to be seriously affecting ability to supervise, protect or care for child(ren):
  - ✓ Client has misused drugs or alcohol to the extent that control of actions is lost or significantly impaired. As a result, client is unable, or will likely, be unable to care for the child, or has harmed the child, or is likely to harm the child.
- 7. Client's mental health seriously affects ability to currently supervise, protect, or care for the child(ren).
  - ✓ Refusal to follow prescribed medicines may skew ability to care for child.
  - ✓ Client exhibits distorted perception of reality that impacts ability to care for child appropriately (e.g. keeping child from school or play due to extreme fear of germs or violence).
  - ✓ Inability to manage anger causes overreaction that leads to excessive and/or inappropriate discipline.
  - ✓ Depressed behavior that manifests feeling of hopelessness, helplessness, or leading client to being immobilized (e.g. failure to feed, clothe, and provide suitable living conditions).
- 8. Client receives and accepts assistance/support from family and friends.
  - ✓ Discuss what supports family, neighbors and friends provide for the client and children.
- 9. Other - possible examples include:
  - ✓ Serious allegations with significant discrepancies or contradictions between client and other collateral sources.
  - ✓ Criminal behavior occurring in the presence of the child, or child is forced to engage in criminal behavior.

Any referrals, actions or solutions to any of the items checked yes are documented on in the section following the checklist. If the client is referred for assistance or services, the name of the receiving agency or organization will be completed in the space provided below the checked box.

#### **Routing and Retention**

The original will be kept in the TEA case record until the case record is destroyed.

**Section 6 BENEFITS**

The TEA program provides various services and assistance to low-income families. TEA benefits may include monthly cash assistance, employment and supportive services for cash assistance recipients, and Extended Support Services for certain former cash assistance recipients. In some situations, a family may be determined eligible for a diversion payment instead of regular monthly TEA assistance. In addition, relocation assistance may be available on a limited basis.

TEA benefits may also include employment and supportive services, job retention services, and preventive services provided to low-income families through local TEA Coalitions.

The Division Director also has the flexibility to authorize the use of TANF funds to provide assistance or services to at-risk children or families through programs deemed consistent with the intent of federal and/or state law.

**6.1 Cash Assistance****6.1.1 Monthly Cash Assistance Payment Amount**

The following amounts by family size are the monthly cash assistance maximums an otherwise eligible TEA family may be paid:

Family Size	Maximum Grant
1	\$ 81
2	162
3	204
4	247
5	286
6	331
7	373
8	415
9 or more	457

**6.1.2 Cash Assistance Payment Calculation**

The above monthly amounts are not reduced by monthly countable income until a specified income trigger is achieved. When the family's monthly gross earned income plus unearned income equals the monthly equivalent of 20 hours per week of work at the September 1997 minimum wage, then the above maximum payment for the family size is reduced by 50%. Based on the September 1997 minimum wage of \$5.15 per hour, this income trigger is \$446.

**6.1.3 Family Cap**

The cash assistance amount is not increased due to the addition of a newborn to the family. Newborn is defined as a child born while the mother is receiving TEA benefits, either for other children of her own or as a minor child herself, or who is born within nine months of the month such assistance was terminated to the mother unless the mother's case has been closed continuously for at least six (6) months.

**\* 6.1.4 Penalties for Program Non-Compliance**

A family's cash assistance will be reduced when the adult caretaker or a minor parent is found to be in non-compliance with the child support cooperation requirement or other requirements of the Personal Responsibility Agreement.

A family's cash assistance payment will be reduced or possibly closed when the adult caretaker or a minor parent is found to be in non-compliance with work activity requirements.

**Non-Cooperation with the Office of Child Support Enforcement (OCSE)**

When the OCSE determines that an adult caretaker or a minor parent whose cooperation is required in order to establish paternity or to obtain child support payments has failed to cooperate in those activities and so notifies the DHS county office, the non-compliance penalty will be imposed.

The penalty may be lifted at any time upon compliance with child support enforcement requirements.



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**Non-Compliance with the Work Activity Requirements**

When it is determined that a person who is required to participate in work activities has failed to do so without good cause, a progressive sanction will be imposed.

The progressive sanction is as follows:

**Level I**

**Month 1 of Non-Compliance** – Suspension of cash assistance payment (Implemented upon completion of system changes. Until then, a 25% reduction in the full cash assistance payment will be made)

**Months two and three of Non-Compliance** – 25% reduction of the full cash assistance payment

**Level II**

**Months four through six of Non-Compliance** - 50% reduction of the full cash assistance payment

**Level III**

**Month seven and subsequent months of Non-Compliance** – possible closure of the TEA case or a continuation of the 50% reduction.

The sanction may be lifted at anytime upon compliance with the work activity requirements for a period of two (2) weeks.

**Non-Compliance with Other Requirements of the PRA**

When it is determined that a person who has signed a Personal Responsibility Agreement has failed to comply with any other activity required by the PRA (such as ensuring the children receive immunizations), the appropriate non-compliance penalty will be imposed. The penalty may be lifted at any time upon the receipt of proof that the particular requirement has been met.

**6.2 Supportive Services**

Appropriate supportive services will be available to TEA family members. Such services include, but are not limited to, case management services,

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child care assistance, medical coverage for all Medicaid eligible family members, transportation or reimbursement for transportation costs, a one-time purchase (or reimbursement) for work related expenses, referrals to appropriate agencies or organizations for counseling, treatment, etc., and other services deemed necessary by the Case Manager for successful participation by the client.

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Supportive services will be available to TEA applicants whose TEA cash assistance case previously closed due to non-compliance with a work activity requirement. Such services include, but are not limited to child care and transportation and other services as deemed necessary by the Case Manager for successful compliance prior to approval of the TEA application.

### **6.3 Relocation Assistance**

Cash assistance to help a family move from an area of limited job opportunities to a new locality within Arkansas for full-time employment may be available on a limited basis. Before relocation assistance is provided, the person must have a bona fide offer of full-time employment in the new locality.

### **6.4 Individual Development Account (IDA) Pilot Project**

In selected pilot communities, TEA recipients may establish Individual Development Accounts (IDA) for the purpose of accumulating savings, up

to certain maximums specified in the State policy and procedures manual, for education for themselves or their children, small business development, home ownership, or transportation needs. Such funds will not be considered an available asset in determining the family's TEA eligibility for as long as the family receives TEA benefits.

TEA recipients who secure employment while participating in this project will receive matching fund donations to their IDA's. Recipients who are not employed will not receive matching funds.

### **6.5 Extended Support Services**

For those families who become ineligible for continued TEA benefits due to employment, or who choose to no longer receive cash assistance due to

**DIVISION of County Operations**

PERSON COMPLETING THIS STATEMENT Sandra Miller, Assistant Director  
Office of Program Planning and Development

TELEPHONE: (501) 682-8251

FAX NO. (501) 682-1597

## FINANCIAL IMPACT STATEMENT

To comply with Act 884 of 1995, please complete the following Financial Impact Statement and file with the questionnaire and proposed rules.

**SHORT TITLE OF THIS RULE** – Arkansas' Title IV-A - Transitional Employment Assistance (TEA) State Plan; TEA Policy 3350, 3500-3524, Forms DCO-1420, Sanction Documentation Checklist, DCO-1421, Notice of Work Activity Non-Compliance Sanction and DCO-1422, Child Health & Safety Screening Checklist

- 1. Does this proposed, amended, or repealed rule or regulation have a financial impact?**
- Yes    No X**
- 2. If you believe that the development of a financial impact statement is so speculative as to be cost prohibited, please explain.**
- 3. If the purpose of this rule or regulation is to implement a federal rule or regulation, please give the incremental cost for implementing the regulation.**
- 4. What is the total estimated cost by fiscal year to any party subject to the proposed, amended, or repealed rule or regulation?**

**2001-2002 Fiscal Year**

None

### 2002-2003 Fiscal Year

None

5. What is the total estimated cost by fiscal year to the agency to implement this regulation?  
None

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## Legal Notices 1200

NOTICE  
OF  
RULEMAKING

Pursuant to Arkansas Code 20-76-401 (the Arkansas Personal Responsibility and Public Assistance Reform Act of 1997) as amended by Arkansas Act 1264 of 2001, the Director, Division of County Operations, issues proposed revisions to Arkansas' Title IV-A TANF State Plan and Transitional Employment Assistance (TEA) program policy regarding the sanction for non-compliance with the TEA work activity requirement.

Copies of the proposed change may be obtained by writing the Division of County Operations, P.O. Box 1437, Slot 1220, Little Rock, AR 72203-1437, Attention: Office of Program Planning & Development. All comments must be submitted in writing to the address indicated above no later than 30 days from the date of this notice.

If you need this material in a different format, such as large print, contact our Americans with Disabilities Act Coordinator at 682-8920 (voice) or 682-8933 (TDD).

The Arkansas Department of Human Services is in compliance with Titles VI and VII of the Civil Rights Act and operates, manages, and delivers services without regard to age, religion, disability, political affiliation, veterans status, sex, race, color or national origin.

Ruth Whitney  
Director  
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