

WORK SERVICES HANDBOOK

Department of Health and Social Services

Division of Public Assistance

Please note:

The Work Services Handbook is being updated to reflect the new Work Verification Plan and other policy changes.

Chapters of the Work Services Handbook currently under revision have been taken off of DPAweb. Each chapter will be posted to DPAweb as revisions are completed.

Please refer to the Work Verification Plan (posted on DPAweb) for activity definitions, required verification and documentation, and how to calculate the hours of countable activity.

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1.1. Overview

1.1.1. Work Services purpose

The overall purpose of Work Services is to assist Temporary Assistance clients to obtain **a job, a better job and a better life**. A "Work First" philosophy drives all the supports and services clients receive from Work Services staff--the contracted service provider, Division of Public Assistance (DPA) and Department of Labor (DOL) staff that provide case management, job coaching, structured work search, job referrals and other employment services to Temporary Assistance clients.

Work First is based on the belief that the best way to learn about work is on the job and the best way to succeed in the labor market is to join it. Entry into the labor market itself is the best test of employability. Becoming employed, even at a minimum wage job, can be a stepping-stone to a better job. The Work First model seeks to move people from welfare into unsubsidized employment as quickly as possible and constantly reinforce the message that employment is both the expectation and the goal.

1.1.2. Work Services principles

There is no one way to help clients get a job and exit Temporary Assistance, so there is considerable variation in how services are delivered to clients under the Work First model. However, the following principles are a guide to ensure the services provided by Work Services staff achieve the best possible outcome for Temporary Assistance families.

Work is always better than welfare

Work is the foundation for a better life. Welfare provides only temporary, inadequate financial support. A job is the beginning, a better job is the next step, and a better life is the ultimate goal. Even low wage work will provide a better opportunity for advancement than welfare ever can.

Time-Limited Benefits demand urgency in client services

Clients have a lifetime limit of five years of public assistance to cover any and all periods of family crises or stretches of unemployment. Every month that a client receives benefits is one they won't have the option of using when they may need it in the future. The time-limited nature of assistance demands that processes and activities designed to serve Temporary Assistance clients reflect the urgency introduced by time limits. Good Work Services case management is critical to honoring the urgency of the mission. It keeps clients from falling through the cracks by ensuring that effective plans are developed, necessary supports are provided and activities are assigned so that clients use their time to quickly achieve self-sufficiency.

A focus on client strengths and accountability creates a high expectation and high performance environment.

Overall, the focus needs to be more on what clients can do than on what they can't do. From the initial contact, clients need to understand that they are expected to become

self-sufficient and that they have a limited amount of time to do so. Clients are held strictly accountable for participating and doing all they can to progress in their plans. Failure to participate or progress without good cause will result in a reduction in or loss of their benefits.

A focus on program strengths and accountability creates a high expectation and high performance environment for you.

Clients are not the only ones challenged to make progress under a performance-based system. A continuous improvement approach is a critical part of program accountability and performance as well. While clients are held accountable for making progress in their Family Self Sufficiency Plan, DPA and work services providers are held accountable for ensuring that policies, procedures and services are client-centered, support performance expectations and promote positive outcomes for clients.

Every client can become more self-sufficient.

A high expectations environment does not mean that every single client will move into full-time work. However, it does assume that every single client will become more self-sufficient as they participate in work services activities. There will be clients with formidable barriers and some of these challenges may be beyond the scope of a Work First approach to address. A relentless focus on what the client can do, rather than an exhaustive analysis of all the things the client can't do, will help ensure that every client moves as far as possible toward self-sufficiency.

Local ownership and collaborative approaches create better results for clients.

DPA recognizes that what works well in one area or office may not be the best approach in another. The more local service providers and DPA staff work together to create the best approach for each area and each client, the better their performance outcomes. Collaboration is a tool to achieve better results for clients. While DPA is responsible for providing specific benefits for a time-limited period to eligible Alaskans, these same Alaskans are likely to remain in their communities past the five-year limit. The pressing question is whether they will remain as families needing continued assistance (with no clear source for such help) or as families who have achieved a level of self-sufficiency through work.

1.1.3. Work Services Performance Measures

Clients can measure their success when they see they've accomplished their personal goals, earn a paycheck, and close their Temporary Assistance case. The Temporary Assistance program measures progress in helping as many clients reach that goal by looking at performance outcomes. The Work Services Performance Measures are:

- Clients who obtain employment within 60 days;
- Cases with earnings;
- Employed clients who retain employment for four months;
- Employed clients with earnings progressions;
- Cases that close with earnings;
- Cases closed with earnings that do not return to Temporary Assistance within six months; and,

- Federally-mandated work participation rates.

Individual case managers enter the data used to measure performance into the Case Management System (CMS). Monthly performance targets and measurements by office/service provider can be viewed on line at [Work Services Performance Measures](#).

For information on activity data entry, see [Section 5.4, "Work Activities"](#).

1.1.4. What are Work Services?

From the time clients first enter a DPA or service provider office, they are expected, and assisted, to find employment. Job search activities begin during upfront service delivery, while the family completes the process of applying for Temporary Assistance. This is followed by a period of Initial Work Services that combine a mix of activities to build job seeking skills -- resume preparation, interviewing, etc., with intensive work search including job matching and referrals to job openings. Clients who do not find a job or earn enough to close their TA case are referred to a case manager for Extended Work Services. Based on the clients' experiences during job search, the case manager brings additional tools to assist clients to improve their employability while continuing to seek employment.

1.1.5. Work Services and the Upfront Process

All Temporary Assistance clients participate in Work Services. The intent of Work Services is for the client to get a job. During the upfront piece of Work Services clients test the labor market to compete for a job and get hired, and identify whether they need additional services in order to go to work. Upfront Work Services include basic job search assistance, and screening and assessment of the client's strengths and challenges based upon their experience as they "test" the labor market through active job search.

Clients in Work Services may use structured work searches, workshops, or other resources to improve their chances of success in finding and retaining employment as needed. Referrals to community resources and supportive services are available to clients to help them to look for work, maintain employment, and address some challenges to self-sufficiency. The upfront process is not intended to be highly intensive, because it is not possible to tell at this early stage how much extra help clients actually need to get a job.

Work Services staff help clients to identify strengths, challenges, and lessons learned as they search for a job. Initial Work Services must include:

- Engaging clients as early as possible to promote active participation in Work Services activities;
- Linking clients with job listings, referring clients to job openings, providing or referring clients to job development and other employment services;
- Monitoring job search activities and providing assistance to improve a client's job search skills when needed;
- Actively assessing a client's job search experience to develop information on a client's skills, interests, aptitudes, strengths and challenges;
- Screening for challenges to employment and self-sufficiency;
- Providing referrals and supportive services necessary to allow an active job search; and,

- Collaborating with the client to, develop, adapt and revise the Family Self-Sufficiency Plan based on what is working and not working as they progress toward employment.

Clients transition to Extended Work Services when they get a job, or if they have been unable to secure employment during the period they receive Initial Work Services. Each office has their own protocol for determining who has the primary responsibility for monitoring and tracking clients in Initial Work Services and how to transition them to Extended Work Services. If clients receive services from several different staff during Initial Work Services, good communication between case managers, work search facilitators, and other Work Services staff is vital to ensuring Work Services are coordinated and valuable information about the client is not lost during this time. A summary of the client's activities, and what Work Services staff have learned about client strengths & challenges during the upfront process, should be documented in CMS.

For more on Job Search see [Chapter 2, Job Search](#).

1.1.6. Extended Work Services

Once they have completed Initial Work Services, clients receive Extended Work Services. Case managers work with clients to use what has been learned about their strengths and challenges during Initial Work Services to update and develop a detailed Family Self-Sufficiency Plan (FSSP). Extended Work Services cover a wide range of activities and interventions targeted at helping clients reach self-sufficiency through employment. Work Services are provided as clients continue to search for work. Case managers continue to reinforce the Work First message and help clients work towards increased self-sufficiency through employment.

For clients who go to work, planning and services focus on how to keep the job, how to increase hours or obtain raises, or how to use the current job as a springboard to a better job.

Clients unable to get or hold a job need more help finding and retaining employment so, planning and services focus on continued job search while addressing challenges to employment and self-sufficiency.

Clients may be temporarily excused from participation in Work but not from work activities. The case manager and client focus on activities that prepare the client to start job search and employment as soon as they are able. Clients who are excused from employment will need to plan for self-sufficiency through either employment or pursuit of other benefits, such as Social Security Disability. For clients who don't have a medical condition that are likely to lead to receipt of other benefits, work readiness activities may include referral to and engagement in DVR activities, job skills training or education opportunities to better prepare them for employment when they are no longer exempt from work. For some clients, activity may focus on strategies that increase a family's self-sufficiency through accessing other services.

For clients who cannot use employment as an avenue to increased self-sufficiency (such as individuals with a disability which precludes employment), services focus on development of other resources and income, such as SSI or SSDI as a means to exiting Temporary Assistance.

Extended Work Services also assist client who are successful in employment with planning for exiting Temporary Assistance and accessing other resources to help them successfully transition from welfare to self-sufficiency.

For more on self-sufficiency planning see [Section 5.3, "Family Self-Sufficiency Planning"](#).

1.2. Intake

1.2.1. What is Intake?

Intake is the process applicants go through in order to receive Temporary Assistance and Work Services. The Intake process is tailored to each region and community to make the most of local resources and help applicants access services quickly.

Intake usually starts with the client coming in to a Job Center or DPA office to apply for assistance to meet their family's basic needs. Applicants who live in remote areas without access to a Job Center or DPA office may contact the local Fee Agent to apply for services or mail an application for Temporary Assistance to any DPA office.

All efforts are made to engage applicants in Work Services even before eligibility for Temporary Assistance benefits is established. Applicants who have access to a Job Center are offered Upfront Work Services targeted to offer assistance to become employed as quickly as possible.

For more on Fee Agents see the [Fee Agent Manual](#).

1.2.2. Fact Finding

When an individual comes into a Job Center seeking assistance with basic needs, they often are greeted by DPA staff who are designated as "Fact Finders." Fact Finding is the process that DPA staff use to determine if a family appears to be eligible for programs they can access through the Division of Public Assistance (DPA).

Families with a job-ready worker may also be eligible for Diversion, a one-time, lump sum payment they can choose to receive instead of on-going Temporary Assistance and Work Services.

Fact Finders gather enough information to help the individual to decide if they want to begin the application process, or access other community resources to meet their family's need.

Fact finders help the client to deal with their immediate financial crisis by:

- Determining if they appear to be eligible for Temporary Assistance, Medicaid, and Food Stamps; and,
- Making referrals to community providers for immediate aid (like emergency housing) to assist them and/or maintain the family until their Temporary Assistance benefits are authorized.

In communities without a Job Center, and in some communities where a small Job Center has few staff, the Fact Finding process may be combined with the Temporary Assistance interview.

Note

Individuals can apply for Medicaid, Food Stamps, Adult Public Assistance, Chronic Acute Medical Care (CAMA), and General Relief Assistance programs using the same form.

1.2.3. Immediate job search assistance

Temporary Assistance applicants and new clients begin to job search immediately. Clients are provided with job referrals and linked to job center or partner agency staff that can assist in finding employment. Clients in urban areas are often able to attend a structured work search the same day they come to the office to apply for Temporary Assistance. Referrals and supportive services to meet immediate job search needs, such as child care and transportation, are available as well.

Most initial job search services offered to Temporary Assistance clients are available immediately to new applicants, even before the start of Temporary Assistance benefits. For more on initial Job Search services see [Section 2.2, "Initial Work Services Job Search"](#).

As they are offered job search assistance, applicants are informed that they are required to go to work. In order to receive full Temporary Assistance benefits, they must engage in an active job search and work towards their family's economic independence full-time. For more on participation expectations see [Section 1.3, "Participation in Activities"](#).

1.2.4. The Temporary Assistance eligibility interview

In order to finalize their eligibility for Temporary Assistance, clients meet with a DPA Eligibility Technician (ET) for an eligibility interview. Detailed information about the family's household composition, expenses and financial resources are used to verify eligibility and determine the family's benefit amount. Clients are required to develop and access other financial resources to help them reduce their need for a Temporary Assistance benefit.

If any of the children in the household have a noncustodial parent, the Eligibility Technician sends information to the Division of Child Support Services (CSSD) so they can get child support collections started.

Once the interview is complete, the Eligibility Technician takes action to authorize benefits or lets the client know their family is ineligible. If the ET is not able to make a determination because they don't have enough information, they will and ask the client for more information and temporarily pend the case. The Eligibility Technician documents the information received with a Case Note that can be read in the on-line Case Management System (CMS).

1.2.5. Referral to Work Services case management

Temporary Assistance clients are referred by the Division of Public Assistance to a Work Services case manager responsible for helping the client to go to work and plan for self-sufficiency. All adult caretaker relatives who are part of a Temporary Assistance case are required to participate in family self-sufficiency planning with a case manager.

The referral process varies from office to office. Clients may:

- Meet their case manager (and set a date for a planning meeting) during their Temporary Assistance eligibility interview.
- Receive a referral to a Work Services case manager (and set a date for a planning meeting) during their Temporary Assistance eligibility interview.
- Meet their case manager and develop an FSSP (or set a date for a planning meeting) at the Job Center after they have attended a structured work search for a week or more.
- Receive a referral to a Work Services case manager in the mail once they have been determined to be eligible, and schedule a planning meeting with their case manager when they have first contact on the phone.

Case managers should consult their agency/office for detailed case management referral policy and procedure.

1.3. Participation in Activities

1.3.1. How much participation is required?

Client participation in activities leading to self-sufficiency is required as part of the Temporary Assistance program. Clients are expected to participate 40 hours per week in activities and steps that lead to achieving their employment and intermediate goals. Full-time participation mirrors the work place expectations most self-sufficient families meet daily, and ensures clients exit Temporary Assistance as quickly as possible. Both clients in two-parent families are required to participate full time. This requirement to participate full-time applies to applicants as well as recipients.

Clients are also required to participate in planning for self-sufficiency. Case managers work with clients to develop an individualized Family Self-Sufficiency Plan (FSSP) that identifies:

- The client's employment goal and when they expect to achieve it and exit Temporary Assistance;
- Intermediate goals leading to achieving their employment goal and/or increase their family's self-sufficiency;
- The steps and activities they will engage in to reach their goals;
- Supports they need to engage in the plan;
- The Work Services the client receives; and,
- Expectations for their participation.

In most cases, new clients participate full-time in Initial Job Search and other activities that can help them to become employed and self-sufficient as quickly as possible.

Employed clients work 40 hours per week whenever possible. Clients with part-time employment work towards concurrent intermediate goals by engagement in other activities designed to help them keep and advance in employment. Clients who have completed an Initial Job Search and have not found employment may participate in a combination of subsidized work, Community Work Experience and/or other activities. All clients participate full-time in an activity or combination of activities that contribute to self-sufficiency.

Every client's Plan should reflect the Work First philosophy, the urgency of the 60-month lifetime limit on benefits, and an expectation of full-time participation.

1.3.2. What activities do clients participate in?

Clients are required to participate in planning for self-sufficiency. Case managers work with clients to develop an individualized Family Self-Sufficiency Plan (FSSP) that identifies:

- The employment goal and expected date of achievement to exit Temporary Assistance;
- Intermediate goals leading to achieving the employment goal and/or increase the family's self-sufficiency;
- What steps and activities are needed to reach each intermediate goal; and,
- Supports required to engage in the plan.

The Family Self-Sufficiency Plan guides the type of Work Services the client receives and establishes an expectation of participation.

All activities defined and approved for Work Services promote self-sufficiency. Activities assigned during the family self-sufficiency planning process are linked to employment goal or intermediate goals identified as essential to helping the family prepare for work or to otherwise reach the highest possible degree of self-sufficiency. Activities encompass a wide range of options. Full-time employment, subsidized employment, paid and unpaid training at a job, work search, job readiness, training and education, application for other social service programs, counseling, substance abuse treatment, and subsistence activities all may be activities that lead a client to self-sufficiency.

Unsubsidized employment is a client's best chance at reaching and maintaining self-sufficiency. Whenever possible, clients should work full-time at a job that helps increase earnings, either through an increase in wages or by preparing for the next, better job. For those who are employed part-time or are unemployed, job search is often the best chance at getting full-time work and exiting Assistance. Subsidized employment and unpaid work experience allow clients to build job skills, to network and to prepare for unsubsidized employment.

Short-term vocational training can assist clients to transition from very low-wage or part-time employment into a job with a living wage and opportunities for advancement.

Work, Work Search and activities that support unsubsidized employment should be the primary activities clients engage in to maximize their chances at reaching self-sufficiency and exiting the Temporary Assistance program.

DPA and its Work Services providers recognize 13 fully countable work activities and work support activities for Temporary Assistance applicants and clients:

- Unsubsidized Employment
- Subsidized Employment
- On the Job Training (OJT)
- Work Search
- Business Work Experience (BWE)
- Community Work Experience (CWE)
- Vocational Education & Training
- Vocational Counseling
- Education Directly Related to Employment
- Substance abuse treatment
- Domestic Violence Counseling
- Mental health assessment and treatment
- Job Skills Training

In a month where 20 or more hours of fully countable activities have been verified, the following work support activities become countable:

- GED Preparation and Adult Basic Education
- English as a Second Language Classes
- Self-Initiated Education and Training
- High School Completion

The State of Alaska Division of Public Assistance Work Verification Plan (dated September 11, 2007) contains the rules that DPA and its Work Services providers use to define, count, verify, supervise and monitor Temporary Assistance client engagement in activities. The Work Verification Plan also discusses what individuals are classified as work-eligible, and identifies those who are not considered to be work-eligible.

Please refer to the Work Verification Plan for detailed definitions of these activities, and rules on counting, verifying, supervising and monitoring hours of client participation in these activities.

Clients with limited participation in activities are discussed below.

Note

Teen and minor parent activities and participation expectations are different than those for adult clients. Activities may include mandatory school attendance or working towards getting a GED. See [Section 5.4, "Work Activities"](#) for more on participation, work and other self-sufficiency activities for teens and minor parents.

For more detail on activities, see [Section 5.4, "Work Activities"](#).

1.3.3. How are activities identified and assigned?

Activities are identified and assigned on the Family Self-Sufficiency Plan to support the employment and intermediate goals that are the client's quickest route to exiting Temporary Assistance. The Plan is developed and modified over time by using an initial and ongoing employability assessment of the client; discussion with the client about their interests and employment goals; and information about opportunities for employment in the local labor market.

The steps the client will take to achieve their intermediate goals are the activities they will engage in. As a client engages in activities, achieves steps, and makes progress towards their employment goal, the Plan is updated.

The FSSP is also a contract between the client and DPA that, in addition to identifying specific activities, establishes the expectation for participation and the amount of time that will be devoted to each activity. The Plan should always reflect forty hours a week of Work Activities and Work Support Activities to ensure the client is moving toward exiting Temporary Assistance as quickly as possible.

The Plan should be specific and clear enough that the client, just by reading the FSSP, knows the expectations for their participation. Be sure to include:

- What steps and activities the client will engage in;
- The amount of time the client will spend on each identified activity (the hours should add up to 40 per week);
- Completion/review dates for accomplishing or evaluating activities and tasks;
- The supports Work Services will provide; and,
- Any referrals that may assist the client to complete steps and engage in identified activities on the Plan.

For more on Employability Assessment see [Section 5.2, "Employability Assessment"](#) . For more on Family Self-Sufficiency Planning, see [Section 5.3, "Family Self-Sufficiency Planning"](#) . For more on activities, see [Section 5.4, "Work Activities"](#) .

1.3.4. What happens if a client can't participate full-time?

Every month a client receives Temporary Assistance brings a family closer to the time they will no longer be eligible for Temporary Assistance. Because, in most situations, a family's life time limit clock cannot be stopped, every client must be actively pursuing self-sufficiency. However, some individuals face challenges to participating in assigned activities. While most clients are able to address challenges and continue to work towards goals, some will need the help of a case manager and community services to address challenges they may face while planning for employment.

There are some instances when clients may be excused from participation in activities. The two most common reasons for limited participation in activities are due to being medically excused or exempt to care of a newborn ("baby exempt"). Single parents with a child under 12 months of age may be excused from participating in activities in order to care for their child. However, these client's are still required to develop an FSSP and may still be required to participate in activities that will prepare them for work once their exemption is over.

Other possible reasons a client may be excused from full-time participation in work activities include being the caretaker of a disabled child or adult, family hardship, and lack of appropriate child care.

Note

See [Alaska Temporary Assistance Program Manual](#) section 730-2 for policies governing exemptions from work activities.

A temporary break from activities can be an opportunity to focus activities that will prepare a client for work. For example, pursuing a GED may help a client increase their chances for employment when they are no longer excused. Once the client is required to participate full-time in work and other activities again, training, education and other unpaid activities are expected to be pursued concurrent with work. Case managers encourage clients at home with a newborn to make the most of their time and make progress in activities there will be less unscheduled time once the client returns to work.

Clients who are medically excused from activities may engage in activities which will support employment later, as well as 'wellness' activities their doctor or health-care provider suggests that may improve health and increase capacity to participate in work and pursue self-sufficiency.

1.3.5. What happens if an unexcused client does not participate full-time?

Temporary Assistance is not an entitlement program. Clients are offered Work Services and expected to participate in work and activities that will help them to exit Temporary Assistance as quickly as possible.

Clients who fail to take part in assigned activities (as identified on their FSSP) without an excuse or good cause are penalized. This means the Temporary Assistance payment will be reduced by 40%. For clients that continue in non-compliance with participation and Family Self-Sufficiency Planning, the penalty may progress to 75% or even 100% of the benefit. See [Alaska Temporary Assistance Program Manual](#) section 723 for more on Penalties.

1.3.6. Special Note: Participation for clients in Exempt Native Villages

Clients living in Exempt Native Villages are exempt from the 60-month life-time limit on benefits but, they are NOT exempt from the requirement to participate full-time in Work, Work Readiness and Family Support activities.

When discussing participation requirements with clients in Exempt Native Villages clients should understand:

- They are required to participate full-time in activities;
- That if full-time work is not available in the community, they are expected to participate full-time in a combination of activities that may increase their employability or self-sufficiency from Temporary Assistance; and,
- That the exempt status of the community may change in the future--it's still very important to plan for a time Temporary Assistance may no longer be available.

While clients in Exempt Native Villages may not feel the urgency of the lifetime limit, Work Services staff help create an understanding of the benefits of work. Increased income, being a positive, working role model for their children, contributing to the community, and increasing employability so they are more likely to find a job as opportunities become available are all benefits of participating in assigned activities.

Clients who move from an Exempt Native Village to a nonexempt community are no longer exempt from the time limit and months used count. For those that move to an

Exempt Native Village from a nonexempt community, the clock stops although the months they have used still count toward the 60-month limit.

Note

Clients who have reached their 60-month lifetime limit and do not qualify for an extension, cannot receive Temporary Assistance, even if they move to an Exempt Native Village.

For a list of Exempt Native Villages see the [Alaska Temporary Assistance Program Manual addendum 1](#).

1.3.7. Documenting Participation

Work Services staff use the following tools to document plans, actions and outcomes of client activity:

- FSSP
- "Client Notes" screen in CMS
- Verification appropriate to the activities the client is engaged in, such as paystubs, timesheets and employer statements for unsubsidized employment. Please refer to the Work Verification Plan for the preferred verification methods for each type of countable activity, and rules on counting hours of participation.
- Work Activities type and hours of participation in the "Work Activities" screen in CMS using JAS Work Activity Codes
- Other documentation as appropriate such as: activity calendars, work schedules, correspondence.

1.4. Information for Clients

The following is a bulleted list intended to assist Work Services staff in ensuring clients are informed of important program assistance, rules and responsibilities.

1.4.1. What clients need to know about Work Services

- Work First--everyone works! And why is the client talking to you?
- Urgency of the 60-month lifetime limit--how many months does the client have left?
- Required to participate in Family Self-Sufficiency Planning and follow their Plan
- Expected to participate full-time in identified activities
- FSSP is a Contract--there are consequences for:
- Consequences of not developing an FSSP
- Consequences of not participating in activities
- Job Quit or Job Refusal without good cause
- Expected to participate full-time in activities (40 hours per week)
- Supportive services--available if needed, but not an entitlement
- PASS I --what is it, how does it work?
- We provide referrals to community providers
- Who is their Case Manager and who is their Case Worker and what they can do to help client exit Temporary Assistance

- What changes are required to be reported to the assigned case manager and DPA Eligibility Technician

1.4.2. Common areas of confusion

- What is a "Case worker" vs. "Case manager"?
- Eligibility Technician and assigned Work Services staff
- DPA and contracted service provider agency
- What do I report to whom?
- Discuss need to update FSSP and confirm participation with Work Services CM
- Reporting requirements for Temporary Assistance and Food Stamps are different-- clients participating in both programs need to know the differences and what to report
- Confidentiality
- Personal information is confidential; workers need releases of info to talk to others outside of DPA/service provider
- PASS I client responsibilities
- Parent responsibilities information and importance of communicating with Work Services CM
- Compliance and Penalties
- What activities and program requirements are clients excused from due to care for a newborn ("Baby Exempt") and medical incapacity (TA 10)

Work Services Handbook

Department of Health and Social Services

Division of Public Assistance

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4.1. Overview

4.1.1. What are supports?

Supports are financial assistance, social or other services which help families to go to work and improve their quality of life. Work Services include a variety of supports to help clients get, keep, and advance in employment. Other supports are available from DPA or other agencies that can assist with other family needs such as medical coverage, heating assistance, and affordable housing.

Temporary Assistance benefits are not supports. Temporary Assistance benefits are intended to help clients pay for their family's most basic needs for shelter, utilities and food. Supports from Work Services and other agencies target other family needs.

The Supports discussed in this chapter are available to clients as needed and appropriate on a case-by-case basis, and do not count against a family's lifetime limit of 60-months.

4.1.2. What supports are available to clients?

Each family is its own best support. In providing Work Services, case managers help clients to evaluate and identify the resources they already have. Some clients already have a well-developed network of family and friends they help and rely on. Some need assistance in recognizing the resources they already have, or help to access other community resources that are available to them.

Work Services supportive services and PASS I are described in the following sections of this chapter. Supportive services are goods and services purchased to help clients get, keep, or advance in employment. PASS I is a financial child care assistance program for families receiving Temporary Assistance.

In addition to supportive services, other supports available to low-income families include:

Medical

Families have Medicaid coverage while they are on Temporary Assistance, and Transitional Medicaid for up to a year after leaving assistance. After that, children and pregnant women may qualify for Denali Kid Care health coverage. Many employers provide individual or family health coverage to full-time employees.

Food assistance

DPA provides Food Stamps assistance based on family size, income, and expenses. The Woman and Infant Care (WIC) program is also available to eligible families. Some communities have food banks or make food baskets available through local charitable organizations.

Earned Income Tax Credit (EITC)

The IRS offers a special tax break to low-income workers. EITC can increase a family's take-home pay by as much as 40 percent. The EITC can be collected monthly through a paycheck, or claimed at the end of the year when filing taxes with the IRS. Clients can receive free tax help from Volunteer Income Tax Assistance program (VITA) administered by the American Association of Retired Persons (AARP).

Permanent Fund Dividend (PFD)

yearly dividend available to most permanent state residents who have lived in Alaska for a full calendar year. Children with an eligible sponsor also may receive a PFD.

Note

Individuals who have been out of state for an extended period of time, have been incarcerated or convicted of a felony during the calendar year may not be eligible. The Child Support Services Division (CSSD) may garnish the PFD disbursement of an individual who is in arrears paying child support.

Child support

The Child Support Services Division (CSSD) collects child support for low-income families. While on Temporary Assistance, child support collected goes to the state to repay the costs of the client's grant. Clients may receive a portion of collected child support up to \$50 "pass-through" payment a month. Once a person leaves Temporary Assistance, however, they start to receive any current child support collected.

Housing Assistance

Alaska Housing Finance Corporation (AHFC) and some Native Organizations (such as Cook Inlet Tribal Corporation) offer housing assistance to low-income families. Families may be eligible for a Section 8 Housing Choice Voucher to assist them in leasing a home, or to rent a unit in an Assisted Housing Development. Some families may also be eligible for AHFC's Family Self-Sufficiency escrow account program.

Community Resources

Many communities provide supports to low income families like clothing banks and transportation assistance. Resources available to families may include mentoring for adults or children, healthy family resources such as parenting classes and life skill building, and advocacy groups that can assist families who need help accessing specialized services.

4.1.3. When does Work Services offer supports to clients?

Work Services offers supports to clients to help them go to work, keep a job, or engage in efforts to increase their self-sufficiency when there is no other way to meet the need. Supports can make the difference between continued unemployment and the client's ability to get and keep a job. The more income the client has, and the more proficient they become at problem solving and accessing other resources, the fewer Work Services supports a client needs.

By helping clients to identify need for supports, case managers also have the opportunity to assist clients to explore and evaluate the resources they already have, and to develop plans for meeting family needs when they exit Temporary Assistance.

Discussing supportive services is a great opportunity to talk with clients about how their family will meet work related and other needs on their own when Work Services supports are no longer available to them.

It is important to help clients reassess work-related needs on a regular basis. Whenever their work or circumstances change, case managers talk to clients about how this changes their needs. There are also some critical stages clients go through as they move from welfare to self-sufficiency. Changes that prompt a reevaluation of need and supports include:

- Starting (or ending) a job;
- An increase or decrease in hours or wages;
- A change job duties at work;
- Update of the Family Self-Sufficiency Plan (change in assigned Work, Work Readiness, or Family Support activities);
- Moving;
- Getting (or losing) a vehicle;
- A change in who lives in the household; and,
- A change in family circumstances (children starting or ending school, etc.).

Supportive services are also used proactively--to support steady work or getting a better job. Help the client to find out what supports are critical to keeping or advancing in their job. Are there required tools or work clothes that they need to do the job? Is there training needed for the worker to get a promotion or a raise? For more on planning for and supporting steady work and better jobs, see [Section 3.6, "Steady work and Better jobs"](#).

Note

Because PASS I and Supportive Services are specifically intended to support the client in moving toward employment and self-sufficiency, clients who are not participating in their Plan should not receive supportive services.

4.1.4. What Supports are available to clients after they exit Temporary Assistance?

Work Services, including some supports, are available to clients who are working when they exit Temporary Assistance. The first few months without Temporary Assistance can be very difficult. Many clients work at jobs that provide just enough income to cover basic needs, but don't leave much room for emergencies or extras. Clients who received PASS I child care transition to PASS II, which requires a co-pay. As income and expenses change, clients are challenged to budget and pay for new expenses. Clients who receive assistance and services from community resources, such as Alaska Housing (AHFC), may benefit from informing the agency of changes in income and expenses to ensure they receive the maximum benefit available.

4.1.5. Documenting Supports

Work Services staff use the following tools to document plans, actions and outcomes of client activity:

- FSSP -- Services Needed to Complete the Plan
- "Client Notes" screen in CMS
- Work activities type and hours of participation in the "Work Activities" screen in CMS using JAS Work Activity Codes
- Other documentation as appropriate such as: budget worksheets, work schedules, correspondence, PASS I Request for Authorization forms, financial records of vendor transactions

4.2. Supportive Services

4.2.1. What are supportive services?

Supportive services are goods and services purchased by Work Services to help clients get, keep, and advance in a job. This includes paying for services that help the client participate in Work, Work Readiness and Family Support activities, or may help identify and address client challenges to employment or strengths to build on. Work Services provides these supports when there is no other way to meet the need.

Clients may have a wide range of unmet needs. Temporary Assistance is meant to provide for a family's basic needs. Clients needing help in meeting other needs are first referred to other public programs and community resources. Supportive services are for meeting those needs that can't be covered by personal or community resources and are needed to directly support work or participation in Plan activities. The need must be specific, identified in the FSSP, directly related to an approved activity or employment opportunity, and the only way to meet the need is through expenditure of supportive services.

While supportive services can be the key to getting and keeping a job, increasing a client's self-sufficiency, or identifying a challenge that needs to be addressed in order to go to work, supportive services are not an entitlement. Supportive services are provided on a case-by-case basis. Case managers must be able to document how the service supports the client in employment or participating in activities on their FSSP. This also means clients who are not participating in their Plan should not receive supportive services.

Supportive services are available, as needed, throughout a person's stay on Temporary Assistance and to meet temporary needs for up to six months after an employed person exits Temporary Assistance. Supportive services do not count towards a client's Temporary Assistance life-time limit of 60-months.

4.2.2. What clients need to know about supportive services

Part of developing and updating a Family Self-Sufficiency Plan is identifying the services the client will need to do activities and follow the Plan. Discussion of needs is a simple place to start explaining supportive services. Clients need to know that supportive services are authorized to meet needs that relate specifically to their ability to progress in their FSSP.

Supportive services are not an entitlement, and are determined on a case-by-case basis and when there is no other way to meet the need. It is the case manager's job to ensure that clients understand how they are to go about getting services from staff and vendors.

Inform clients that supportive services do not count towards their Temporary Assistance 60-month lifetime limit, and that they may be able to receive supportive services up to six months after getting off of Temporary Assistance if they are employed when they do so.

Getting supportive services shouldn't be difficult, but does require an evaluation of the client's need and situation.

When considering authorizing supportive services, a case managers work with the client to determine:

- Is the support service essential to move the client towards employment or independence?
- What resources can the client quickly bring to the table?
- What is readily available from the community?
- Is there a lower cost alternative available?
- Has the client encountered this situation before? How did they handle this in the past?
- How does the client plan to budget for or take over ongoing costs in the future?
- How will meeting this need help the client to find, keep or advance in a job?
- How will not meeting this need interfere with the client finding, keeping or advancing in a job?

Ultimately asking and answering these questions should guide the case manager in authorizing supportive services, and help the client to problem-solve in the future

4.2.3. When to issue Supportive Services

Because Supportive Services are not an entitlement, Work Services staff determine when to issue supportive services to clients. Payments are based on individual circumstances and individualized FSSPs, so there is no simple and clear way to identify when payments must be made or when payments must not be made, beyond the general guidelines given here.

Case managers follow their office and/or agency's procedures to determine when to authorize supportive services, along with the guidance below.

It may be appropriate to provide supportive services to clients who are working and/or engaged in other approved Work, Work Readiness and Family Support activities when:

- Meeting the identified need is essential to maintaining their work and/or participating in their Plan activities
- The unmet need is interfering with their ability to work or progress in their Plan
- Meeting the need is expected to significantly improve their chances in job advancement, increasing their income, or progressing in their Plan; AND
- There is no other way to meet the need.

Note

Clients who are not in compliance with their Plan are not eligible for supportive services.

Identifying needs and exploring alternative resources available to meet the need can be a great opportunity for case managers talk with clients about how their family will meet work related and other needs on their own when Work Services supports are no longer available to them.

This process includes:

Problem solving

How to use what they have on hand and identify solutions for future needs. Even when case managers do provide supportive services, discussion is an opportunity to help the client prepare and plan for the time when supports are no longer available.

Budgeting

How to make the most of their income & identifying sources of other income. Case managers to authorize supportive services when there is no other way to meet the need. Sometimes budgeting can help the client meet the need on their own. Client may contribute what they can to the purchase of the service--to "co-pay" for the service or item.

Identification of natural supports

How to access community resources and help from family and friends. Supportive Services should be tailored to each family and determined on a case by case basis. The client should be able to identify their network of family and friends who may be able to help.

Link to community resources

How to tap into resources outside Temporary Assistance and DPA. While charitable organizations and agencies may not have the funds or specific service needed, the client will know how to access that organization's resources when they are self-sufficient and Work Services are no longer available.

Case managers are expected to work with clients to ensure they identify and use resources other than Work Services supportive services whenever possible. However, investigation other resources should not take so long that the unmet need interferes with client participation and success in their Plan. The usefulness of exploring and learning about community resources must be balanced with the urgency of the need and the time the client has available to invest in doing things outside of their job or other activities.

When unsure about whether to authorize a supportive service, case managers should consider:

- Conducting a case staffing with other involved staff or staff from their team who might offer helpful information or perspectives.
- Talking with a supervisor about the case.
- Identifying the specific reason they are unsure. The case manager may need to contact community resources, and the client may need to provide additional information in order to make a good decision.

If Work Services staff decides not authorize requested supportive services they must:

- Document the decision in CMS Client Notes;
- Discuss the reason with the client; and,
- Try to help the client meet the need through other resources.

Note

Clients who disagree with their case manager's decision should be referred to a supervisor. If the client is still dissatisfied with the office or agency decision, they are entitled to a Fair Hearing with the Division of Public Assistance.

There are no Work Services Program caps on how much an individual client can receive in supportive services per program year. However, supportive services funds are a finite

resource. Case managers defer to their supervisors, office or team budgets and agency procedures in providing supportive services.

Using Supportive Services to support goals other than employment and safety:

While supportive services are intended help clients progress in getting, keeping or advancing in a job--supportive services may sometimes be used to meet needs which directly support a client in attaining self-sufficiency through an avenue other than employment, or when the safety of the family depends on meeting a specific need. The most common use of supportive services for these needs are:

- When a client is disabled and is pursuing self-sufficiency through application for SSI, counseling supportive services (code CL) may be used to provide for professional application and benefits counseling when needed.
- When a family needs immediate assistance to flee a domestic violence situation and family, friends or a shelter is not an option for the family, Emergency Shelter (code ES) or Relocation (code RL) supportive services may be used to provide safety for the family while maintaining them in their community or moving them to an area with employment opportunities.

In determining whether to issue supportive services in self-sufficiency and safety situations, explore all other alternative solutions and resources before authorizing supportive services.

Using Supportive Services for Basic Needs:

Basic needs, such as heat, telephone service and electricity, are funded by a family's Temporary Assistance grant, and therefore are not to be funded with supportive services.

Heat & Electricity for their home is not something a family should be without. If a client cannot pay to maintain their heat and/or electricity, they may apply for help from DPA's Heating Assistance Program (HAP) and other charitable organizations. Weatherization assistance may be available through Rural Alaska Community Action Program (RurAl CAP), Weatherization Assistance Program (WAP) or other programs which can help reduce the costs of heating in the future.

Telephone service can be vital in searching for employment. If a client cannot pay to maintain their phone bill, or cannot afford to pay for initial and installation costs, they should apply for Lifeline & Link Up, which works with local telephone companies to significantly discount phone and installation fees.

Note

Internet service, cable or satellite television, cell phone, long distance telephone service, caller ID, call waiting, and pagers are NOT basic services.

4.2.4. Working with Vendors

The vendors Work Services purchase goods and services from are both members of the community and potential employers. It's in everyone's best interest to cultivate good relationships.

Most offices use a few vendors on a regular basis. Some even arrange to use vouchers, or bill the office on a monthly basis for client purchases. It's very important that vendors know who their contact is at the office if there is a question or problem. They should know where to send the bill or what to do if a client purchases more or less than a voucher or purchase order is good for.

Vouchers or purchase orders clients take to vendors should specify the nature or type of service to be purchased. For example, if a vendor who sells clothes usually provides clients with clothes appropriate for office work, they may hesitate or even refuse to take a voucher from a client who needs to get jeans and sweatshirts to work at a gas station unless the voucher notes "jeans and sweatshirts OK."

You vendors also should be informed about what clients are not allowed to purchase with a voucher. Inappropriate purchases can be avoided if vouchers are specific on what is not allowed.

Vendors provide specialized services not available through Work Services. Professional psychologists, counselors, job coaches and benefits specialists bring expertise and unique supports which can assist clients with challenges succeed in increasing their self-sufficiency.

Regardless of the type of services the vendor provides, it is important to cultivate positive relationships with vendors to the benefit of their business, the client, and the Work Services program.

4.2.5. Supportive Services Table

Table 4.1. Supportive Services Codes

Supportive Service	Code	To subsidize
Vehicle Repair	AR	Vehicle repair including mechanic's labor charges and/or the cost of replacement parts
Specialized Assessment Testing	AT	Professional assessment and evaluation of strengths, challenges to employment, and/or eligibility for community services needed (not covered by Medicaid)
Bus Transportation	BT	Public transit via bus or other means
Car Insurance	CI	Liability insurance for the primary vehicle needed to go to work & activities (not SR22)
Counseling Services	CL	Professional counseling to remediate challenges or assistance in application/appeal for SSI
Case Management Svc	CM	Intensive and specialized case management outside the scope of Work Services
Community Work Svc	CS	Specialized or DPA contracted CWE site development, placement & monitoring
Drivers License	DL	Alaska drivers license or renewal fees charged by DMV (not fines)

Supportive Service	Code	To subsidize
Emergency Shelter	ES	Securing or maintaining housing needed to keep a job and/or escape domestic violence
Grooming	GR	Haircut and grooming products needed to job search or go to work
Gas for Vehicles	GV	Fuel needed for vehicle to go to work and activities
Interview Clothing	IC	Clothing needed to job search and interview for employment
Job Development & Placement	JD	Development of job positions and placement performed by a vendor outside the scope of Work Services and not available through partner agencies such as DOL or DVR
Job Search Assistance & Placement	JS	Specialized or intensive job search assistance, development and placement outside the scope of Work Services and not available through partner agencies such as DOL or DVR
Professional License	PL	A professional or occupational license needed to get or keep a job
Post Employment Svc	PO	Specialized or intensive services (job coaching, job skills evaluation) outside the scope of Work Services and not available through partner agencies such as DOL or DVR
Relocation	RL	Relocation to a different community to accept employment or attend training which will result in immediate employment (NOTE: maximum \$3000 per year)
Remedial Medical & Dental	RM	Medical & dental services needed to job search or go to work (not covered by Medicaid) such as eyeglasses, dentures and hearing aids (NOTE: maximum \$1500 per year)
Special Tools, Clothing & Equipment	ST	Tools, clothing & equipment needed for a specific job or approved training, including boots, gloves, uniforms, appropriate clothing, safety equipment
Start Up	SU	Low-cost items supporting success in work and job search not otherwise listed
Transportation	TR	Transportation costs other than fuel (GV) or public transit (BT)
Youth Enrichment	YE	A child's participation in before & after school activities or other extra-curricular activities which allow the client to maintain work or more successfully engage in assigned activities

Table 4.2. Supportive Services Codes - Employer Based Programs & Education

Supportive Service	Code	To subsidize
OJT	OJ	Reimburse employers for their costs while clients are working in

Supportive Service	Code	To subsidize
		subsidized On-the-Job Training programs (NOTE: DPA use only)
Job Start	WS	Reimburse employers for their costs while clients are working in Job Start subsidized employment (NOTE: DPA use only)
Hire 2000 & 2	WT	Reimburse employers for their costs while clients are working in Hire 2000 & 2 short-term subsidized employment (NOTE: DPA use only)
Train to Hire	TH	Reimburse employers for their costs while clients are working in Train-to-Hire positions (NOTE: DPA use only)
Basic Education	BE	Cost of approved basic education including workshop fees, tuition, books, lab & activity fees not covered by WIA, DOL, UA or other available resources
Life Skills	LS	Cost of approved life skills training including workshop fees, tuition, books, lab & activity fees not covered by WIA, DOL, UA or other available resources
Pre-Employment Training	PR	Cost of approved pre-employment training, including testing for specialized occupational licenses and workshop fees, tuition, books, lab & activity fees, and not covered by WIA, DOL, UA or other available resources
Tuition	TU	Cost of approved post-secondary or other education (not BE, LS, PR) including workshop fees, tuition, books, lab & activity fees not covered by WIA, DOL, UA or other available resources

The rest of this section outlines policy and guidance on specific supportive services.

Unless noted otherwise below, supportive services types do not have an official Work Services policy limit on how much can be provided to a client in a single expenditure or during a fiscal year. Case managers should refer to their office or team's protocols and budget for guidance on caps and determining reasonable expenditures.

Note

Foodstamp E&T Case Managers please reference the E&T Manual for supportive services available to support E&T clients.

4.2.6. Bus Transportation

(JASP Code BT)

Lack of transportation is one of the most common challenges to employment. For those clients who do not have their own vehicle, the bus or other alternate public transit system may be their primary way to get to and from work and other self-sufficiency activities.

Use the Bus Transportation category when providing supportive services to pay for public transit. Most commonly, client receive either bus tokens for individual rides, or a monthly bus pass, as appropriate.

4.2.7. Car Insurance

(JASP Code CI)

This supportive service is limited to liability insurance for the primary vehicle needed to transport family members to and from employment.

Clients need to demonstrate that they have explored the market to find the most affordable policy. This supportive service payment should always be made to the client with the reason specified on the authorization. Clients must provide a receipt that verifies the purchase.

Liability car insurance policies can be paid by supportive services. Car insurance is an ongoing expense that must be worked into the family's budget. It is extremely important to review this with clients to ensure that they can cover the ongoing cost of maintaining car insurance. Supportive services for liability insurance cannot exceed a 12-month term.

In rare cases Work Services can provide comprehensive car insurance funds. Funding of comprehensive insurance cannot exceed 3 months.

For those who need comprehensive insurance because they are required to by their employer, budgeting should include looking at wage progression and job advancement to ensure that the client will be able to take over payments in the future and that this job is one that can become the basis of, or is a step towards, long-term self-sufficiency.

For those who are required to have coverage because they are making loan payments on their vehicle, the case manager and client should plan how they will pay their own car insurance payments within three months. If the client cannot maintain the insurance payments on their own in this period of time, you may need to help the client explore the option of selling/trading the vehicle in on one they can afford.

Note

High-risk liability insurance (SR-22) cannot be purchased under any circumstances.

4.2.8. Case Management Services

(JASP Code CM)

Occasionally, Work Services funds specific or specialized case managers to work with families who need intensive case management services beyond the scope Work Services.

When a client appears to need intensive services, and those services are not available from community providers by referral, case managers should discuss the case with their supervisor.

4.2.9. Community Work Service

(JASP Code CS)

In most communities, case managers or contracted Community Work Experience Coordinators develop sites and place clients in CWE positions. However, in some rare cases supportive services can be used to pay a vendor to develop and place clients in unpaid Community Work Experience (CWE).

When a client that needs CWE services beyond the scope of Work Services, or a client needs but does not have access to CWE placement services through Work Services, case managers should check with your supervisor regarding using Community Work Service supportive services.

For more on Community Work Experience see [Section 3.4, "Community Work Experience"](#).

4.2.10. Counseling Services

(JASP Code CL)

This service is used when an assessment, medical referral or case history identifies counseling (individual or group) as a way to develop and build on strengths to support employment or remediate challenges that interfere with employment. It may also be used to purchase assistance for disabled clients who are pursuing self-sufficiency from the Temporary Assistance program through application for SSI benefits.

Individual or group counseling supports client employability through improved life skills, safety, health or abilities. For clients with certain challenges, such as mental health, substance abuse or domestic violence, Medicaid may pay for a limited number of counseling visits if recommended by a health care professional.

Community resources are often available, sometimes at no charge (for instance, Alcoholics Anonymous support groups are free). Supportive services may assist clients with co-pays and the cost of visits recommended by health professionals, but not covered by Medicaid.

Disabled clients who need assistance in applying for SSI benefits may receive Counseling Services to fund individualized assistance and benefits counseling. Assistance in applying for SSI and benefits counseling is sometimes provided by non-profit agencies (such as the Disability Law Center) for free. Supportive services may be used when the vendor's service is the client's best bet at establishing eligibility for SSI benefits.

4.2.11. Drivers License

(JASP Code DL)

An Alaska driver's license can be essential to successful participation in communities with roads. It may be a new license or a renewal. If the client lacks a driver's license and needs one to drive to work, payment may be authorized for the actual cost of fees charged by the Alaska Division of Motor Vehicles.

The cost of a commercial driver's license, or other license needed to enter a driving occupation, should be paid through the "Professional License" supportive service.

Note

This supportive service cannot be used to pay fines associated with a license revoked by court-order (such as fines to be paid in order to get a license after conviction for DWI).

4.2.12. Emergency Shelter

(JASP Code ES)

As soon as a family presents with a housing need, every effort should be made to assist them in finding or maintaining safe and affordable housing. Referral to housing assistance is usually the first step in helping a client get safe and affordable housing.

If a family is homeless refer them to a shelter. If there is no space at a shelter, no shelter in their community, or their place on a Housing Assistance wait list makes it unlikely that they will receive subsidized housing assistance soon, every effort should be made to help the family find an alternate housing arrangement. Options include family, friends, relocation or finding an apartment with a short-term or monthly lease which would help build positive rental references.

When no other resources and shelter can be found, it is appropriate to provide emergency shelter supportive services. Emergency shelter is intended to:

Assist clients who are working or pursuing employment to move to a place within their community which is closer to work. This is intended for clients whose commute to work and child care is excessively long, prohibitively expensive, or a challenge to self-sufficiency.

- Help working clients with high costs of initially securing housing such as paying first and last month's rent.
- Assist families who have already paid rent, but who have an immediate need to change their housing situation to accept employment, to escape domestic violence, or to leave unsafe living conditions.
- Pay unmet housing costs that are caused by unanticipated losses of income. This should only be done when there are no other resources available and a family's living arrangement is in jeopardy.
-

Note

This supportive service is to help families with an immediate emergency, or one-time need for initial funds to secure housing. Using emergency shelter funds in excess of one month is not appropriate.

Note

This service cannot be used to pay damage, security, and/or pet deposits.

4.2.13. Gas for Vehicles

(JASP Code GV)

Transportation to and from work is vital to maintaining employment. For clients who have their own vehicle, this supportive service may be used to subsidize their fuel expenses.

While this is one of the most common and important supportive services Work Services offers, it should not be provided to clients automatically.

Clients without earned income, and some who are working, may not be able to find the financial resources to pay for fuel. As working clients increase their income, they should be able to pay for more of their own transportation expenses. Help clients budget for ongoing fuel costs, pay what they are able, and plan for a time that this supportive service is no longer available to them.

4.2.14. Grooming

(JASP Code GR)

Appearances often make the difference in a successful work search. Grooming supportive services typically include haircuts and style, or beard grooming. Pay for grooming costs, if doing so improves the client's chances at getting, or if needed to accept paid employment.

Appropriate grooming is completely dependent upon the job the client is looking for and the customs of the local labor market. If they are seeking employment with a fish processor, the grooming standard will obviously be different than if they are looking for a job as a front desk receptionist in a law office. Provide grooming supportive services so that the client's grooming "fits" with the job they are looking for (rather than to fit a general standard or preference).

4.2.15. Interview Clothing

(JASP Code IC)

To be successful in work search, clients must wear the appropriate clothes. Clearly, what is appropriate for an interview depends entirely upon the job the client is applying for and the customs of the local labor market. Clients should be advised to use discretion in selecting clothing so that the clothing need can be met at a reasonable cost. Clients may also choose among approved vendors to find the clothes that best suit their need for the best price.

Authorization of interview clothing must be directly related to an appointment for an interview. Only the clothing essential for success at the interview can be authorized. This is not a general clothing allowance.

For clothing allowance see Special Tools, Clothing & Equipment, (JASP Code ST).

4.2.16. Job Search Assistance, Development & Placement

(JASP Codes JD, JS)

Because job search and placement assistance are part of Work Services, this support is used to fund only those services which are beyond the scope of Temporary Assistance Work Services. Supervisor approval is required. Many of these services are available from Department of Labor staff and job center Job Developers. When not otherwise available, this supportive service can be used to purchase the following employment services, either individually or in combination.

- Job Search Assistance--to be used to purchase services which help clients prepare and apply for suitable employment. These services may be provided individually, in groups or in workshops.
- Job Development--to be used to purchase services which develop job opportunities for Temporary Assistance clients by working with businesses and other employers to create job openings or other employment opportunities.
- Job Placement--to be used to purchase services which identify job opportunities, match clients to job openings, and make referrals to employers.

4.2.17. Professional License

(JASP Code PL)

Professional licenses encompass a range of occupations, from plumbers to Certified Nurses Aide. Pay the cost of a professional or commercial license if the client needs one to engage in a specific occupation.

Pay the actual cost of the license as charged by the Alaska Division of Occupational Licensing.

4.2.18. Post Employment Services

(JASP Code PO)

Post-employment job retention and wage advancement services are part of Work Services. Only use this support to fund services which are beyond the scope of Temporary Assistance Work Services and have supervisor approval. Examples of Post Employment Services include specialized on-the-job evaluation or coaching.

For information on steady work and better jobs, see [Section 3.6, "Steady work and Better jobs"](#)

4.2.19. Relocation

(JASP Code RL)

Relocation to a different community may be the only way for some clients, especially those in rural communities, to get work and become self-sufficient. Because relocation is usually not an urgent and unplanned event, take the time to work with the client to explore all their resources to finance moving and plan for how they will find housing, child care and address their family's basic needs when they move.

Unique circumstances may lead to providing Relocation supportive services to a client to pay the cost of a temporary or permanent move to a distant Alaskan community. (Consider a community "distant" if routine commuting presents a barrier to participation, resolvable by relocation.) Relocation should only be authorized so the client may:

- Accept an offer of paid employment which provides for exiting the Temporary Assistance program quickly.
- Move from a community with high-unemployment to one that has employment opportunities they will be able to qualify for and get. Consult with Work Services staff in the prospective community to ensure the client's skills and abilities are matched to the community's labor market.

- Take part in a specialized and locally unavailable training or work experience activity that leads directly to a paid employment opportunity in the community they intend to live in.

Before authorizing Relocation supportive services, case managers should ask the following questions:

- Can the client get a job where they currently live? Compare the local job market - current openings and potential jobs over the next six months - to the client's employment qualifications -- work history, education/training, skills, knowledge and abilities.
- What has the client done to find work locally? Has the client been actively seeking work? Is an OJT with a local employer feasible? Is there suitable training that would help the client get a job locally?
- Will the client be able to go to work (or training) as soon as they relocate? Are there other reasons the client is requesting to leave the area? Are there substance abuse, DV or other issues that need to be addressed before the client is ready for employment? Are there legal issues that preclude relocation? Does the client have a current resume, social security card, driver's license and other necessary documents and certificates required for the specific job, or the types of jobs they will seek? Are they admitted to a training program, and how will they pay for the training they want to attend?
- Will this job advance them in their goal to achieve self-sufficiency?
- What are the client's job opportunities in the area where the client wants to reside? Does the client clearly meet the requirements for jobs available in that community? Have they applied for any jobs long-distance (on-line, fax, phone interviews)?
- Will the training get them into a job immediately upon completion? Will more training or work experience be needed? Are the jobs they will qualify for going to lead to exiting Temporary Assistance? Are they willing to live in a community where the jobs are available?
- Do they have a plan and are there resources to meet their family's needs in the new community? Is there family or friend support in the new location? Where will they live, how will they get to work, is there child care available? What part of the community will they need to live in, what schools are near?
- What are the alternatives to paying for travel? Does the client have access to other resources that could fund the trip (PFD, tax return)?

When authorizing payment for relocation:

- Do not authorize payment of out-of-state moving costs.
- The assigned activity or employment opportunity must remain unavailable in the client's community of residence, or within a reasonable commute from their residence.
- Use the least costly means of relocation.
- Check with your supervisor before authorizing.

Note

Monetary limit for Relocation: There is a \$3,000.00 limit per program year (July 1 through June 30) for this service.

Remedial Medical and Dental

(JASP Code RM)

Remedial medical and dental covers services or care typically seen as cosmetic in nature and not covered by Medicaid. Although Medicaid may not find the care essential, this type of care is often essential in gaining paid employment. The three most common services are: eye glasses, dentures, and hearing aids. All three are costly, and should be authorized when other resources are not available and the service is needed to ensure employment in the near future.

Note

Monetary limit for Remedial Medical/Dental: There is a \$1,500.00 limit per program year (July 1 through June 30) for this service.

4.2.20. Special Tools, Clothing & Equipment

(JASP Code ST)

Some occupations and trades require special tools, clothing, or equipment. Typical requests are for safety equipment, boots, or gloves. This can include appropriate clothing for office or other kinds of employment. Pay the cost of special gear that employees working in certain occupations or trades need in order to train for or to enter that occupation. Authorize purchase of special gear only when needed by the client to enter or keep paid employment, unpaid work experience, or to take part in specialized occupational training.

Clients should be encouraged to make the most of supportive services funds by looking for bargains and best prices. When multiple vendors are available, the client may choose the vendor who has the most appropriate clothing or tool for their job.

4.2.21. Start Up

(JASP Code SU)

Start-up expenses include low-cost items or services not otherwise listed in this section, including alarm clocks, child car seats, criminal history background checks, and fingerprinting costs that a client needs to start or keep employment. Other items which may assist them is participation in self-sufficiency activities, such as "day-timers" or files for organizing and tracking their budget, bills, or job search are appropriate uses of Start Up supportive services.

4.2.22. Specialized Assessment Testing

(JASP Code AT)

Specialized Assessment Testing may be authorized when client disclosure, screening, work performance, history or other indicators show that the client should be referred to a community agency or professional for evaluation.

Because the labor market is the only thing that can assess a person's true employability, using specialized assessment to test for "job readiness" is not an option. The primary goal of Specialized Assessment Testing is to identify strategies and strengths that may help a client who has been unsuccessful in Job Search or in job retention to get, keep or advance in a job. Ask assessors to test for and provide information on client strengths, preferences, and abilities relating to employment, in addition to those issues which are interfering with employment.

Specialized Assessment Testing can also be used to:

- Help with in-depth job matching;
- Identify need for accommodation on the job;
- Identify need for specialized services to increase ability to participate in work or other self-sufficiency activities; and.
- Help determine eligibility for other assistance programs (such as SSI).

Types of Specialized Assessment include:

- Strengths-based on-the-job evaluation;
- Vocational or aptitude testing;
- Literacy and other educational testing;
- Substance abuse assessment;
- Domestic violence assessment;
- Mental health assessment;
- Learning disabilities formal assessment; or
- Neuropsychological evaluation ("neuropsych eval").

4.2.23. Subsidized Employment & Training

(JASP Codes, OJ- On-the-Job Training; TH-Train To Hire, WT-Hire 2000&2, WS- Job Start)

Subsidized employment and training can help client gain valuable job skills and experience while working. Work Services has set aside funds to reimburse employers for their costs while clients are working in subsidized employment positions or in short-term Train-to-Hire programs.

For an overview of Subsidized Employment, see [Section 3.3, "Subsidized Employment"](#).

When documenting or reporting this supportive service please use the appropriate JASP Code type code:

4.2.24. Transportation

(JASP Code TR)

Most clients' transportation needs are for subsidies to help with the costs of public transit or fuel for their own vehicle. Transportation supportive services are used for transportation costs other than fuel or bus tokens or passes.

Transportation services can cover part or all of the costs of local travel by for-hire vehicles when needed by the client to travel to and from any assigned activity. For-hire vehicles include taxis and private carriers, and cars driven by others who require payment in return for the ride. Use prudent judgment when authorizing use of for-hire vehicles, to assure that the provider's charges remain reasonable.

Consider the cost of bringing dependent children to and from a child care provider when determining a client's transportation needs. When clients living in different households use a car pool to travel to activities, authorize each client to receive their share of the car pool's cost.

In some offices, services have been purchased with contracts or grants. Work Services staff should check with their supervisors regarding this.

4.2.25. Tuition and Education

(JASP Codes BE-Basic Education; LS-Life Skills; TU-Vocational Training; PR-Pre-Employment Training)

Training or education that is concurrent with work activities is often a good way to increase a client's chance for success and promotion at work. When a client is unsuccessful in job search or at work, assessment may indicate that they are in need of training or basic education in order to become employed.

It is appropriate to use supportive services when training or education is an identified activity on the FSSP, short in duration (less than 12 months) and directly related to improving employability, job retention or wage progression.

Tuition payments cover enrollment fees and training costs. Authorize a tuition payment only when other agencies and funding sources cannot cover job training costs. Some other resources include scholarships, WIA funds, STEP funds, BEOG/SEOG grants, and Pell grants.

Use Tuition Payments to meet the following costs of any FSSP identified activity:

- Tuition;
- Books and workbooks;
- Lab and activity fees;
- Short-term workshop fees (registration fees); and,
- Testing fees as charged for specialty licenses.

Document client engagement and success in training and education with class schedules, workshop or training certificates of attendance and completion, report cards or diplomas, etc. in the case management file.

Note

Supportive services cannot be used to subsidize self-initiated education and training as defined in the Work Services Handbook. Refer to [Section 5.4, "Work Activities"](#) for information on determining whether education and training a client is engaging in is self-initiated or not.

Note

When documenting this supportive service please use the appropriate JASP Code type code:

- BE-Basic Education for adult basic education (ABE) such as GED tutoring or improving literacy or basic math skills;
- LS-Life Skills training for help learning to complete daily activities and improve soft skills
- PR-Pre-Employment Training for skills training targeting workplace behavior and general work skills
- TU-Vocational Training for all other Training & Education

4.2.26. Vehicle Repair

(JASP Code AR)

Vehicle repair can help clients to keep a job they would otherwise be unable to hold due to transportation challenges. Repairs may be minor, or significant and beyond the value of the vehicle. Authorize reasonable car repairs only when other methods of transportation to and from work or approved activities are unavailable or unreliable.

Pay only for the cost of an automotive mechanic's labor charges and/or the cost of replacement parts necessary to repair a client's personal vehicle. Expect the repairs to return the vehicle to a safe and reliable working condition. A gas station or auto repair shop must confirm in writing the need for the repairs and their estimated cost, and must conduct the repairs or supervise them.

Use discretion in requiring additional estimates--the priority is for the client to be looking for work as much as possible rather than looking for bids or participating in other activities that aren't directly helping them get a job.

Some offices have identified preferred auto mechanics or shops that are consistently reliable and reasonable in charges. Occasionally, vendors may even take a partial payment for the repair then allow the client to make payments of the balance. In these cases, consider what a reasonable monthly repayment may be for the client in determining how much you will authorize in supportive services directly to the vendor. In this way the client pays for as much as they are able, the vendor is assured of full payment for the services provided, and the provider retains them as a vendor for other clients.

Vehicle repair may also be used to assist clients in who use snow-machines, boats, and 4-wheelers as their primary means of transportation. In cases where the client is able to repair their own vehicle, supportive services may be used to pay for parts needed to complete the repair, provided there is no other way to meet the need and the vehicle is needed to maintain or begin employment or participation in Work and Work Readiness activities.

Case managers refer to their office or team's protocols regarding any limits to payment amount or protocols for approving payment for vehicle repairs.

4.2.27. Youth Enrichment

(JASP Code YE)

As with all other supportive services, use this service to promote a parent's participation in work or other self-sufficiency activities. A child's participation in before and after school activities, such as Boys and Girls clubs, should mean the parent has adequate time to get to work or provide opportunities for parents to pursue evening or weekend classes and training. Use youth enrichment supportive services to purchase before and after school activities or other extra-curricular activities of dependent children who are included in the Temporary Assistance case.

Note

This supportive service is not considered childcare and should not be used as a substitute for childcare.

4.2.28. Documenting Supportive Services

Work Services staff document both the authorization of supportive service and why it was authorized. For some supportive services, such as Bus Voucher and Passes, or Interview Clothes, this may be a simple note.

For more expensive items, or those that support safety or self-sufficiency activities other than work (such as Emergency Shelter), more thorough explanation of how meeting the need will significantly enhance participation in activities leading to work or advancement should be provided.

Work Services staff use the following tools to document plans, actions and outcomes of client activity:

- FSSP
- "Client Notes" screen in CMS
- Work activities type and hours of participation in the "Work Activities" screen in CMS using JAS Work Activity Codes [clients should be engaged in Work, Work Readiness or Family Support activities in order to receive supportive services]
- Other documentation as appropriate such as: activity calendars, work schedules, correspondence, budget
- Referrals to community resources
- Receipts from Vendors; Receipts showing the client paid for a service directly (for reimbursements); class schedules, grades or certificates of completion (for Tuition and Education); repair estimates (for Vehicle Repairs); etc.

Follow the authorization and billing system of your particular office and agency.

4.3. Parents Achieving Self-Sufficiency I (PASS I)

4.3.1. What is Parents Achieving Self-Sufficiency I (PASS I)?

The Parents Achieving Self-Sufficiency I (PASS I) program provides child care subsidies to families on Temporary Assistance who need child care to work or participate in other self-sufficiency activities.

The PASS I program can appear complicated. This section is intended to provide a broad overview of the program for case managers.

Clients, case managers, DPA staff and child care providers work together to ensure PASS I is available to parents on Temporary Assistance and used appropriately.

- Case managers ensure clients understand the PASS I program, request that DPA authorize PASS I for the parent and their chosen provider, monitor client participation and update or revise requests for authorization as needed.
- Clients are responsible for finding and choosing an appropriate provider, keeping the case manager informed of their child care use and needs, and using care appropriately.
- DPA staff authorize PASS I care (upon receipt of a case manager's child care request), send authorizations to child care providers, process monthly child care provider bills, pay child care providers and communicate changes and concerns to the case manager and child care provider.
- Eligible child care providers perform care for the client's child(ren) and bill DPA each month for care based on the PASS I authorization.

Communication is key to ensuring PASS I meets the clients' needs and is administered correctly.

The rest of this section discusses when and how to arrange PASS I childcare for clients. Each DPA region has a process for generating PASS I authorizations and billings. Follow your agency's protocols in addition to the policy provided by the PASS I Manual and general guidance below.

4.3.2. Who is eligible for PASS I?

(PASS I Manual Sec 910)

Temporary Assistance clients who need childcare to go to work or participate in other self-sufficiency activities must meet basic criteria to be eligible for PASS I childcare assistance.

To receive PASS I an individual must be:

- A Temporary Assistance client who is participating in Work, Work Readiness and/or Family Support activities that are identified on their FSSP; or
- A Temporary Assistance applicant who is working or engaging in assigned activities (such as Job Search) before eligibility is determined; or
- A Temporary Assistance client who is going to start work or an approved activity within a month; and without immediate authorization of PASS I would not be able to get or keep a space for their child with the identified child care provider.

Two-parent families are eligible if they meet the criteria above and:

- Both parents are in work or training activities and traveling to or from those activities during the time child care is provided AND
- Their combined total participation averages a minimum of 55 hours per week;

OR

- One of the two parents is incapacitated and unable to care for the children AND
- The second parent needs PASS I assistance to work or participate in other approved self-sufficiency activities.

At least one child in the client's family must be:

- Under age 13; or,
- Age 13 to 19 and physically or mentally unable to care for him/herself as verified by a physician or licensed psychologist; or,
- Age 13 to 18 and court supervision requires that the child be in the care of an adult, as verified by a court record; or,
- Dependent children; or,
- A child for which an adult in the household is in loco parentis (The adult is acting in place of a parent.)

4.3.3. What clients absolutely need to know about PASS I

Clients should be offered PASS I child care assistance when they meet with Work Services staff and if they are eligible for it. If a parent is eligible and wishes to secure child care through the PASS I program, case managers are required to review and discuss the parent's role and responsibilities with them.

While clients are required to participate in Work, Work Readiness and Family Support activities, they are not required to access the PASS I program.

Case managers review the Parents Responsibility Agreement with the client to ensure the parent(s) understands the program, their responsibilities in using PASS I, and have the opportunity to ask questions and receive answers prior to signing the form.

4.3.4. What child care providers can be paid by PASS I?

To participate in the PASS I child care assistance program a provider must:

- Be 18 years of age;
- Meet the qualifications for Licensed or Approved care, or provide the documentation required by DPA for In-Home care; and
- Provide DPA with a copy of the Child Care Provider Rates and Responsibilities form within 30 days of the initial PASS I authorization in order to continue eligibility for child care authorizations and provider payments.

There are several types of child care providers and programs available to families. Providers who are eligible to participate in the PASS I Child Care Assistance Program include the following:

- Licensed Child Care
- Legally Exempt Care (Approved, Approved Relative, & In-Home Care)
- Military Regulated Care
- Tribal Approved or Certified Care

4.3.5. How can clients find a child care provider?

Child Care Resource and Referral agencies (R&Rs), located in Anchorage, Fairbanks, and Juneau, serve both urban and rural communities in Alaska.

R&Rs will provide Temporary Assistance parents a list of child care providers (at no cost) which gives information about child care vacancies, days and hours of care, child care costs, meals and transportation services, children's activities, non-traditional hours, and other child care services available in their community.

In addition to referrals, R&R staff can counsel parents about the types of child care programs and providers available in a community. They assist parents in selecting quality child care programs and help parents to locate a provider or program that will serve a child with special needs. The R&R also offers a variety of handouts, books, videos, and parent checklists to use as parent's talk with providers and visit child care homes and centers.

Case managers and DPA staff are encouraged to refer parents to the R&Rs for information about the availability of care in a particular community. R&Rs are also the resource used by staff to verify that child care is not available for a client, and as a result cannot participate in full-time work and other activities.

4.3.6. When to request authorization for PASS I

Authorization for PASS I should be requested when eligible clients need child care in order to participate in activities on their FSSP. Adults who are penalized, or who are participating in a Temporary Assistance case that is suspended or in "refuse cash" status, are eligible for PASS I child care assistance as long as they are participating. Activities on the FSSP, along with both the client's and child's schedule, should be used as a guide in assessing the need for child care before completing a child care request form and issuing a child care authorization.

Single, full-time participants' need for child care is often identified based on the age of the child and their school schedule. School-aged children may need before and/or after school care if their parent participates during the day, or full-time child care if their parent works afternoons, evenings or nights. Infants and toddlers may need full-time care, or part-time care if the client has a family member or friend who helps care for their child outside the PASS I system.

Two-parent families may or may not be eligible for PASS I child care assistance (see "Who is eligible for PASS I?" above). PASS I may only be authorized for those times that both parents are engaged in Work, Work Readiness, and Family Support activities at the same time, preventing either parent from being available to care for their children. The parents' employment, other activities, and schedule should be identified on their Plans and support the use of child care.

Note

PASS I does not pay for child care that is needed because of a medical condition of the adult that limits their ability to care for their children. It does pay for child care needed by a two-parent family when one of the two parents is incapacitated and unable to care for the children AND when the second parent needs PASS I assistance to work or participate in other self-sufficiency activities.

Remember that PASS I is used to support participation in assigned activities and up to 30 minutes travel time to and from assigned activities. PASS I is not to be authorized (or used by the client) to pay for time a child is receiving care as they do daily activities (such as grocery shop) or self-initiated activities. If an activity does not appear on the FSSP, PASS I cannot be used to subsidize child care for time engaged in and travel to and from that activity. The parent is required to pay for all unauthorized child care. Case managers should ensure clients are informed about the affects of using care that does not support their FSSP activities.

For clients engaged in wellness or other non-work self-sufficiency activities, evaluate whether the activity is directly linked to increased self-sufficiency or employment. Determine if it should appear on the Plan and if child care is needed for the client to engage in the activity.

Note on PASS I and medical/wellness activities: PASS I cannot be authorized for daily activities (such as attending an appointment with a doctor) because these activities are not directly related to increasing employability and it is possible to bring a child along. PASS I assistance can be authorized to subsidize care while a client attends an assessment (such as mental health, neuropsychological testing, or an assessment required to establish eligibility for SSI) as assessments may provide information which can assist in job matching, about need for accommodation in education or work, or eligibility for other assistance programs, and children cannot attend evaluations.

Case managers who are unsure if PASS I should be requested and authorized should consult with their supervisor. Work Services staff can get policy clarification and guidance on use of PASS I care by emailing DPA Child Care Programs at CCPO@alaska.gov.

4.3.7. How to request authorization of PASS I

Once the client has found a provider who will care for their children and accept PASS I payments, request that DPA Staff authorize PASS I child care assistance.

A Field Services Staff member (sometimes a "child care clerk") uses DPA's JAS Payment system to electronically log and generate the Authorization. Case managers are not (usually) responsible for generating the Authorization that the child care provider receives. Case managers use the Child Care Request form to ask DPA to generate the authorization.

In order for DPA staff to generate an Authorization, they must have all the information identified on the Request for PASS I Child Care form ([CC-1-06-3889](#)). If information is missing, the staff responsible for generating Authorizations will contact the case manager for more information, which could delay the child care provider's authorization. Authorizations usually take a few days to process.

When requesting authorization case managers must provide client information and case manager signature in addition to the following information in order for the request to become Authorized.

Children in care

are those that will be receiving care from the provider.

Primary child care provider

is the provider the child will be receiving care from. If the child will have more than one provider, the provider who provides less care is the secondary child care provider.

Dates in effect

are the dates PASS I will pay for care under that Authorization. Note the first day of care and the last day of care that will be subsidized by the specific Authorization. (Some offices require monthly Authorizations, other may Authorize up to 3 months of care under a single Authorization--check with your office for details.)

Days of care

refers to the number of days per month the child will be in either Full-time or Part-time care.

- Part-time means the child will be in care up to and including 5 hours per day
- Full-time means the child will be in care more than 5 (but not more than 10) hours per day

Type of authorization--either Attendance or Enrollment

- Attendance Authorization pays the child care provider for the time the child is in care. Use Attendance when the client's need for child care is less than 5 days per week, sporadic, or if the authorization is for just part of a month.
- Enrollment Authorization pays the child care provider at a specified rate and for the period Authorized, whether the child is in attendance or not. Use Enrollment when a client has a steady schedule and is expected to need child care 5 days a week.

Note

If a client is placing their child with a new provider, the case manager must request an Attendance Authorization for the first (partial) month unless the child will be receiving care on the first day (or Monday) of the month. For clients engaged in activities full-time, five days a week, Enrollment is often appropriate. Most child care providers prefer an Enrollment Authorization because they are guaranteed payment for the "slot" the child has in their program, regardless of whether they attend every day or not. Because of this preference, when a client is starting with a new provider you may request an Enrollment Authorization for the second (full) month so the child care provider knows they can count on fixed PASS I payments in the following months.

While there are some rare cases when case managers can "back date" an authorization to cover days that a client had their child in care before discussing PASS I with their case manager, this is not standard practice. Child care providers should not depend on receiving PASS I assistance payments from DPA until they have an Authorization in hand.

Note

In cases that the client needs PASS I the same day, and has a child care provider who is willing to provide care for their child, the case manager may make a copy of the Request for PASS I Child Care sent to DPA, and give a copy to the client to give to the provider. The Request, which has the case manager's phone number should the provider not receive an authorization timely, should include a note that it is not the official

Authorization--but is a reasonable assurance that an Authorization is on the way. Most child care providers will accept this assurance and begin to provide care.

Below is a chart to guide case managers in the use of attendance or enrollment authorizations:

Table 4.3. Type and Days of Care

	Part-time care: 0-5 hours per day in care	Full-time care: 5 - 10 hours per day in care
Attendance: A partial month OR Less than 5 days a week	Attendance Part-Time	Attendance Full-time
Enrollment: Full month AND 5 days a week	Enrollment Part-Time	Enrollment Full-time

4.3.8. Monitoring and revising PASS I request for authorization

In order to provide quality work services to clients, staff need to stay informed about client success and need for supports. When monitoring client activity, case managers check on their use of PASS I as well.

Sometimes clients who are working or engaged in activities full-time will no longer need full-time PASS I care. A client's need for and use of PASS I can change for a variety of reasons. Changes in schedule and activities, availability of informal care or after school activities, a child's birthday, moving to a new home, and other life changes can affect how clients use PASS I.

As soon as the case manager is aware of a change in the client's need for PASS I, the child care authorization must be revised to reflect the parent's new use of care. Case managers submit a new request form to DPA. DPA will issue a revised authorization to the child care provider.

Note

Child care is to be authorized before care begins through the request and authorization process. Case managers cannot use 'verbal confirmation' for care by placing phone calls to DPA or the child care provider.

4.3.9. Ending PASS I

There are many reasons that a client may end PASS I.

Some clients no longer need PASS I because informal child care or other activities become available to their child. Clients who have a break in participation are no longer eligible for PASS I as they are available to care for their children at home. In some cases, a parent's work schedule changes so they are home when their children need care. Some

children "age-out" of care, either turning 13 years of age or attending school during those hours they used to need care.

Clients who are employed when they close their Temporary Assistance case will transition to PASS II child care assistance. These clients will receive a referral to PASS II assistance and may or may not need PASS I child care the month after their Temporary Assistance closes. Case managers inform clients of the basic differences between PASS I and II, and refer clients to the local R&R to complete an application for PASS II and receive additional information as needed.

When clients know they will be ending care they should give their child care provider two weeks notice that they will no longer need care. Requests for Authorization should reflect the date care will end. When the last month of care is a partial one, the Request should be for attendance rather than enrollment.

4.3.10. Documenting PASS I

Work Services staff use the following tools to document need, request and monitoring of PASS I child care assistance:

- FSSP
- "Client Notes" screen in CMS
- Work Activities type and hours of participation in the "Work Activities" screen in CMS using JAS Work Activity Codes
- Other documentation as appropriate such as: activity calendars, work schedules, correspondence
- PASS I Child Care Request form, PASS I Parents Responsibilities form

4.3.11. Quick Reference: PASS I Terms and Definitions

Table 4.4. PASS I Terms & Definitions

Term	Definition
Attendance	The time a child is actually present at a child care facility
Attendance Authorization	An authorization to pay for actual time a child is in care while the parent(s) is engaged in an approved or eligible activity, and where the rate for subsidy is an attendance rate
Attendance rate	A daily, part time daily, or hourly rate for actual time in care
Authorization	A document issued by a Division of Public Assistance office or a Child Care Assistance Program Local Administrator, which specifies the units and period of time for which a child care subsidy will be paid to a provider, on behalf of the parent(s), for care rendered while the parent(s) is engaged in an eligible activity
Child	A child age 37 months through 6 years, or until the child is age 19 if the child is verified as being developmentally disabled/special needs, or until the child is age 18 if court supervision requires the child be in the care of an adult
Child Care	The paid care, supervision, and guidance of a child or children unaccompanied by a parent or guardian, on a regular basis.

Term	Definition
Enrollment Authorization	An authorization to pay for care for a child who is in regular and consistent care for a particular period of time, whether the child is in attendance or not
Enrollment Rate	A monthly child care payment rate based on a regularly scheduled number of units a child is expected to be in care for a month
Full Time	More than five hours but not more than ten hours of care in a day
Hourly Care	Child care scheduled for 2 hours or less per day
Infant	A child who is newborn through age 18 months
Legally Exempt Care	PASS I eligible child care that is exempt from Licensed care regulations but required to follow some child and provider health and safety standards. Exempt care includes Approved Providers, Approved Relative Providers, and In-Home care.
Licensed Care	A provider who has obtained a state Child Care License issued by the Department of Education and Early Development, or a license from a municipality to whom the Department of Education and Early Development has delegated licensing authority, or the military.
Part Time	Up to and including five, but not more than five, hours of care in a day
Provider	An individual or organization that provides child care and charges for its services as a business, or an individual employed by such a facility. (Providers who care for the same child may be designated "Primary" and "Secondary" providers based on which has the child more hours in care.)
Provider Rate	A published fee charged by a provider for child care services for a specified unit of time
Registration Fee	A Licensed provider's one-time or annual charge to parents whose children are enrolled in the licensed child care home, group home, preschool, or center.
Request for Authorization	A request from a client's case manager or case worker that DPA Field Staff authorize PASS I child care assistance for the client and their identified provider. Child Care Request form (Form 06-3823) is used to request authorization for the child(ren), including dates and times of use.
School Age Child	A child age 7 through age 12
State Subsidy Rate	Rates published in the Child Care Assistance Program Rate Schedule that are used to determine child care subsidy payments to providers.
Statewide Maximum Payment Rate	The highest subsidy rate the state will pay per month; also called the state maximum, and listed on the Child Care Assistance Program Rate Schedule as the Area Maximum Monthly Rate.
Toddler	A child age 19 months through 36 months