DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



October 1, 2007

COUNTY FISCAL LETTER (CFL) No. 07/08-24

TO: COUNTY WELFARE DIRECTORS

COUNTY FISCAL OFFICERS

COUNTY AUDITOR CONTROLLERS COUNTY PROBATION OFFICERS

SUBJECT: COUNTY WELFARE DEPARTMENT (CWD) COUNTY EXPENSE CLAIM

(CEC) TIME STUDY AND CLAIMING INSTRUCTIONS FOR THE

DECEMBER 2007 QUARTER

This CFL provides counties time study and claiming instructions for the October through December 2007 quarter which includes information and reminders regarding the following functions/programs:

	Functions/Programs	Time Study Instructions	Claiming Instructions	General Information	Page Number
I	Social Services				
	A. APS – SPMP Response	Yes	Yes	Yes	3
	B. CSBG – SPMP	Yes	Yes	Yes	3
	C. CSBG – HR	No	No	Yes	4
	D. CWS – SPMP	No	No	Yes	4
	E. Family Preservation Program – SPMP	No	No	Yes	5
	F. Family Preservation Program – HR	No	No	Yes	5
	G. APS – SPMP Case Management	No	No	Yes	6
	H. APS – HR Response	No	No	Yes	7
	I. APS – HR Case Management	No	No	Yes	7
	J. IHSS – SPMP	No	No	Yes	9
	K. CWS – Pre-Placement Program	No	No	Yes	9
	CWS – Family Maintenance Program	No	No	Yes	9
	CWS – Family Reunification Program	No	No	Yes	9
	CWS - Permanent Placement Program	No	No	Yes	9

	L. Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project	Yes	Yes	Yes	10
II	CalWORKs A. Safety Net	No	No	Yes	12
III	Other Public Welfare A. RRP Medical	No	No	Yes	12
IV	Child Care	No	No	No	12
٧	Non-Welfare	No	No	No	12
VI	General A. Indirect Cost Rates (ICRs)	No	No	Yes	12

The Program Code Descriptions (PCDs) and Support Staff Time Reporting Instructions for county use during the October through December 2007 quarter are as follows:

Section	<u>Revised</u>
Social Services	12/07
CalWORKs	09/05
Other Public Welfare	12/07
Child Care	09/05
Non-Welfare	09/05
Staff Development	09/07
Electronic Data Processing	03/01
Support Staff Time Reporting Instructions	06/06
Direct-to-Program (DTP)/Function Support Staff Codes	09/05
Direct Service Delivery (DSD) Codes	09/04
General Time Study Instructions	06/04

Please note that any changes to the PCDs and/or Support Staff Time Reporting Instructions are reflected in the online version. Changes are shown in an underlined, highlighted, or strikeout format.

I. SOCIAL SERVICES FUNCTION, Program Code Descriptions

As a result of the Department of Health and Human Services (DHHS) Centers for Medicare and Medicaid Services (CMS) review, CDSS implemented changes to program code descriptions (PCD). Changes were made as a result of DHHS' increased scrutiny of Health Related activities. Specifically, DHHS has disallowed activities which counties can claim through Medi-Cal Administrative Activities (MAA) or Targeted Case Management (TCM). Counties must not claim these activities through both MAA and TCM, which causes duplicate claiming. DHHS also provided that activities claimed to Skilled Professional Medical Personnel (SPMP) codes must be performed by a SPMP qualified person. Any activity claimed under Title XIX must be allowable and included in the State Medi-Cal Plan. Program and time study code descriptions were revised to provide clarity

and update allowable activities. See below for a summary of changes.

A. CODE 5711 APS - SPMP RESPONSE

The code description has been revised to clarify the allowable activities. See changes below:

Includes time spent by SPMP staff who are not claiming these same activities through Medi-Cal MAA or TCM performing eligible administrative activities in response to reports or referrals alleging abuse, neglect, or exploitation of Medi-Cal eligible elder or dependent adults who meet eligibility criteria for APS (see definition in Code 5691). Activities may only be claimed, at the level of SPMP, if the worker performing the activity meets the requirements to be an SPMP. Activities are limited to those necessary to help clients access services covered under the State's Medi-Cal plan, in order to reduce the risk of poor health outcomes. Allowable response activities by SPMP staff include those program planning and policy development activities to include:

Liaison on medical aspects of the program with providers of Medi-Cal services and other agencies that provide medical care covered by the Medi-Cal program;

Furnishing of expert medical opinions in order to facilitate access to Medi-Cal services;

Assessing, through case management activities, the necessity for and the adequacy of medical care and services provided by Medi-Cal providers; Developing an interagency referral and tracking system to expedite access to Medi-Cal services;

Developing and reviewing policies and procedures for coordinating medical services for geriatric patients with Medi-Cal providers; and Consulting with medical providers on Medi-Cal policies and procedures to ensure clients receive the Medi-Cal services for which they are eligible.

B. CODE 1131 CSBG - SPMP

The code description has been revised to clarify the allowable activities. See changes below:

Includes time spent by SPMP performing activities which require the expertise of a medical professional to help adult County Services Block Grant (CSBG) clients who are Medi-Cal eligible to gain access to services covered by the State Medi-Cal plan in order to reduce their risk of poor health outcomes. These activities include program planning and policy development activities.

Liaison on medical aspects of the program with providers of Medi-Cal services and other agencies that provide medical care covered by the Medi-Cal program;

Furnishing of expert medical opinions in order to facilitate access to Medi-Cal services:

Assessing, through case management activities, the necessity for and the adequacy of medical care and services provided by Medi-Cal providers; Developing an interagency referral and tracking system to expedite access to Medi-Cal services;

Developing and reviewing policies and procedures for coordinating medical services for geriatric patients with Medi-Cal providers; and Consulting with medical providers on Medi-Cal policies and procedures to ensure clients receive the Medi-Cal services for which they are eligible.

C. CODE 1142 CSBG - HR

The code description has been revised to clarify that only allowable activities directly related to reducing poor health outcomes and are included in the State's federally approved Medi-Cal plan can be charged to this code. See changes below:

Includes time spent performing activities to help adult CSBG recipients, who are Medi-Cal eligible or potentially eligible, gain access to services covered under the State Medi-Cal plan in order to attain and/or maintain a favorable physical or mental health condition. These activities include, but are not limited to:

Assisting Medi-Cal recipients in identifying and understanding their health needs in order to secure and utilize treatment and health maintenance services covered by Medi-Cal;

Facilitating the Medi-Cal eligibility application;

Development, implementation and management of care plans for Medi-Cal eligible CSBG recipients for health-related needs covered by Medi-Cal; Outreach activities to Medi-Cal eligible or potentially eligible persons about available services and programs covered by Medi-Cal;

Providing assistance to eligible recipients to access needed health services covered by the State Medi-Cal plan, including transporting and/or accompanying them to appointments, or arranging transportation; and Statistical reporting.

D. CODE 1381 CWS - SPMP

The code description has been revised to clarify the allowable activities. See changes below:

These activities will be performed by a SPMP qualified person. Includes selected activities to help children who are Medi-Cal eligible, including children in foster care and Seriously Emotionally Disabled (SED) children, to gain access to services covered by the State Medi-Cal plan in order to reduce their risk of poor health outcomes. These activities must require the use of medical expertise and include, but are not limited to:

Development, implementation, and management of health related service plans for Medi-Cal covered services;

Referrals to other agencies and programs covered by Medi-Cal for assessment, evaluation, or treatment;

Interagency coordination and liaison with Medi-Cal providers to improve the Medi-Cal service delivery system;

In-depth informing and anticipatory guidance about causes, prevention, and remediation of health conditions covered by Medi-Cal;

Completing, updating, and disseminating any paperwork necessary to complete these activities; and

Receiving or providing training related to these activities.

NOTE: If these activities are performed by a person not qualified as an SPMP, record time to Program Code (PC) 144. SPMPs performing other non-enhanced health related activities should record their time to PC144.

E. CODE 1591 FAMILY PRESERVATION PROGRAM - SPMP

The code description has been revised to clarify the allowable activities. See changes below:

The activities charged to this code must be performed by a SPMP qualified person. Includes selected activities to help children who are Medi-Cal eligible, including children in foster care and SED children, gain access to services covered by the State Medi-Cal plan in order to reduce their risk of poor health outcomes. These activities require the use of medical expertise and include, but are not limited to:

Development, implementation, and management of Medi-Cal service plans; Referrals to other agencies and programs covered by Medi-Cal providers for assessment, evaluation, or treatment;

Interagency coordination and liaison with Medi-Cal providers to improve the Medi-Cal delivery system;

In-depth informing and anticipatory guidance about causes, prevention and remediation of health conditions covered by Medi-Cal;

Completing updating and disseminating any paperwork necessary to complete these activities; and

Receiving or providing training related to these activities.

NOTE: SPMP performing non-enhanced activities should use PC 1681.

F. CODE 1681 FAMILY PRESERVATION PROGRAM - HR

The code description has been revised to clarify the allowable activities. See changes below:

Activities to help children who are Medi-Cal eligible, including foster and SED

children, gain access to services covered by the State Medi-Cal plan in order to attain or maintain a favorable physical or mental health condition. Such activities include, but are not limited to:

Assisting children and their caregivers in identifying and understanding the child's health needs in order to secure and utilize treatment and health maintenance services covered by Medi-Cal;

Facilitating Medi-Cal eligibility;

Development, implementation, and management of care plans for coordinating Medi-Cal services;

Referrals to other agencies and programs covered by Medi-Cal providers; Statistical reporting;

Outreach activities to Medi-Cal eligible or potentially eligible persons about available Medi-Cal services and programs; and

Liaison activities with Medi-Cal providers.

G. CODE 5721 APS – SPMP CASE MANAGEMENT

The code description has been revised to clarify that allowable activities must be covered under the State's Medi-Cal plan and performed by a SPMP qualified person as long as these activities were not claimed under MAA or TCM. See changes below:

These activities will be performed by a SPMP qualified person and only if the SPMP is not claiming for these activities under MAA or TCM. Includes selected activities to help eligible elder or dependent adult clients who meet the criteria for APS (see definition in Code 5691), and who are Medi-Cal eligible, to gain access to services covered under the State's Medi-Cal plan, in order to reduce their risk of poor health outcomes. These activities include, but are not limited to:

Development, implementation and management of Medi-Cal service plans; Referral to other agencies and programs for assessment, evaluation or treatment covered under the State's Medi-Cal plan;

Interagency coordination and liaison with Medi-Cal providers to improve the service delivery system;

Completing, updating, and disseminating any paperwork necessary to complete these activities; and

Receiving or providing training related to these activities.

NOTE: SPMPs performing non-enhanced health related activities record this time to PC 570.

Developing and monitoring progress on time-limited objectives, based on problems and strengths identified in the assessment;

Monitoring the Medi-Cal plan covered services to be provided and activities to be performed in order to meet Medi-Cal service plan objectives and goals; Providing description of how the client will be stabilized and linked with services covered by the Medi-Cal plan;

Monitoring, follow-up, and reassessment to determine effectiveness of the Medi-Cal service plan;

Assisting clients and significant others to implement the Medi-Cal service plan; Stabilizing and linking with community Medi-Cal services for treatment of health related needs; and

Arranging for medical, mental health counseling, transportation, and other services covered by the State Medi-Cal plan, as needed.

H. CODE 5731 APS – HR RESPONSE

The code description has been revised to clarify the allowable activities must be covered under the State's Medi-Cal plan and that Public Guardians can time study to this code as long as these activities were not claimed under MAA or TCM. See changes below:

Includes time spent performing activities necessary to assist APS clients in gaining access to services covered by the State Medi-Cal plan in order to reduce risk of poor health outcomes in response to reports or referrals alleging abuse, neglect, or exploitation of Medi-Cal eligible adults who meet the eligibility criteria for APS (see definition in Code 5691). Public Guardians (PG), who are CWD employees, may time study to this code only if the PG is responsible for performing APS activities or for activities which would normally be the responsibility of APS workers, and only if the PG is not claiming for this activity under Medi-Cal Administrative Activities (MAA) or Targeted Case Management (TCM). Allowable activities are limited to those necessary to help clients gain access to services covered by the State Medi-Cal plan in order to reduce risk of poor health outcomes. Allowable response activities include, but are not limited to:

Addressing clients' needs for services covered by the State Medi-Cal plan and evaluating the need for a Medi-Cal service plan: (1) when providing immediate intake or intervention to new reports of immediate life-threatening circumstances or imminent danger to an elder or dependent adult or to crisis in existing cases; or (2) when evaluating and investigating reports of abuse, neglect, or exploitation, including reports on the 24-hour hotline.

Allowable health-related activities include, but are not limited to:

Gathering information to develop an intervention plan involving Medi-Cal services to address any condition that places the elder or dependent adult at risk of a poor health outcome;

Determining immediate health needs that may be covered by the State Medi-Cal plan; and

Preparing written reports and assessments.

I. CODE 5741 APS – HR CASE MANAGEMENT

The code description has been revised to clarify the allowable activities must be covered

under the State's Medi-Cal plan and that Public Guardians can time study to this code as long as these activities were not claimed under MAA or TCM. See changes below:

Includes time spent performing case management activities involving State Medi-Cal plan covered services during the period following initial investigation and response to reports involving abuse, neglect, or exploitation of Medi-Cal eligible elder or dependent adult clients who meet the criteria for APS (see definition in Code 5691). PGs, who are CWD employees, may time study to this code only if the PG is responsible for performing APS activities or is responsible for activities that would normally be the responsibility of APS workers, and only if the PG is not otherwise claiming these activities under MAA or TCM. Allowable activities are those necessary to help clients gain access to services covered by the State Medi-Cal plan, including psychological counseling and transportation to medical and mental health appointments, in order to reduce the risk of poor health outcomes, to provide a safety net to enable victims to protect themselves in the future and bring about changes in the lives of victims.

Such case management activities may include, but are not limited to:

Gathering of information to develop an intervention plan involving State Medi-Cal plan covered services, to address any health-related condition that places the elder or dependent adult at risk of a poor health outcome;

Assessing client's health-related needs, and the concerns and needs of other members of the family and household, in order to arrange State Medi-Cal plan covered services for the client:

Analyzing health problems and strengths of the client and family or household so as to arrange the most useful combination of State Medi-Cal plan covered services for the client; and

Establishing and updating a health-related service plan to alleviate identified problems and coordinating with other agencies by:

- Identification of health problems to be alleviated using Medi-Cal services;
- Inclusion of time-limited objectives based on health problems and strengths identified in the assessment;
- Inclusion of health-related services to be provided by Medi-Cal and action steps to meet the health-related service plan objectives and goals;
- Description of how the client will be stabilized and linked with community services covered by the State Medi-Cal plan;
- Provisions for monitoring, follow-up, and reassessment to determine effectiveness of the health-related service plan;
- Inclusion of family issues related to health-related care-giving issues;
- Providing counseling for clients and significant others to facilitate implementation of the Medi-Cal service plan; and
- Stabilizing the client and linking the client with Medi-Cal community services for treatment of medical and psychological needs.

J. CODE 1021 IHSS - SPMP

The code description has been revised to exclude activities performed by physicians and to clarify that activities performed by public health nurses are not also billed as direct medical services. See changes below:

Includes the following activities for welfare staff meeting SPMP requirements:

- 1) A registered/public health nurse employed by the county reviewing the case, reviewing services authorized by the social worker as outlined in the needs assessment, reviewing the certification of medical necessity for consistency with authorized services, providing consultation on the recipient's service needs, monitoring the recipient's condition and effectiveness of the client's Personal Care Services Program (PCSP) services, providing expert medical opinions related to the treatment plan, and liaison activity with service providers and other agencies that provide medical care on the medical aspects of PCSP.
- 2) Performing selected activities to help IHSS recipients who are Medi-Cal eligible to gain access to Health Related (HR) services in order to reduce their risk of poor health outcomes. These activities include, but are not limited to, the development, implementation and management of HR service plans; referrals to other agencies and programs for assessment, evaluation, or treatment of HR needs; interagency coordination and liaison with providers of HR services to improve the service delivery system; and informing and anticipatory guidance about the causes, and prevention and remediation of HR needs.

NOTE: These are for activities not billed as direct medical services.

K. CODE 1441 CWS - PRE-PLACEMENT PROGRAM
CODE 1442 CWS - FAMILY MAINTENANCE PROGRAM
CODE 1443 CWS - FAMILY REUNIFICATION PROGRAM
CODE 1444 CWS - PERMANENT PLACEMENT PROGRAM

The code description has been revised to clarify the allowable activities and to remove the reference to SED children. See changes below:

Any activity to help children who are Medi-Cal eligible, or potentially eligible, including all foster children, gain access to services covered by the State Medi-Cal plan in order to attain or maintain a favorable physical or mental health condition. These activities will not duplicate TCM activities provided through the state plan. Such activities include, but are not limited to:

Assisting Medi-Cal eligible children in identifying and understanding their health needs in order to secure and utilize treatment and health maintenance services covered by Medi-Cal;

Facilitating the Medi-Cal eligibility application, by explaining the Medi-Cal eligibility rules and the eligibility process to parents/guardians of prospectively eligible children; assisting such applicants to fill out the eligibility applications;

gathering information related to the application and eligibility determination or redetermination from the client, including resource information and third party liability information, as a prelude to submitting a formal Medi-Cal application to the CWD; providing necessary forms and packaging all forms in preparation for the Medi-Cal eligibility determination;

Development, implementation and management of care plans for Medi-Cal eligible children for their health-related needs covered by Medi-Cal;

Referrals to other agencies and programs in order to meet the Medi-Cal covered health care needs of Medi-Cal eligible clients;

Statistical reporting;

Outreach activities to Medi-Cal eligibles or potential eligibles to communicate about available Medi-Cal services and programs; and

Liaison activities with Medi-Cal providers to facilitate case planning.

CHILD WELFARE SERVICES & FOSTER CARE PROGRAMS

L. <u>Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project (CAP)</u>

To meet the terms and conditions of the Title IV-E Child Welfare Waiver CAP, the two participating counties, Alameda and Los Angeles, will be allowed flexible use of federal and State capped allocations to provide services for children and families. Program Codes (PC) 701 and 702 have been established to capture these costs.

Time Study Instructions:

County Welfare Department

This new program code will be used for the claiming of services under the CAP by the two participating counties, Alameda and Los Angeles. **Only Alameda and Los Angeles are approved to use this code.** It includes any activities related to providing social services to the child, the child's family or foster family but is not limited to:

Providing counseling to improve or remedy personal problems, behaviors or home conditions, allowing flexible use of Title IV-E federal and State funding capped allocations to provide services for children and families.

Providing treatment to improve or remedy personal problems, behaviors or home conditions allowing flexible use of Title IV-E federal and State funding capped allocations to provide services for children and families.

Providing counseling for clients and significant others to alleviate identified problems and to implement the service plan, including negotiating, mediating, and participating in problem solving.

Administrative costs associated with training, licensing and State Automated Child Welfare Information System (SACWIS) are excluded from the project and should be claimed using existing program codes.

Claiming Instructions:

Effective with the September 2007 quarter, CAP activities are to be claimed to PC 701.

PC	701	IV-E Waiver Services
PIN	701003	Transportation
PIN	701031	Contracted Activities
PIN	701060	Direct Service Delivery
PIN	701066	Personal Service: ESC-County Operated
PIN	701067	Operating Cost: ESC-County Operated
PIN	701068	Direct Costs
PIN	701088	Operating Cost – Travel
PIN	701089	Operating Cost – Space
PIN	701090	Operating Cost – Other Operating
PIN	701091	Operating Cost – POS
PIN	701092	Casework OT/CTO Costs
PIN	701093	Support Staff – OT/CTO Costs
PIN	701094	Start Up/Nonrecurring Costs

Costs will be funded at 50/35/0/15 (Federal/State/Health/County).

County Probation Officers

This new program code will be used by county probation agencies for the claiming of services under the CAP by the two participating counties, Alameda and Los Angeles.

Only Alameda and Los Angeles are approved to use this code. It includes any activities related to providing social services to the child, the child's family or foster family but is not limited to:

Providing counseling to improve or remedy personal problems, behaviors or home conditions, allowing flexible use of Title IV-E federal and State funding capped allocations to provide services for children and families.

Providing treatment to improve or remedy personal problems, behaviors or home conditions allowing flexible use of Title IV-E federal and State funding capped allocations to provide services for children and families.

Providing counseling for clients and significant others to alleviate identified problems and to implement the service plan, including negotiating, mediating, and participating in problem solving.

Administrative costs associated with training, licensing and State Automated Child Welfare Information System (SACWIS) are excluded from the project and should be claimed using existing program codes.

Claiming Instructions

Effective with the September 2007 quarter, county probation CAP activities are to be

claimed to PC 702.

PC		IV-E Waiver – Probation
PIN	702059	Probation Expense

Costs will be funded at 50/0/0/50 (Federal/State/Health/County).

II. CalWORKs

A. Safety Net

Retroactive to the September 2007 quarter, the sharing ratio for PC 614, CalWORKs Eligibility will remain unchanged at 89/11/00/00 (Federal/State/Health/County). The sharing ratio for this PC is needed to identify and appropriately fund the CalWORKs safety net population with State General Funds. Eleven percent represents the projected safety net caseload for State Fiscal Year (SFY) 2007-08.

III. OTHER PUBLIC WELFARE, Program Code Descriptions

A. CODE 3501 RRP MEDICAL

The code description has been revised to remove the ineligible individuals. See changes below:

Includes RRP Medically Needy Only (MNO) refugees, refugee children less than 21 years of age, pregnant refugee women, and refugees residing in an ICF/SNF.

IV. CHILD CARE

No changes.

V. NON-WELFARE

No changes.

VI. GENERAL

A. Indirect Cost Rates (ICRs)

CDSS has developed ICRs for use by counties during SFY 2007-08 (please see Attachment). ICRs are used to identify overhead costs associated with support staff who perform activities for non-welfare programs with no equivalent casework hours.

CDSS County Allocations Unit develops ICRs based on actual indirect costs (i.e., Travel, Space, Space – CCAP, Other Operating Costs, Public Agencies CCAP, and Public/Private Agencies Direct Billed) that were reported as generic for each county for the four quarters of SFY 2006-07. The totals are divided by the total direct salary and benefit costs (caseworker), administrative/clerical support and electronic data processing [EDP] staff salaries and benefits). The resulting percentages are each county's individual ICR.

CWDs have the option of either using the predetermined ICR developed by CDSS or developing an ICR specific to allocable support staff. An ICR developed by a CWD must be developed in accordance with "A Guide for State, Local and Indian Tribal Government-Cost Principles and Procedures for Developing Cost Allocation Plans and Indirect Cost Rates for Agreements with the Federal Government" (ASMB C-10).

ICRs are applied to the salaries and benefits of support staff performing activities for non-welfare programs only. The salaries and benefits plus overhead are reported as Direct Costs on the CEC using Program Identifier Number (PIN) 805068 (non-welfare Programs) or PIN 806068 (non-welfare Programs-Non EDP). Counties are reminded that non-welfare activities must be reported in the non-welfare function, which will draw down associated overhead through the CEC based on the time study hours of caseworkers performing the non-welfare activity.

Counties having any questions regarding this CFL should use the fiscal.systems@dss.ca.gov e-mail address to make any related inquiries.

Sincerely,

Original signed by Douglas D. Park

DOUGLAS D. PARK, Chief Fiscal Systems and Accounting Branch

c: CWDA Attachment

FY 07/08 INDIRECT COST RATE (ICR)

Data from FY 05/06 County Expense Claims

COUNTIES	FY 07/08 ICR		
ALAMEDA	0.28	SAN BENITO	0.32
ALPINE	0.45	SAN BERNARDINO	0.21
AMADOR	0.25	SAN DIEGO	0.21
BUTTE	0.16	SAN FRANCISCO	0.28
CALAVERAS	0.34	SAN JOAQUIN	0.22
COLUSA	0.25	SAN LUIS OBISPO	0.23
CONTRA COSTA	0.32	SAN MATEO	0.32
DEL NORTE	0.28	SANTA BARBARA	0.22
EL DORADO	0.22	SANTA CLARA	0.28
FRESNO	0.23	SANTA CRUZ	0.23
GLENN	0.27	SHASTA	0.19
HUMBOLDT	0.30	SIERRA	0.32
IMPERIAL	0.24	SISKIYOU	0.27
INYO	0.23	SOLANO	0.36
KERN	0.20	SONOMA	0.18
KINGS	0.20	STANISLAUS	0.20
LAKE	0.21	SUTTER	0.23
LASSEN	0.30	TEHAMA	0.31
LOS ANGELES DPS	0.24	TRINITY	0.34
MADERA	0.24	TULARE	0.44
MARIN	0.34	TUOLUMNE	0.43
MARIPOSA	0.38	VENTURA	0.27
MENDOCINO	0.21	YOLO	0.26
MERCED	0.15	YUBA	0.20
MODOC	0.35	LOS ANGELES DCS	0.29
MONO	0.37	SAC-DHHS-CHILD	0.39
MONTEREY	0.23	SAC-DHHS-ADULT	0.42
NAPA	0.32	SMATEO DP AGING	0.24
NEVADA	0.32	PLACER-ASOC	0.35
ORANGE	0.22		
PLACER	0.52	TOTALS	0.25
PLUMAS	0.50		
RIVERSIDE	0.16		
SACRAMENTO-DHA	0.33		

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES FISCAL SYSTEMS BUREAU

PROGRAM CODE DESCRIPTIONS

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SECTION I SOCIAL SERVICES FUNCTION PROGRAM CODE DESCRIPTION 12/07

GENERAL FUNCTION DEFINITION

Any activity related to achieving or maintaining economic self growth to prevent, reduce, or eliminate dependency; preventing or remedying neglect, abuse, or exploitation of children and adults; preserving, rehabilitating or reuniting families; preventing or reducing inappropriate institutional care by providing for community-based care, homebased care, or other forms of less intensive care; and providing services to individuals in institutions.

TIME STUDY STAFF

Staff performing the activities listed below is required to record time to the Social Services programs. Staff who are not listed must obtain prior authorization from CDSS to record casework time to Social Services programs.

Caseworkers performing social services activities specified in the program descriptions below;

Staff performing adoptions and appeals activities; and First-line supervisors of the staff listed in A and B above.

The criteria to be considered Skilled Professional Medical Personnel (SPMP) are as follows:

Must have completed a two-year or longer program leading to an academic degree or certificate in a medically related profession;

Must possess a medical license or certificate issued by a recognized national or state medical licensure or certifying organization or a degree in a medical field issued by a college or university certified by a professional medical organization (e.g., registered nurse);

Must be in a position that requires their professional medical knowledge and skills as evidenced by position descriptions, job announcements, or job classifications; and

Must be CWD or other county agency staff contracted to perform allowable activities.

The services rendered by a SPMP must be to a Medi-Cal eligible individual in order to be reimbursed at the enhanced 75% federal financial participation level.

NOTE: "Caseworkers" are CWD staff who perform activities that benefit public assistance recipients. Caseworker activities may include any of the following: 1) case management; 2) the determination of eligibility for grants and services; 3) grant maintenance; 4) needs assessment; 5) arranging for and providing employment training services or social services; and 6) welfare fraud investigations. See Manual of Polices and Procedures (MPP) Section 25-810.4 entitled "Nonallocable Activities that states: 'This is a provision shown on each time study to record time for the activities that are not considered either Social Services or Eligibility functions. An example would be the time a social worker or eligibility worker spends on administrative duties.'

ADOPTIONS:

CODE 1171 ADOPTIONS - CASE MANAGEMENT

Includes activities directed to a child in adoptive placement or activities immediately preceding an adoptive placement, such as a child adoptability assessment, adoptive applicant screening, home study, Adoptions Assistance Program assessment, and adoption backlog. Use for activities generally supportive of the county's adoption program. (See CWS Case Management examples)

Training activities include the following for all elements of the Adoptions Program:

Preparing for or providing training to CWD staff;

Participating in continuing training received after induction training;

Participating in short-term training provided by outside agencies;

Participating in training conferences; and

Providing training to current or prospective adoptive parents or to adoption agency staff.

CODE 1181 ADOPTIONS INDEPENDENT/NONFED

Includes activities directed to a child in adoptive placement or activities involved in an adoptive placement, such as a child adoptability assessment, adoptive applicant screening, and home study.

ADULT PROTECTIVE SERVICES (APS):

CODE 5691 APS-EMERGENCY RESPONSE

Includes time spent performing activities in response to all reports or referrals alleging abuse, neglect, or exploitation of elder or dependent adult clients who meet APS criteria. Public Guardians (PG), who are employees of the CWD, may time study to this code only if the PG is responsible for performing APS activities or for activities that would normally be the responsibility of APS workers. APS clients are defined as only elder or dependent adults who are unable to protect their own interests; harmed or threatened with harm; caused physical or mental injury due to action or inaction of another person or as a result of ignorance, illiteracy, incompetence, mental limitation, substance abuse or poor health, lacking in adequate food, shelter, or clothing; exploited for their income and resources; or deprived of entitlements due them. Allowable response activities may include, but are not limited to:

Immediate in-person face-to-face response for purposes of providing immediate intake or intervention to new reports of immediate lifethreatening circumstances or imminent danger to an elder or dependent adult or to crisis in existing cases;

Implementing and operating a 24-hour APS response program; Evaluating and investigating reports of abuse, neglect, or exploitation, including reports on the 24-hour hotline.

Investigation activities include, but are not limited to:

- A systematic inquiry to determine the validity of a report of elder or dependent adult abuse;
- o Gathering of information to develop an intervention plan to address any condition that places the elder or dependent adult at risk:
- o Interviews with the elder or dependent adult and with other persons including other members of the family or household, service providers or other members of the multidisciplinary team

Determining client risk for response by screening in-coming calls, and when necessary, through face-to-face meetings or during home visits; Determining response needs;

Providing social work activities designed to remedy or prevent situations of abuse, neglect, or exploitation;

Arranging for the provision of food, housing, medical, counseling, emergency shelter, and in-home temporary services, as needed; Providing crisis intervention;

Assisting clients voluntarily into shelter in response to emergencies; Gathering documentation of abuse for law enforcement agencies during an investigation, as requested;

Documenting client activities in the case file;

Locating a friend or relative to act as a collateral contact or a support system;

Processing court petitions and declarations for Conservatorship; and Preparing written reports and assessments.

CODE 5701 APS - CASE MANAGEMENT

Includes time spent performing case management activities during the period following the initial investigation and response to reports involving abuse, neglect, or exploitation of elder or dependent adult clients who meet the criteria for APS (see definition in Code 5691). Public Guardians (PG), who are CWD employees, may time study to this code only if the PG is responsible for performing APS activities or is responsible for activities that would normally be the responsibility of APS workers. Allowable activities are those necessary to bring about changes in the lives of victims and to provide a safety net to enable victims to protect themselves in the future.

Case management activities are those performed after the initial response and investigation of reports of abuse. Such activities may include, but are not limited to:

Further investigation of alleged abuse after the case has been established and subsequent reporting of protection issues including, but not limited to, social, medical, environmental, physical, emotional, socio-economic, or developmental issues;

Investigation activities including, but not limited to:

- A systematic inquiry to determine the validity of a report of elder or dependent adult abuse;
- Gathering of information to develop an intervention plan to address any condition that places the elder or dependent adult at risk:

 Interviews with the elder or dependent adult and with other persons including other members of the family or household, service providers or other members of the multidisciplinary team.

Assessing the client's concerns and needs as well as concerns and needs of other members of the family and household as it pertains to the report, occurrence, prevention, or remediation of adult abuse or neglect;

Identification of the client's strengths, problems, and limitations; Establishing and updating a service plan to alleviate identified problems and coordinating with other agencies that may include:

- o Identification of problems to be alleviated;
- Time-limited objectives based on problems and strengths identified in the assessment;
- The services to be provided and activities to meet service plan objectives and goals;
- Description of how the client will be stabilized and linked with community services;
- Provisions for monitoring, follow-up, and reassessment to determine effectiveness of the service plan;
- o Brokering case management services with peripheral agencies;
- Money management;
- Voluntary placement;
- Removal of client from their home;
- Family issues, including stress, conflict, management, and caregiving issues; and
- Conservatorship in-home services needs.

Providing counseling for clients and significant others to alleviate identified problems and to implement the service plan, including negotiating, mediating, and participating in problem solving;

Training for law enforcement, banking officials, etc.;

Arranging for food, housing, medical, and counseling services, as needed;

Conducting Conservatorship investigations when appropriate, and preparing petitions for Conservatorship and;

Providing 24-hour shelter, respite care for providers, in-home temporary services for clients whose caregivers have left the home or been arrested.

CODE 5711 APS - SPMP RESPONSE

Includes time spent by SPMP staff who are not claiming these same activities through medi-Cal Administrtive Activities (MAA) or Targeted Case Mangement (TCM) performing eligible administrative activities in response to all reports or referrals alleging abuse, neglect, or exploitation of Medi-Cal eligible elder or dependent adults who meet eligibility criteria for APS (see definition in Code 5691). Activities may only be claimed, at the level of SPMP, if the worker performing the activity meets the requirements to be an SPMP. Activities are limited to those necessary to help clients gain-access to medical services covered under the State's Medi-Cal plan, in order to reduce the risk of poor health outcomes as specified in the California Department of Health Services' (DHS) MAA Guides and Examples. Allowable response activities by SPMP staff include those program planning and policy development activities to include:

Liaison on medical aspects of the program with providers of **Medi-Cal** services and other agencies that provide medical care **covered by the Medi-Cal program**;

Furnishing of expert medical opinions in order to facilitate access to Medi-Cal services;

Participating in medical review;

Assessing, through case management activities, the necessity for **and** the adequacy of medical care and services **provided by Medi-Cal providers**;

Developing an interagency referral and tracking system to expedite access to Medi-Cal services;

Developing and reviewing policies and procedures for coordinating medical services for geriatric patients with Medi-Cal providers; and Consult with medical providers on Medi-Cal policies and procedures to ensure clients receive the Medi-Cal services for which they are eligible.

CODE 5721 APS - SPMP CASE MANAGEMENT

These activities will be performed by a SPMP qualified person and only if the SPMP is not claiming for these activities under MAA or TCM. Includes selected activities to help eligible elder or dependent adult clients who meet the criteria for APS (see definition in Code 5691), and who are Medi-Cal eligible, to gain access to to health related services covered under the State's Medi-Cal plan, in order to reduce their risk of poor health outcomes. These activities include, but are not limited to, development, implementation and management of health related service

plans; referrals to other agencies and programs for assessment, evaluation or treatment of health related needs; interagency coordination and liaison with providers to health-related services to improve the service delivery system; and in-depth informing and anticipatory guidance about causes, prevention, and remediation of health related needs; completing, updating, and disseminating any paperwork necessary to completion of these activities; and receiving or providing health related training.

- Development, implementation, and management of Medi-Cal service plans;
- Referral to other agencies and programs for assessment, evaluation or treatment covered under the State's Medi-Cal plan;
- Interagency coordination and liaison with Medi-Cal providers to improve the service delivery system;
- Completing, updating, and disseminating any paperwork necessary to complete these activities; and
- Receiving or providing training related to these activities.

NOTE: If a person not qualifying as SPMP performs these activities record the time to Program 570.—SPMP performing non-enhanced health related activities also-record this time to PCrogram 570.

- Time-limited objectives based on problems and strengths identified in the assessment:
- The services to be provided and activities to be performed in order to meet service plan objectives and goals;
- Description of how the client will be stabilized and linked with community services;
- Provisions for monitoring, follow-up, and reassessment to determine effectiveness of the service plan;
- Voluntary removal of clients from their home;
- Family issues, including stress, conflict, management, and caregiving issues;
- Conservatorship needs.
- Providing counseling for clients and significant others to alleviate identified problems and to implement the health service plan, including negotiating, mediating, and participating in problem solving;
- Stabilizing and linking with community services for treatment of health related needs, and
- Arranging for food, housing, medical, and counseling services, as needed.

Developing and monitoring progress on time-limited objectives, based on problems and strengths identified in the assessment;

Monitoring the Medi-Cal plan covered services to be provided and activities to be performed in order to meet Medi-Cal service plan objectives and goals;

Providing description of how the client will be stabilized and linked with services covered by the Medi-Cal plan;

Monitoring, follow-up, and reassessment to determine effectiveness of the Medi-Cal service plan.

Assisting clients and significant others to implement the Medi-Cal service plan;

Stabilizing and linking with community Medi-Cal services for treatment of health related needs; and

Arranging for medical, mental health counseling, transportation, and other services covered by the Medi-Cal state plan, as needed.

CODE 5731 APS – HR RESPONSE

Includes time spent performing activities necessary to assist APS clients in gaining access health-related to services covered by the State Medi-Cal plan in order to reduce risk of poor health outcomes in response to reports or referrals alleging abuse, neglect, or exploitation of Medi-Cal eligible adults who meet the eligibility criteria for APS (see definition in Code 5691). Public Guardian's (PG), who are CWD employees, may time study to this code only if the PG is responsible for performing APS activities or for activities which would normally be the responsibility of APS workers, and only if the PG is not claiming for this activity under Medi-Cal Administrative Activities (MAA) or Targeted Case Management (TCM). Allowable activities are limited to those necessary to help clients gain access to medical services covered by the State Medi-Cal plan in order to reduce risk of poor health outcomes. Allowable health-related-response activities include, but are not limited to:

- Immediate in-person face-to-face response for purposes of providing immediate intake or intervention to new reports of immediate lifethreatening circumstances or imminent danger to an elder or dependent adult or to crisis in existing cases where activities address the client's health needs;
- Evaluating the need for a health-related service plan;
- Evaluating and investigating reports of abuse, neglect, or exploitation, including reports on the 24-hour hotline where activities address the client's health needs. Health-related activities include, but are not limited to:
 - Gathering of information to develop an intervention plan to address any condition that places the elder or dependent adult at risk of a poor health outcome;

- Determining immediate health needs;
- Providing health related services to remedy or prevent situations of abuse, neglect, or exploitation;
- Arranging for the provision of food, housing, medical, counseling, emergency shelter, and in-home temporary services, to reduce the risk of poor health outcomes, such as;
 - Providing crisis intervention;
 - Assisting clients into voluntary shelter in response to healthrelated emergencies;
 - Locating a friend or relative to act as a collateral contact or a support system for health-related needs; and
 - Preparing written health-related reports and assessments.

Addressing clients' needs for services covered by the State Medi-Cal plan and evaluating the need for a Medi-Cal service plan: (1) when providing immediate intake or intervention to new reports of immediate life-threatening circumstances or imminent danger to an elder or dependent adult or to crisis in existing cases; or (2) when evaluating and investigating reports of abuse, neglect, or exploitation, including reports on the 24-hour hotline.

Allowable health-related activities include, but are not limited to:

Gathering information to develop an intervention plan involving Medi-Cal services to address any condition that places the elder or dependent adult at risk of a poor health outcome; Determining immediate health needs that may be covered by the State Medi-Cal plan; and Preparing written reports and assessments.

CODE 5741 APS – HR CASE MANAGEMENT

Includes time spent performing health-related case management activities involving State Medi-Cal plan covered services during the period following initial investigation and response to reports involving abuse, neglect, or exploitation of Medi-Cal eligible elder or dependent adult clients who meet the criteria for APS (definition in Code 5691). Public Guardian's (PG), who are CWD employees, may time study to this code only if the PG is responsible for performing APS activities or is responsible for activities that would normally be the responsibility of APS workers and only if the PG is not otherwise claiming these activities under Medi-

Cal Administrative Activities (MAA) or Targeted Case Management (TCM). Allowable activities are those necessary to help clients gain access to medical services covered by the State Medi-Cal plan, including psychological counseling and transportation to medical and mental health appointments, in order to reduce risk of poor health outcomes, to provide a safety net to enable victims to protect themselves in the future and bring about changes in the lives of victims.

Health-related case management activities are those performed after the initial response and investigation of reports of abuse. Such health-related case management activities may include, but are not limited to:

 Further investigation of alleged abuse after case has been established, and subsequent reporting of health-related issues, including, but not limited to, social, medical, environmental, physical, emotional, socioeconomic, and developmental issues;

Gathering of information to develop an intervention plan **involving Medi-Cal state plan covered services** to address any health-related condition that places the elder or dependent adult at risk of a poor health outcome;

Assessing client's health-related needs, and the concerns and needs of other members of the family and household as it pertains to the health-related case management reportin order to arrange State Medi-Cal plan covered services for the client;

Analyzing health problems and strengths of the client, and family, or household so as to arrange the most useful combination of State Medi-Cal plan covered services for the client;

Establishing and updating a health-related service plan to alleviate identified problems **and**, coordinating with other agencies that may include **by**:

- Identification of health problems to be alleviated using Medi-Cal services:
- Inclusion of \(\pm\)time-limited objectives based on health problems and strengths identified in the assessment;
- Inclusion of The health-related services to be provided by Medi-Cal and activities to be performed in order action steps to meet the health-related service plan objectives and goals;
- Description of how the client will be stabilized and linked with community services covered by the State Medi-Cal plan;
- Provisions for monitoring, follow-up, and reassessment to determine effectiveness of the health-related service plan;
- Voluntary removal of clients from their at-risk environment or home;

- Inclusion of Ffamily issues, including stress, conflict, management, and health-related care-giving issuesrelated to health-related care-giving issues;
- Conservatorship needsProviding counseling for clients and significant others to facilitate implementation of the Medi-Cal service plan; and
- Stabilizing the client and linking the client with community services for treatment of health-related medical and psychological needs, and
- Arranging for food, housing, medical, and counseling services, to alleviate poor health outcomes as needed.

CHILD WELFARE SERVICES (CWS):

CASE MANAGEMENT

Case Management means a service-funded activity performed by a social worker that includes assessing the child's/family needs, developing the case plan, monitoring progress in achieving case plan objectives, and ensuring that all services specified in the case plan are provided. MPP 31-002(c) (1).

CASE PLAN

Case Plan means a written document that is developed based upon an assessment of the circumstances which required child welfare services intervention and that the social worker identifies a case plan goal, objectives to be achieved, specific services to be provided, and case management activities to be performed. MPP 31-002(c) (2).

PUBLIC LAW #96-272

Public Law #96-272 requires developing a case or services plan for a child including an initial plan and a comprehensive reunification plan. Additional reference: Public Law #101-239.

COUNSELING

Counseling means assisting the child and his/her family to analyze and better understand the situation; select methods of problem-solving; identifying goals; and exploring alternative behavior (Manual of Policies and Procedures [MPP] Section 31-002(16).

CODE 1381 CWS - SPMP

These activities will be performed by a SPMP qualified person. Includes selected activities to help children who are Medi-Cal eligible, including children in foster care and Seriously Emotionally Disabled (SED) children, to gain access to health related services covered by the State Medi-Cal plan in order to reduce their risk of poor health outcomes. These activities must require the use of medical expertise and include, but are not limited to, development, implementation and management of health related service plans; referrals to other agencies and programs for assessment, evaluation or treatment of health related needs; interagency coordination and liaison with providers to health-related services to improve the service delivery system, and in-depth informing and anticipatory guidance about causes, prevention, and remediation of health related needs; completing, updating, and disseminating any paperwork necessary to completion of these activities; and receiving or providing health related training.

Development, implementation and management of health related service plans for Medi-Cal covered services:

Referrals to other agencies and programs covered by Medi-Cal for assessment, evaluation or treatment;

Interagency coordination and liaison with Medi-Cal providers to improve the Medi-Cal service delivery system;

In-depth informing and anticipatory guidance about causes, prevention, and remediation of health conditions covered by Medi-Cal:

Completing, updating, and disseminating any paperwork necessary to completion of these activities; and Receiving or providing training related to these activities

NOTE: If a person not qualifying as *SPMP performs these activities* record the time to Program 144.—SPMP performing non-enhanced health related activities also-record this time to Program **Code (PC)** 144.

CODE 1501 EARLY, PERIODIC, SCREENING, DIAGNOSIS, AND TREATMENT (EPSDT)

Includes support activities for EPSDT, such as consultation, outreach, and follow-up, when performed by an EPSDT unit under contract to the local Child Health and Disability Prevention Agency. This does not include information and referral activities performed by eligibility workers.

CWS - PREPARATION FOR ELIGIBILITY DETERMINATION:

CODE 1431 CWS - PRE-PLACEMENT PROGRAM

CODE 1432 CWS - FAMILY MAINTENANCE PROGRAM

CODE 1433 CWS - FAMILY REUNIFICATION PROGRAM

CODE 1434 CWS - PERMANENT PLACEMENT PROGRAM

Includes activities related to preparing for determination of a child's eligibility for the Foster Care or Adoption Assistance Program; not actual eligibility determination. For example:

Gathering and verifying information used by the Eligibility Worker in regard to income, parental deprivation, resources, social security numbers, birth certificates, and child support;

Filling out and processing necessary forms;

Querying systems, records, and other staff for current AFDC status; Making court recommendations for support, requesting such court action and completing court orders;

Preparing and participating in program audits; and Travel time associated with any of the above activities.

CWS - HR FOR MEDI-CAL ELIGIBLE CHILDREN:

CODE 1441 CWS - PRE-PLACEMENT PROGRAM
CODE 1442 CWS - FAMILY MAINTENANCE PROGRAM
CODE 1443 CWS - FAMILY REUNIFICATION PROGRAM
CODE 1444 CWS - PERMANENT PLACEMENT PROGRAM

Any activity to help children who are Medi-Cal eligible, or potentially eligible, including all foster and SED-children, gain access to medical services covered by the State Medi-Cal plan in order and/or-to attain or maintain a favorable physical or mental health condition-by assisting them in identifying and understanding their health needs or securing and utilizing treatment and health maintenance services. These activities will not duplicate TCM activities provided through the state plan. Such activities include, but are not limited to, performing, assisting the eligibility worker in, or assisting the parent of the child applying for determination or documentation of Medi-Cal eligibility for children; development, implementation and management of health plans; referrals to other agencies and programs for health needs; statistical reporting; outreach activities to Medi-Cal eligible or potential eligibles about available services and programs; and liaison activities with medical providers.:

Assisting Medi-Cal eligible children in identifying and understanding their health needs in order to secure and utilize treatment and health maintenance services covered by Medi-Cal;

Facilitating the Medi-Cal eligibility application, by explaining the Medi-Cal eligibility rules and the eligibility process to parents/guardian of prospectively eligible children; assisting such applicants to fill out the eligibility applications; gathering information related to the application and eligibility determination or redetermination from the client, including resource information and third party liability information, as a prelude to submitting a formal Medi-Cal application to the county welfare department; providing necessary forms and packaging all forms in preparation for the Medi-Cal eligibility determination.

Development, implementation and management of care plans for Medi-Cal eligible children for their health-related needs covered by Medi-Cal;

Referrals to other agencies and programs in order to meet the Medi-Cal covered health care needs of Medi-Cal eligible clients; Statistical reporting;

Outreach activities to Medi-Cal eligibles or potential eligibles to communicate about available Medi-Cal services and programs; and

Liaison activities with Medi-Cal providers to facilitate case planning.

CODE 1456 CWS - TRAINING

This Program Code (PC) for CWS Training, at the enhanced rate of 75 percent, is for people employed or preparing for employment in all classes of positions by the State or local agency administering the program. Training is limited to topics necessary for performing the following specific foster care program administrative functions:

Referral to services

Case plan development

Case Management and Supervision

Preparation for and participation in judicial determinations

Placement of the child

Case reviews

Recruitment and licensing of foster homes and institutions and,

Eligibility determination

CODE 1465 CWS - SERVICES

The individual child's case plan shall be the basic guideline for the provision of child welfare services. Services include, but are not limited to, the following:

Providing counseling or other therapeutic services to a child or to the child's family in order to ameliorate or remedy personal problems, behaviors, or home conditions, as referenced;

Providing homemaking instruction, through discussion and example when parent/guardian functioning can be improved by teaching more effective child care skills and home maintenance. MPP 31-002(t)(1); Parenting training.

CWS - COURT-RELATED ACTIVITIES:

CODE 1471 CWS - PRE-PLACEMENT PROGRAM
CODE 1472 CWS - FAMILY MAINTENANCE PROGRAM
CODE 1473 CWS - FAMILY REUNIFICATION PROGRAM
CODE 1474 CWS - PERMANENT PLACEMENT PROGRAM

Any court-related activity directed to the placement of a child:

Preparing for and/or participating in any judicial determination regarding a child;

Preparing or filing court documents including petitions, motion for extension, termination of dependencies or a custodial order; Any court appearance where the local agency is seeking custody of a child, or the status of a child in the county's custody, which is being reviewed;

Paperwork and contacts related to judicial activity; and Travel time associated with the above activities.

CWS - BEST PRACTICE:

CODE 0321 CWSOIP/SCTF/COHORT 1

Includes any or all activities required to implement the Redesign objectives (modules) as described in the benchmarks within the County Implementation Plan. These include activities for planning, development, and implementation of community partnerships with CWS, community development with CWS, new intake structure (differential response, safety, risk and protective capacity assessment, etc.), permanency activities that restore families, rebuild families, return children home to their families, youth development and transition to adulthood activities, workforce development, interagency coordination and integration, fiscal coordination and maximization for interagency and CWS efforts, and accountability activities related to the Outcomes and Accountability System

CWS - CASE MANAGEMENT:

CODE 0371 CWSOIP/COHORT 1

Includes any or all activities required to implement the System Improvement Plans. These include activities for planning, development, and implementation of community partnerships with CWS, community development with CWS, and new intake structure (differential response, safety, risk and protective capacity assessment, etc). Additional administrative activities include those for planning, development, and implementation of the Standardized Safety Assessment System.

CODE 0591 CWSOIP/NONFED SGF/COHORT 1

These activities are required to implement the county Improvement Plans and include services provided to a child and/or the child's family. The range of service activities shall include, but not be limited to, the following: Emergency/Temporary in-home caretakers; therapeutic day services; teaching and demonstrating to homemakers; parenting training services and respite care.

CODE 0771 CHILD WELFARE SERVICE (CWS) BASIC NONFEDERAL

Includes activities performed on behalf of non-federally Title IV-E eligible child, the child's family or the child's foster family, and non-federal eligible activities on behalf of federally eligible and non-federally eligible children. This includes all services: documentation of services in the case plan, investigative activities and case management activities for children, when these activities do not meet the Title IV-E requirements and are not specific to the CWSOIP. The range of services and activities shall include, but not be limited to the following: prevention and early intervention services, permanency and youth services, and other activities to better serve children and families that are not eligible for Title IV-E funding and cannot be claimed to PC 146 – CWS – Services/Non-Federal.

CODE 0721 CWSOIP/SCTF

The purpose of State Children's Trust Fund (SCTF) is to fund child abuse and neglect prevention and intervention programs. PC 072 is established to claim costs funded with SCTF only and will not draw down any Title IV-E funds. Allowable activities for Time Study Code 0721 include but are not limited to the following:

Development of a public-private partnership by encouraging consistent outreach to the private foundation and corporate community.

Public awareness activities shall include, but not be limited to, the production of public service announcements, posters pamphlets, booklets, videos, and other media tools.

Research and demonstration projects that explore the nature and incidence and the development of long-term solutions to the problem of child abuse.

Augment training, e.g., training for collaborative partners.

CODE 1481 CWS - PRE-PLACEMENT PROGRAM

CODE 1482 CWS - FAMILY MAINTENANCE PROGRAM

CODE 1483 CWS - FAMILY REUNIFICATION PROGRAM

CODE 1484 CWS - PERMANENT PLACEMENT PROGRAM

Includes activities directed to a specific child when the child remains in the home or in out-of-home placement, including relative placements and emergency shelter care. Included is the development of the case plan, which indicates specific services necessary to meet the protective needs of the child. The following are allowable activities:

Assessing child's/family's needs and developing a case plan as indicated in regulations;

Referrals to services when necessary;

Arranging for pre-placement visits;

Working with foster parents to prepare them to receive a child; Monitoring progress in meeting case plan objectives and updating the case plan;

Management and supervision of the case, participation in case conferences, permanency planning meetings, and administrative reviews;

Recruitment activities, developing and distributing resource material, consulting and coordinating with service providers and community based organizations;

Do not include court document preparation or petition filing - these are Code 147 (CWS-Court Related Activities).

Visits for non-group home foster care placements (i.e., relatives and foster family homes). See TSC 5771 for visits related to children in group home placements; and

Travel time associated with any of the above activities.

CODE 0071 RELATIVE/NONRELATIVE HOME APPROVAL PROCESS

Includes time spent assessing the relative/nonrelative caregivers suitability, performing criminal records checks, checking for prior child abuse/neglect allegations, and completing in-home safety inspections. Also includes time spent responding to relative concerns and other tasks related to the relative grievance procedure process.

CODE 3591 CWS - LIVE SCAN/CLETS BACKGROUND CHECKS

Includes activities associated with conducting CWS Live Scan/CLETS Background Checks, using Live Scan equipment to fingerprint foster parents and conducting searches through the Child Abuse Index, Federal Bureau of Investigation and California Department of Justice databases when processing background checks for criminal records of relative foster parents.

NOTE: Caseworkers performing activities associated with processing background checks when licensing non-relative foster parents should report their time to TSC 1551 (Licensing/Foster Family Home).

CODE 5231 SA/HIV INFANT-RECRUIT

Includes time spent performing Foster Parent recruitment activities for the Options for Recovery Program.

CODE 5441 CWS - MINOR PARENT INVESTIGATIONS (MPI) AB 908 (CHAPTER 307, STATUTES OF 1995)

This code has been established to capture social worker time spent performing in-person investigation activities for teen pregnancy disincentive requirements. Investigation activities include:

Completing an in-home investigation of a minor parent's allegation of risk of abuse/neglect and returning the CA 25s to the eligibility worker indicating the results of the investigation;

Completing an in-person assessment of the minor parent and his/her child(ren);

Developing a safety plan that will include MPS for the minor parent and his/her child(ren); and

Referrals of minor parent to other available services.

CODE 5561 CWS - MPS (AB 908)

Supportive services provided to parents and their child(ren) to assist them in creating a healthy and safe environment. MPS activities include: Provision of in-home based services, in-home visits, on-going

assessments of the minor parent and his/her child(ren), and referrals to appropriate community services.

COMMUNITY CARE LICENSING (CCL):

CODE 1551 FOSTER FAMILY LICENSING

Includes recruitment, study, certification, and licensing of foster family homes for children; re-certification, renewal, suspension, revocation, and complaint investigation actions affecting licensing; public information on out-of-home care programs and supporting participation of the public in such care; licensing information/data system activities; and travel related to any of these activities.

Includes the following training activities for the Foster Family Licensing Program:

Preparing and providing training to prospective foster parents on foster family home licensing requirements;

Participating in continuing training received after induction training; Participating in short term training provided by outside agencies; and Participating in training conferences.

CODE 1571 LICENSING/DAY CARE

Includes the provision of licensing requirements to facilitate the development of new family day care homes; evaluation and verification of the application, including the required on-site evaluation; renewal applications and site visit, if required; follow-up on complaints and deficiencies; and maintenance of a list of licensed family day care homes. Additional activities include:

Review facility records prior to visits;

Contact local resource and referral agencies for information about the facility;

Review staff and child records on site;

Interview children regarding facility conditions;

Interview staff regarding qualifications and training;

Provide licensees with copies of licensing regulations and inform licensees about changes in licensing law and regulations since the last on-site visit:

Provide information about new community resources.

COUNTY SERVICES BLOCK GRANT (CSBG):

CODE 1131 CSBG - SPMP

Includes time spent by SPMP performing activities which require the expertise of a medical professional to help adult CSBG clients who are Medi-Cal eligible to gain access to health-related services covered by the State Medi-Cal plan in order to reduce their risk of poor health outcomes. These activities include program planning and policy development activities—as outlined in DHS' MAA Guides and Examples (see code 5711).

Liaison on medical aspects of the program with providers of Medi-Cal services and other agencies that provide medical care covered by the Medi-Cal program;

Furnishing of expert medical opinions in order to facilitate access to Medi-Cal services:

Assessing, through case management activities, the necessity for and the adequacy of medical care and services provided by Medi-Cal providers;

Developing an interagency referral and tracking system to expedite access to Medi-Cal services;

Developing and reviewing policies and procedures for coordinating medical services for geriatric patients with Medi-Cal providers; and

Consulting with medical providers on Medi-Cal policies and procedures to ensure clients receive the Medi-Cal services for which they are eligible.

CODE 1142 CSBG - HR

Includes time spent performing activities to help adult CSBG recipients, who are Medi-Cal eligible or potentially eligible, to-gain access to medical services covered under the State Medi-Cal plan in order to and attain and/or maintain a favorable physical or mental health condition by assisting the recipient in identifying and understanding their health needs. These activities include, but are not limited to:

This includes performing or assisting the eligibility worker in determination or documentation of the recipient's Medi-Cal eligibility; development, implementation and management of health plans; outreach activities to Medi-Cal eligible or potentially eligible persons about available

services and programs; providing assistance to eligible recipients to access needed health related services; and statistical reporting.

Assisting Medi-Cal recipients in identifying and understanding their health needs in order to secure and utilize treatment and health maintenance services covered by Medi-Cal;

Facilitating the Medi-Cal eligibility application;

Development, implementation and management of care plans for Medi-Cal eligible CSBG recipients for health-related needs covered by Medi-Cal;

Outreach activities to Medi-Cal eligible or potentially eligible persons about available services and programs covered by Medi-Cal:

Providing assistance to eligible recipients to access needed health services covered by the Medi-Cal state plan, including transporting and/or accompanying them to appointments, or arranging transportation; and Statistical reporting.

CODE 1151 CSBG

Includes time spent performing activities not eligible for Title XIX funding for adult CSBG recipients. This includes out-of-home care for adults and optional services funded under CSBG.

EMERGENCY ASSISTANCE (EA):

CODE 2231 EMERGENCY ASSISTANCE (EA) - FOSTER CARE (FC)-ELIGIBILITY

This program was previously entitled "Emergency Assistance (EA) Child Welfare Services (CWS) Eligibility". Includes eligibility determinations, screening for prior EA episodes, approvals, denials, authorization actions, and issuance of notices.

CODE 5131 EMERGENCY ASSISTANCE (EA) - ER APPLICATION COMPLETION

Includes time spent completing the EA-ER application. Time spent obtaining the parent's signature on the EA application may be included.

CODE 5132 EMERGENCY ASSISTANCE (EA) - ER TRAINING

Includes time spent preparing for and providing EA-ER training for staff.

CODE 5134 EMERGENCY ASSISTANCE - ER REFERRALS

Includes time spent receiving emergency referrals, assessing whether the referral is a child welfare services referral, completing the ER protocol, and investigating emergency allegations, including collateral contacts. This includes time spent closing those cases in which allegations are unfounded. For those cases that the allegations are not unfounded, it includes time spent in investigation activities, reporting to the California Department of Justice and noticing the parents regarding the temporary custody of the child.

FAMILY PRESERVATION PROGRAM (FPP):

CODE 1591 FAMILY PRESERVATION PROGRAM - SPMP

These activities **charged to this code must**—will be performed by a SPMP qualified person.

Includes selected activities to help children who are Medi-Cal eligible, including children in foster care and Seriously Emotionally Disabled (SED) children, to gain access to health related services covered by the State Medi-Cal plan in order to reduce their risk of poor health outcomes.

These activities require the use of medical expertise and include but

These activities **require the use of medical expertise and** include, but are not limited to:

development, implementation and management of health related service plans; referrals to other agencies and programs for assessment, evaluation or treatment of health related needs; interagency coordination and liaison with providers to health related services to improve the service delivery system, and in-depth informing and anticipatory guidance about causes, prevention and remediation of health related needs; completing updating and disseminating any paperwork necessary to completion of these activities; and receiving or providing health related training.

Development, implementation and management of Medi-Cal service plans;

Referrals to other agencies and programs which are Medi-Cal providers for assessment, evaluation or treatment covered by Medi-Cal:

Interagency coordination and liaison with Medi-Cal providers to improve the Medi-Cal delivery system;

In-depth informing and anticipatory guidance about causes, prevention and remediation of health conditions covered by Medical;

Completing updating and disseminating any paperwork necessary to complete these activities; and Receiving or providing training related to these activities.

NOTE: SPMP performing non-enhanced activities should use PC 1681.

CODE 1681 FAMILY PRESERVATION PROGRAM - HR

Any aActivitiesy to help children who are Medi-Cal eligible, including all foster and SED children, gain access to medical services covered by the State Medi-Cal plan in order to and/or to attain or maintain a favorable physical or mental health condition by assisting them in identifying and understanding their health needs or securing and utilizing treatment and health maintenance services. Such activities include, but are not limited to: performing assisting the eligibility worker in or assisting the parent of the child applying for determination or documentation of Medi-Cal eligibility for children; development, implementation and management of health plans; referrals to other agencies and programs for health needs; statistical reporting; outreach activities to Medi-Cal eligible or potentially eligible about available services and programs; and liaison activities with medical providers.

Assisting children and their caregivers in identifying and understanding the child's health needs in order to secure and utilize treatment and health maintenance services covered by Medi-Cal:

Facilitating Medi-Cal eligibility;

Development, implementation and management of care plans for coordinating Medi-Cal services;

Referrals to other agencies and programs covered by Medi-Cal providers;

Statistical reporting;

Outreach activities to Medi-Cal eligible or potentially eligible persons about available Medi-Cal services and programs; and Liaison activities with Medi-Cal providers.

CODE 1751 FAMILY PRESERVATION PROGRAM - SERVICES/NONFEDERAL

Services include, but are not limited to, counseling, parenting, Respite, day treatment, transportation and homemaking.

CODE 1771 FAMILY PRESERVATION PROGRAM- PRE-PLACEMENT PREVENTION CASE MANAGEMENT

Includes activities directed to a specific child when the child remains in the home to prevent out-of-home placement. This code does not include time associated with the delivery of or documentation of family preservation preventative services. Included with this code is the development of the

case plan which indicates specific referral to services necessary to meet the protective needs of the child. Following are allowable case management activities:

Assessing needs and developing a case plan as required Referrals for services

Monitoring the case plan

Management and supervision of the case

FPP Training is for people employed or preparing for employment in all classes of positions by the State or local agency administering the program. Training includes the administration of the foster care program such as referral to services, case plan development, case management and supervision.

CODE 1791 FAMILY PRESERVATION PROGRAM - CASE MANAGEMENT: FOSTER CARE

Includes activities directed to a specific child when the child Remains in the home or in out-of-home placement. Includes development of the case plan, which indicates specific services necessary to meet the protective needs of the child. Activities include but are not limited to:

Assessing the needs and developing a case plan as required Referrals for services
Monitoring the case plan
Management and supervision of the case
Working with foster parents to receive the child and,
Arranging pre-placement visits

FPP Training is for people employed or preparing for employment in all classes of positions by the State or local agency administering the program. Training includes the administration of the foster care program such as referral to services, case plan development, case management and supervision.

KINSHIP SUPPORT SERVICES (STATE PROGRAM)

CODE 5821 KINSHIP SERVICES

Activities include the implementation and expansion of existing Kinship Support Services Programs through AB 1193 (Chapter 794, Statutes of 1997). The programs provide community based family support services to relative caregivers and children placed in their homes by juvenile court

and those at risk of dependency or delinquency. Also provides post permanency services to relative caregivers who become legal guardians or adoptive parents of formerly dependent children.

PROMOTING SAFE AND STABLE FAMILIES (PSSF):

CODE 5151 PSSF - FAMILY PRESERVATION SERVICES

Activities include, but are not limited to, services designed to help families alleviate crises that might lead to out-of-home placement of children; services that maintain safety of children in their home; services that support families preparing to reunite or to adopt a child; information and referral services.

CODE 5161 PSSF - FAMILY SUPPORT SERVICES

Family support activities include, but are not limited to, home visitation, parent education, information and referral services, family counseling services, respite care for parents and other caregivers, early development of children to assess the needs of children, literacy services, and health education for children and parents.

CODE 6751 PSSF - ADOPTION PROMOTION AND SUPPORT

Includes pre-and post-adoptive services designed to expedite the adoption process and support adoptive families; identifying prospective adoptive parents; assuring a foster care permanency option or, with older adolescents preparing for independent living; and preparing an adoption plan assessment on child.

CODE 6761 PSSF-TIME LIMITED FAMILY REUNIFICATION

Includes activities that are provided to a child who is removed from the child's home and placed in a foster family home or a childcare institution. These services are also for the parents or primary caregiver of such a child, in order to facilitate reunification of the child safely and appropriately, but only during the 15-month period that begins on the date that the child is considered to have entered foster care.

Services include individual, group and family counseling; inpatient, residential or outpatient substance abuse treatment services; mental health services; assistance to address domestic violence; temporary child care and therapeutic services for families, including crisis nurseries; and transportation to and from any of the above services.

CODE 6771 PSSF - MONTHLY CASEWORKER VISITS

Includes time spent performing activites designed to increase monthly caseworker visits to children in foster care to create positive outcomes for children. Includes activities to improve caseworker retention, recruitment, and ability to access the benefits of technology.

FOSTER CARE (FC):

CODE 5041 AB 2129 (CHAPTER 1089, STATUTES OF 1993) FOSTER PARENT TRAINING

Includes time spent preparing for and providing short-term training to current and prospective foster parents.

CODE 5061 AB 2129 FOSTER PARENT RECRUITMENT

Includes time spent performing foster parent recruitment activities for the AB 2129 Foster Parent Training and Recruitment Program, and travel associated with recruitment activities.

CODE 5771 MONTHLY VISITS/GROUP HOMES/CWD

Includes those activities performed by CWD social workers when providing monthly visits to all children placed in-group homes (in-and out-of-state).

FOSTER FAMILY AUDIT (FFA):

CODE 5331 COUNTY-OPERATED FFA

Includes time spent by caseworkers and support staff on county-operated FFA activities. It is restricted to San Mateo County.

IN-HOME SUPPORTIVE SERVICES (IHSS):

CODE 0031 IHSS - QUALITY ASSURANCE

Includes activities performed by staff at county social services offices that are charged with the responsibility of assuring that services are consistent with federal and State regulations, policies and guidelines. Such activities may include, but are not limited to the following: reading case files; conducting home visits with program recipients to validate the assessment of need and ensure that services authorized are provided; providing training to other county social staff regarding the quality assurance process; providing written and verbal feedback to county management;

compiling and reporting quality assurance data; meeting with State and other designated staff regarding quality assurance issues; performing duties related to the investigation of suspected fraud which are within the scope of the tasks identified in Senate Bill 1104.

CODE 1021 IHSS - SPMP

Includes the following activities for welfare staff meeting SPMP requirements:

 A physician completing the certification that an IHSS recipient needs personal care services.

A registered/public health nurse **employed by the county** reviewing the case, reviewing services authorized by the social worker as outlined in the needs assessment, reviewing the certification of medical necessity for consistency with authorized services, providing consultation on the recipient's service needs, monitoring the recipient's condition and effectiveness of the client's Personal Care Services Program (PCSP) services, providing expert medical opinions related to the treatment plan, and liaison activity with service providers and other agencies that provide medical care on the medical aspects of PCSP.

Performing selected activities to help IHSS recipients who are Medi-Cal eligible to gain access to Health Related (HR) services in order to reduce their risk of poor health outcomes. These activities include, but are not limited to, the development, implementation and management of HR service plans; referrals to other agencies and programs for assessment, evaluation, or treatment of HR needs; interagency coordination and liaison with providers of HR services to improve the service delivery system; and informing and anticipatory guidance about the causes, and prevention and remediation of HR needs.

Note: These are for activities not billed as direct medical services.

IHSS - PCSP/HR:

Program 103 captures costs for PCSP and HR activities for the IHSS program, including Supported Individual Providers (SIP) and SPMP costs not eligible for enhanced Federal Financial Participation. Related time study codes are as follows:

CODE 1032 IHSS - SUPPORTED INDIVIDUAL PROVIDERS (SIP) PCSP/WAIVER

Includes time spent assisting IHSS-PCSP/Waiver recipients in selecting individual provider(s); assisting and training the recipient in the supervision

of their individual provider(s); and actual transporting or accompaniment of the recipient to services related to personal care.

Coordinating outreach and recruitment of potential individual providers; establishing and maintaining a list of potential providers that recipients can choose from, and conducting orientation for recipients and individual providers on the IHSS program.

CODE 1033 IHSS - SIP HR

Includes time spent assisting IHSS-Non PCSP who are HR and Medi-Cal eligible recipients in selecting an individual provider(s); assisting and training the recipient in supervision of their individual provider(s); and the actual transporting or accompaniment of the recipient to services.

CODE 1034 IHSS – PCSP/WAIVER

Includes development, implementation, and management of the plan of treatment; referrals to other agencies and programs; determining third-party insurance coverage; referring IHSSPCSP/Waiver recipients to potential individual providers to assist them in selecting a provider; transporting or accompanying recipients to obtain services related to personal care; obtaining a doctor's certificate; making IHSS eligibility determinations and redeterminations for PCSP/Waiver; statistical reporting; voter registration activities; and processing provider grievances.

CODE 1041 IHSS - SIP NON-HR/PCSP/WAIVER

Includes time spent assisting IHSS Program recipients not eligible for federal Medi-Cal funding, including non-PCSP/non-Waiver recipients, in selecting an individual provider(s); assisting and training the recipient in supervision of their individual provider(s); and actual transporting or accompaniment of the recipient to services.

CODE 1042 IHSS - NON-HR/PCSP/WAIVER

Includes IHSS activities not eligible for Title XIX funding. These activities are related to non-PCSP/non-Waiver cases. This includes time spent explaining IHSS program benefits to applicants/recipients; explaining employee and employer responsibilities; assessing service needs; development, implementation, and management of treatment plans; implementation activities for any IHSS court case; processing a claim form and calculating benefits related to a court case ruling; data input of claims; preparing reports; participation in case reviews and audits; voter registration activities, appeals, case dictation, and statistical reporting.

CODE 2721 IHSS - CONLAN v. BONTA PCSP

County welfare department (CWD) responsibilities include:

- Referring clients, as needed, to the DHS Beneficiary Service Center for assistance with questions or obtaining/completing Conlan claim forms;
- Providing copies of NOAs (NA-690) that demonstrate medical necessity and/or SOC 828 County Verification Forms; and
- Responding to questions and/or providing documentation for State Hearings upon request from State staff.

CODE 3301 IHSS - IN HOME SUPPORTIVE SERVICES

Includes fraud activities related to IHSS performed by Welfare Fraud Investigators and their first-line supervisors who have peace officer status under Penal Code Section 830.

INDEPENDENT LIVING PROGRAM (ILP):

CODE 1821 ILP - CASE MANAGEMENT

Includes ILP case management activities for children: assessing need for ILP services, developing ILP service plan, and referring the child to services.

CODE 1841 ILP - SERVICES

Includes provision of ILP services to children: Independence counseling; providing training on occupational and college preparatory high school classes, financial aid and scholarships, acquisition of social security cards, medical history information, birth certificates or other proof of birth, housing and home management; and other necessary services.

EDUCATION AND TRAINING VOUCHER (ETV) PROGRAM:

CODE 0671 EDUCATION AND TRAINING VOUCHER

Includes social work time spent on notifying and counseling former foster youth of the availability of, and potential eligibility for ETV funds, time

spent on the preparation and distribution of flyers, pamphlets, and other outreach activities as necessary to advertise information about the ETV program.

SUPPORTIVE TRANSITIONAL EMANCIPATION PROGRAM (STEP):

CODE 3001 STEP-ELIGIBILITY

Allowable activities include: conducting eligibility determinations; benefit payment functions; Medi-Cal Program functions; and various intake activities such as screening, approvals, denials, and other dispositions of requests for aid, including restorations, budget computations, and authorizing actions.

CODE 3311 STEP TRANSITIONAL INDEPENDENT LIVING PLAN (TILP)

Allowable TILP activities include: developing the TILP assessment, developing an education/training plan, and referring youth to services.

OFFICE OF CHILD ABUSE PREVENTION (OCAP):

CODE 1671 CHILD ABUSE PREVENTION, INTERVENTION AND TREATMENT (CAPIT)

Includes provision of services for child abuse and intervention.

REFUGEE RESETTLEMENT PROGRAM (RRP):

CODE 1401 RRP - CWS

Includes time spent arranging for and providing the following services to eligible refugees in support of a CWS plan:

Information and referral services.

Outreach services, including activities designed to familiarize refugees with available services, explain the purpose of these services, and to facilitate access to these services.

Social adjustment services include:

Emergency services as follows: assessment and short term counseling to persons or families in a perceived crisis, referral to appropriate resources, and making arrangements for necessary services.

Health-related services as follows: information, referral to appropriate resources, assistance in scheduling appointments and obtaining services, and counseling to individuals or families to help them understand and identify their physical and mental health needs and maintain or improve their physical and mental health.

Home management services as follows: formal or informal instruction to individuals or families in management of household budgets, home maintenance, nutrition, housing standards, tenants' rights, and other consumer education services.

- o Day care for children.
- o Transportation.
- o Translation and interpretation services.
- o Case management services.

CODE 1411 RRP - CSBG

Includes same activities specified for Code 1400 except activities identified to Code 1410 must be provided to eligible refugees in support of a service plan directed at goals other than Employability or CWS.

SPECIALIZED TRAINING FOR ADOPTIVE PARENTS (STAP):

CODE 0051 STAP - RECRUITMENT

Includes time spent performing STAP recruitment activities that are performed in order to find and develop required resources that either do not exist, or do not exist in sufficient quantity to meet the needs of the population being served. This includes travel time associated with recruitment activities.

CODE 0052 STAP - TRAINING

Includes time spent preparing for and providing training to recruit adoptive parents to care for eligible children.

CODE 0053 STAP - CASE MANAGEMENT

Includes activities directed to a child in adoptive placement or activities immediately preceding an adoptive placement, such as a child adoptability assessment, adoptive applicant screening, and home study.

SUPPLEMENTAL SECURITY INCOME/STATE SUPPLEMENTAL PAYMENT (SSI/SSP):

CODE 1351 SSI/SSP - OUT OF HOME CARE

Includes determining and certifying the need for out-of-home care for an SSI/SSP applicant or recipient who resides in an unlicensed home. This activity must be initiated by Form SSP 22.

SUPPORTIVE AND THERAPEUTIC OPTIONS PROGRAM (STOP):

CODE 5881 STOP-ASSESSMENT/CASE PLAN

Activities are directed at developing a case plan, which indicates specific services necessary to promote a successful transition home and allows for continuity in service delivery. Activities include but are not limited to, the following:

Identifying and developing specific services needed by children and their families;

Developing a strength-based assessment;

Linking families with community-based services and local service providers, along with teaching families how to access needed services; Coordinating with service providers and community based organizations;

Activities that are directed towards enhancing, expanding or supporting STOP; and

Travel time associated with any of the above activities.

CODE 5882 STOP-SERVICES

Includes, but is not limited to, services designed to help families alleviate crisis to prevent out-of-home placement, parent education, individual and family counseling, social and vocational skills training, and therapeutic services to a child or to the child's family in order to ameliorate or remedy personal problems and behaviors.

OTHERS:

CODE 0161 IV-E WAIVER EVALUATION

This Time Study Code can only be used by Los Angeles Department of Children and Family Services and Alameda County Social Services Agency as these counties have been approved by CDSS to participate in the Title IV-E Wavier Demonstration Project.

The Time Study Code has been established to capture staff time participating in the collection Title IV-E Wavier evaluation information during face-to-face meeting, conference calls, or in completing specific forms for the Title IV-E Waiver evaluation. A support staff DPT has also been established for clerical staff providing support to the above referenced staff.

CODE 1761 IV-E WAIVER COUNTY ALLOCATION PLAN (CAP) DEVELOPMENTAL

For counties who are participating in the Title IV-E Child Welfare Waiver Demonstration Project, one-time developmental administrative costs can be claimed at the onset of the program, beginning with the date the demonstration project was approved, March 31, 2006, and continuing to prior to the implementation of the project. Allowable activities for Time Study Code 1761 include but are not limited to the following:

Developing the letter of interest/intent;

Development of county plans, proposals, policies and procedures, etc.:

Developing fiscal data;

Establishment of new policy and procedures for the demonstration project.

CODE 7001 GENERIC

Includes time spent by caseworkers performing general administrative activities that essentially provide a department-wide benefit such as developing a manual on casework procedures. This also includes time spent training or in conference or staff meetings when the subject has department-wide benefit or cannot be identified to a specific program. This code is not to be used when performing case management activities, which continue to be recorded to the associated program.

CODE 0881 PEER QUALITY CASE REVIEW (PQCR)

Activities include preparation, coordination, and training for the reviews, travel, and review time for county peer reviewers to chair, conduct, or

participate in county peer reviews and include: conducting entrance meetings, oversight coordination of on-site interviews, conducting focus and/or stakeholder interviews, facilitating daily debriefings, conducting exit meetings, collecting and analyzing completed review tools, summarizing findings and writing reports, and conducting post review meetings to present findings. Additionally, reviewers of the host and peer quality case review counties perform the following activities: participate in entrance meetings and interview training, review case file information, prepare and complete interview tool, conduct on-site interviews, present interview findings and discuss emerging themes, trends, program strengths, and areas for improvement at daily debriefings, and participate in exit meetings.

SECTION II CALWORKS FUNCTION PROGRAM CODE DESCRIPTIONS 09/05

GENERAL FUNCTION DEFINITION

Any activity related to the CalWORKs Program.

TIME STUDY STAFF

- **A.** Workers performing CalWORKs eligibility determinations and grant maintenance activities; as well as referrals for services (such as mental health, substance abuse and domestic violence);
- **B.** Staff providing employment training services, including case management and needs assessment as well as referrals for services (such as mental health, substance abuse and domestic violence);
- **C.** Appeals Workers:
- **D.** County Performance Sample Data Collection Staff;
- **E.** Welfare Fraud Staff (i.e., Welfare Fraud Investigators [WFI] and their first-line supervisors) whom have peace officer status under Penal Code Section 830. Investigative staff who do not have peace officer status--a requirement necessary for reporting time to the same Fraud codes used by WFI- -should report time to applicable program codes that do not indicate that they are restricted to WFI staff.)
- **F.** Clerical and administrative staff performing CalWORKs activities on a full-time basis (e.g., case budget computations and Child Support disregard);
- **G.** Caseworkers, clerical and administrative staff performing fiscal or case budget activities associated with Title IV-D Child Support collections; and
- **H.** First-line supervisors of the staff listed in A-G, above.

CalWORKs:

Includes information and referral, eligibility determinations and grant maintenance functions for the CalWORKs Program; Medi-Cal and Food Stamp functions for linked cash grant CalWORKs cases; Welfare to Work (WTW) activities; voter registration activities; Income and Eligibility Verification System (IEVS) functions including inquiries, matches, fraud referrals, and follow-up; preparing and/or presenting a case for hearing; and modified Quality Control

Information System (QCIS) activities for the CalWORKs. This category also includes Integrated Earnings Clearance/Fraud Detection System (IFD) functions including earning clearance reviews; IFD fraud referrals; IFD overpayment computations, and related contacts; and CalWORKs zero grants.

IDENTIFY ALL TIME TO ONE OF THE FOLLOWING:

CODE 2041 CalWORKs - IEVS

Includes reviewing and verifying that a discrepancy identified by the Integrated Earnings Clearance/Fraud Detection System (IFD) Wage Match and New Hire Match (NHM) exists between the gross earnings and employment reported by the recipient to the county, and by the employer to Employment Development Department (EDD); contacting recipients and employers to verify if earnings were unreported or underreported by the recipient and determining if an overpayment/overissuance was made; reviewing and verifying whether recipients received duplicate aid as indicated by the IFD Wage Match; contacting recipients, financial institutions, or any persons/agencies to verify existence and ownership of assets identified by the Franchise Tax Board Asset Match System, and determining if the recipient was ineligible for aid; determining whether an overpayment/overissuance was made and the amount of overpayment/overissuance if total ineligibility exists; and preparing associated Notice of Action and IEVS Response Document and IEVS Management Report (DPA 482). (NOTE: NHM information must be processed by dedicated IEVS staff who time study in accordance with CDSS time study instructions. As in the case with the wage match, we recommend that any resulting overpayments and grant reduction collections be initiated by dedicated IEVS or Collections staff, and time studied to Code 2781 (CalWORKs Overpayment Collections).

CODE 2261 CHILD/SPOUSAL SUPPORT DISREGARD

TSC 2261 (Child/Spousal Support Disregard) inadvertently dropped off in the December 1999 quarter. It includes preparing and authorizing payments, preparing any required notices, and responding to client inquiries about the disregard payment.

CODE 2571 SUPPORTIVE SERVICES OUTREACH

Includes time spend performing activities to expand existing outreach efforts and to develop and implement new outreach strategies. This may include media spots, posters, employment fairs, and providing information on availability of income support including Earned Income Tax Credit (EITC), health coverage, and food and nutrition programs.

CODE 2691 CalWORKs SAVE PROGRAM

Primary and/or secondary verification activities to establish alien Satisfactory Immigration Status (SIS) with Immigration and Nationalization Service (INS) including: completion of primary and secondary INS verification forms; obtaining, copying, and transmitting alien documents to the INS; comparing INS data with documents submitted by aliens; and execution of consent for disclosure statement for amnesty and special agricultural worker applicants. SIS should be established for all aliens at application and for all alien recipients at recertification or redetermination.

CODE 2781 CalWORKs OVERPAYMENT COLLECTIONS (SB 627)

Includes the following CalWORKs collection activities:

- 1. Discovery and computation of overpayment, and notification of recipients (excluding IEVS matches);
- Establishment of overpayment record and initiation of grant reduction or cash collection (for all overpayments including those discovered by IEVS);
- 3. Recording and accounting of collections;
- 4. Referral of closed cases for cash collection:
- 5. Re-establishment of grant reduction on reopened cases; and
- 6. Reporting of collection activity.

CODE 6101 CalWORKs JAIL MATCH (SB 1556)

CalWORKs and PAFS cases - Jail Match casework activities required by SB 1556: includes reviewing and verifying that a recipient identified by the Jail Match System is, or has been, incarcerated; contacting recipients and jail facilities to verify whereabouts and exact dates of incarceration; determining if the recipient was eligible for aid and whether an overpayment/overissuance was made and the amount of the overpayment/overissuance if ineligibility exists for the recipient or case.

CODE 6141 CalWORKs ELIGIBILITY

Includes eligibility determinations in the CalWORKs Program to process Monthly Eligibility Report, and annual determinations. Activities included are review application, review required forms and verifications, fingerprint imaging, request for information, home and office visits, completion of Notice of Actions, sanctions, computer data input, and activities in support of non-Administrative Disqualification Hearings

Public Assistance Food Stamps (PAFS) and Two-Parent Family activities are time studied here, but the PAFS shift and Two-Parent Family caseload shifts are applied to this program code. Activities that can be specifically identified to Medi-Cal, Non-Assistance Food Stamp Program, and Non-Federal Recent Noncitizens are captured under other program codes.-

CODE 6151 INITIAL ELIGIBILITY DETERMINATION FOR CalWORKS AND MEDI-CAL PROGRAMS

(ADH)/non-Intentional Program Violations (IPV) cases.

Includes initial eligibility determination intake and grant determination activities that are common to CalWORKs, Food Stamp, and Medi-Cal Programs. Included activities are review of SAWS 1, application, review required forms and verifications, request for information, early fraud referral, home and office visits, computer data input, fingerprint imaging, and completion of Notice of Actions.

This code is intended for new applicants or returning recipients requiring a full intake due to a break in aid. It is intended for applicants whose eligibility for these three programs is unknown (or uncertain) pending eligibility determination.

If the applicant indicates that they are applying for CalWORKs only (i.e., no food stamps or Medi-cal assistance) use Code 6141.

CODE 6161 NONFEDERAL CalWORKs ELIGIBILITY

Includes eligibility determinations including initial determinations, review of Monthly Eligibility Reports, and Annual Re-Investigations performed on behalf of nonfederal CalWORKs participants (e.g., recent noncitizens ineligible under TANF guidelines, but eligible for CalWORKs). Allowable activities include review of SAWS 1, application, required forms and verifications, request for information, early fraud referral, home and office visits, computer data input, fingerprint imaging, and completion of Notice of Actions.

CODE 6181 CalWORKs PROGRAM INTEGRITY

This code is for non-WFI staff performing activities related to CalWORKs and Welfare-to-Work ADH/IPV cases, and CalWORKs Early Detection/Prevention Program (ED/PP). ED/PP activities with CalWORKs cases may include, but are not limited to, conducting investigations, home visits, interviews, preparing investigative reports for civil and criminal complaints for the prosecuting authority, maintaining complete records of fraud investigative activities, and statistical reports.

CODE 6631 CalWORKS CASE MANAGEMENT

Includes time spent performing case management activities. Allowable activities include grant maintenance, responding to inquiries, address and phone changes, case file reviews for TANF/CalWORKs families (including TANF Timed-Out cases), and data collection conducted by County Performance Sample staff through the modified QCIS.

CODE 6641 INFORMATION AND REFERRAL

Includes providing applicant with information regarding programs and services available within the California Department of Social Services. Includes referrals to community agencies. Activities include explaining support services for employed persons, diversion program, childcare program, Welfare-to-Work Supportive Services, Cal-Learn program, Food Stamp Program, voter registration, etc.

CODE 6651 NONFEDERAL CalWORKs CASE MANAGEMENT RECENT NONCITIZENS

Includes time spent performing case management activities. Allowable activities include grant maintenance, responding to inquiries, address and phone changes, case file reviews for TANF/CalWORKs families, and data collection conducted by County Performance Sample staff through modified QCIS.

CAL-LEARN PROGRAM:

CODE 0261 STATE ONLY CAL-LEARN ELIGIBILITY

Includes time spent performing administrative activities associated with Cal-Learn program sanctioned cases. Allowable activities include identifying Cal-Learn sanctioned cases; providing a teen parent with

information; preparing informational notices and Notices of Action (NOAs); processing supportive services payments; making grant determinations; authorization and processing of sanctions. This also includes time spent determining deferral and exemption status; determining good cause; approving sanction and bonus recommendations; and preparation for hearings.

CODE 0271 STATE ONLY CAL-LEARN - CASE MANAGEMENT

Includes time spent performing case management activities associated with Cal-Learn Program sanctioned cases. Allowable activities include providing assistance to a teen parent to obtain educational, social and health services, scheduling and providing orientations to teen parents for the Cal-Learn Program; counseling; developing case plans; identifying need for, arranging, and authorizing supportive services; coordinating the child care plan with the educational plan; making referrals to community services; monitoring the teen parent to determine effectiveness of service provision; assessing progress toward case plan goals; making adjustment to improve teen parent's program; and recommending payment of bonuses or imposition of sanctions.

CODE 6171 CAL-LEARN CASE MANAGEMENT

Includes providing assistance to teens to obtain educational, social and health services; scheduling and providing orientation to the Cal-Learn Program; counseling; developing case plans; identifying the need for, arranging, and authorizing supportive services; coordinating child care plan with educational plan; making referrals to community services; monitoring the teen parent to determine effectiveness of service provision; assessing progress toward case plan goals; making changes to improve teen parent's program; and recommending payment of bonuses or imposition of sanctions.

This code does not include activities that can be specifically identified to Child Welfare Services-Minor Parent Investigations.

CODE 6301 CAL-LEARN ADMINISTRATION

Includes identifying Cal-Learn cases; providing a teen parent or pregnant teen with information and referral to the Cal-Learn Program; preparing informational notices and Notices of Action; processing supportive services payments; making grant determinations; authorization and processing of sanctions and bonuses. This includes time spent determining deferral and exemption status; determining good cause; approving sanction/bonus recommendations; and preparation for hearings.

CODE 6401 NONFEDERAL CAL-LEARN ELIGIBILITY

Includes time spent performing program administrative activities associated with the Cal-Learn Program on behalf of nonfederally-eligible CalWORKs recipients (e.g., legal aliens though ineligible under Temporary Assistance for Needy Families [TANF] guidelines remain eligible for aid under CalWORKs). Allowable activities include identifying Cal-Learn cases; providing a teen parent or pregnant teen with information and referral to the Cal-Learn Program; preparing informational notices and Notices of Action (NOAs); processing supportive services payments; making grant determinations; authorization and processing of sanctions and bonuses. This includes time spent determining deferral and exemption status; determining good cause; approving sanction and bonus recommendations; and preparation for hearings.

CODE 6411 NONFEDERAL CAL-LEARN CASE MANAGEMENT

Includes time spent performing case management activities associated with the Cal-Learn Program on behalf of nonfederal eligible CalWORKs recipients. Allowable activities include providing assistance to teens to obtain educational, social and health services; scheduling and providing orientation to the Cal-Learn Program; counseling; developing case plans; identifying need for arranging, and authorizing supportive services; coordinating child care plan with educational plan; making referrals to community services; monitoring the teen parent to determine effectiveness of service provision; assessing progress toward case plan goals; making adjustments to improve teen parent's program; and recommending payment of bonuses or imposition of sanctions. Deferral and exemption status; determining good cause; approving sanction and bonus recommendations; and preparation for hearings.

CalWORKs FRAUD ACTIVITIES:

Includes any activity performed by WFIs related to the investigation and prosecution of fraud when a person, on behalf of himself or herself, has knowingly with the intent to deceive or defraud made a false statement or representation to obtain aid, to obtain a continuance or increase of aid, or to avoid reduction or denial of aid.

WFIs are required to record time for investigative activities to the codes specified below. Investigators and their first-line supervisors are required to have peace officer status under California Penal Code Section 830 in order to record time to fraud programs. Investigative staff who do not have peace officer status must record time spent on investigative activity as casework time, identified to the applicable program.

CODE 3011 CalWORKs FRAUD

Includes fraud activities related to a federal CalWORKs case. A case is defined as federal if at any time during the investigation period it was federally eligible.

NOTE: This code is reserved solely for WFI and their first-line supervisors who have peace officer status.

CODE 3051 NONFEDERAL CalWORKs FRAUD

Includes fraud activities related to a nonfederal CalWORKs case, including Two-Parent program participants. A case is defined as nonfederal if during the entire investigation period it was non-federally eligible (e.g., legal aliens ineligible under TANF guidelines, but eligible for CalWORKs).

NOTE: This code is reserved solely for WFI and their first-line supervisors who have peace officer status.

CODE 3151 FEDERAL CalWORKS AND FOOD STAMP FRAUD

Includes activities related to a case receiving both federal CalWORKs and Food Stamps. When investigation ceases on one of the program components of the case, activities are reported solely to the remaining component (i.e., either CalWORKs fraud or Food Stamp fraud).

NOTE: This code is reserved solely for WFI and their first-line supervisors who have peace officer status.

CODE 3201 NONFEDERAL CalWORKs and FOOD STAMP FRAUD

Includes activities related to a case receiving both nonfederal CalWORKs and Food Stamps (e.g., legal aliens ineligible under TANF guidelines, but eligible for CalWORKs). When investigation ceases on one program component of the case, activities are reported solely to the remaining component (i.e., either non-federal CalWORKs fraud or nonfederal Food Stamp fraud).

NOTE: This code is reserved solely for WFI and their first-line supervisors who have peace officer status.

CODE 3401 EARLY FRAUD DETECTION/PREVENTION (EFD/P) - FEDERAL CalWORKs

Activities with federal CalWORKs cases include, but are not limited to, conducting investigations, home visits, interviews, preparing investigative reports for civil and criminal complaints for prosecuting authority, maintaining complete reports of fraud investigative activities, and completing statistical reports.

NOTE: This code is reserved solely for WFI and their first-line supervisors who have peace officer status.

CODE 3421 EFD/P - CalWORKs and FOOD STAMPS

Includes EFD/P activities related to combined CalWORKs and Food Stamp cases.

NOTE: This code is reserved solely for WFI and their first-line supervisors who have peace officer status.

WELFARE TO WORK (WTW) CASEWORKER ACTIVITIES:

Effective with the March 1998 quarter, Greater Avenues to Independence (GAIN) Placement and Development Services activities formerly captured separately under Code 4052 (GAIN-Placement and Development Services), have been re-classified as "general" WTW caseworker activities listed below. These activities include: soliciting and developing employment and training slots for the Work Experience component; negotiating employment and training contracts; and performing on-site programmatic monitoring of contracts, including contractor compliance in meeting the participant's employment goal and resolution of participation problems.

General WTW caseworker activities include: determining exemptions; arranging for the participant's entry into the WTW component; referring clients to the tribal TANF program; assessing the need for, and arranging of supportive services, other than child care; calculating supportive service overpayments (OP); completing OP Notices of Actions; coordinating OP grant adjustments with CalWORKs caseworker; tracking and monitoring participant activities; securing and referring participants to job interviews; arranging for or providing- employment or training-related counseling; completing subsequent WTW plans; coordinating grant-based OJT with the CalWORKs caseworker; conducting good cause and compliance determinations; determining the need for, and coordinating, sanction activities with the CalWORKs caseworker; preparing, for and presenting, information at hearings; providing client services, and referrals to mental health/substance abuse services.

WTW caseworker activities listed within each WTW Code listed below are in addition to the general WTW caseworker activities listed above. PLEASE IDENTIFY ALL CASEWORKER ACTIVITIES TO THE FOLLOWING WTW PROGRAM COMPONENTS ACCORDING TO PROGRAM PARTICIPANT ASSIGNMENT.

CODE 4512 NONFEDERAL WTW

Includes activities for all WTW components performed on behalf of a nonfederal participant (e.g., legal aliens ineligible under TANF guidelines but eligible for CalWORKs).

CODE 6201 WTW PRE-ASSESSMENT

Includes providing a CalWORKs applicant/recipient with WTW Program appraisal orientation to the WTW program and available supportive services; advising the client of his/her rights and responsibilities; conducting activities associated with the Welfare Opportunity Tax Credit (WOTC) Program; administering the basic skills screening tests; developing and documenting the preliminary employment goal; completing General and Initial Activity Agreement; referring participant to the initial assignment or WTW Assessment; and activities prior to and after assessment related to one-week job readiness workshop and activities related to supervised or unsupervised job search. This includes Job Club Case Management (CM) and Program Operations, Supervised Job Search CM and Program Operations, and Other Job Search Services CM activities.

CODE 6211 WTW POST-ASSESSMENT: COMMUNITY SERVICE

Includes any activities performed relating to the provision of community service assignments to WTW program participants who are participating in Community Service activities prior to reaching the 18 or 24 month time limit as well as those who have reached their time limit (18th month or 24th month, as applicable) and have not found unsubsidized employment sufficient to meet required minimum hours of participation.

CODE 6221 WTW POST-ASSESSMENT: OTHER

Includes any WTW post-assessment activities other than those related to either Vocational Education or Community Service WTW components.

CODE 6231 WTW POST-ASSESSMENT: VOCATIONAL EDUCATION

Includes job-specific training in a classroom or on-site setting and other college training, including post secondary education and self-initiated programs.

CODE 6241 WTW ASSESSMENT

Includes activities related to participant's entry into the component; amended WTW plans; third party assessment; vocational assessment; evaluation of participant's education and employment history and need for supportive services; evaluation and completion of the participant's WTW plan; and reappraisals.

CODE 6311 CalWORKS TRANSITIONAL SERVICES

For counties that have provisions for transitional services in their county plans. This includes transitional services case management activities.

CODE 6481 NONFEDERAL CalWORKS TRANSITIONAL SERVICES

For counties that have provisions for transitional services to legal aliens and Two-Parent Families (e.g., legal alien's ineligible under TANF guidelines, but eligible for CalWORKs) in their county plans. This includes transitional services case management activities.

CODE 6781 WTW TWO-PARENT FAMILIES: PRE ASSESSMENT

Includes WTW pre-assessment activities for State Only Two-Parent families. Allowable activities are the same as those under TSC 6201 (WTW Pre-Assessment).

CODE 6791 WTW TWO-PARENT FAMILIES POST ASSESSMENT: COMMUNITY SERVICES

Includes WTW community service activities for State Only Two-Parent families. Allowable activities are the same as those under TSC 6211 (WTW Community Service).

CODE 6801 WTW TWO-PARENT FAMILIES POST ASSESSMENT: VOCATIONAL EDUCATION

Includes WTW vocational education activities for State Only Two-Parent families. Allowable activities are the same as those under TSC 6231 (WTW Vocational Education).

CODE 6811 WTW TWO-PARENT FAMILIES: ASSESSMENT

Includes WTW assessment activities for State Only Two-Parent families. Allowable activities are the same as those under TSC 6241 (WTW Assessment).

CODE 6821 WTW TWO-PARENT FAMILIES-POST-ASSESSMENT OTHER

Includes WTW post-assessment activities for State Only Two-Parent families. Allowable activities are the same as those under TSC 6221 (WTW Post-Assessment: Other).

CODE 6831 TWO-PARENT RECIPIENT CHILD CARE TRAINING

This project will focus on necessary training and teaching of basic childcare and safety to CalWORKs Two-Parent families. Expected outcome is the ability for these families to serve as in-home license exempt, in-home licensed or center-based childcare providers.

CODE 6851 CalWORKs DOMESTIC VIOLENCE SERVICES

Includes time spent by county staff in direct provision of domestic violence services. These services may include, but are not limited to: community domestic violence services; individual counseling of the participant and children; group counseling; parenting skills training; independent living skills training.

CODE 6861 RECIPIENT CHILD CARE TRAINING

This project will focus on necessary training and teaching of basic childcare and safety to CalWORKs recipients. Expected outcome is the ability for these recipients to serve as in-home license exempt, in-home licensed or center-based childcare providers.

<u>CODE 0551 SAFETY NET-EMPLOYMENT SERVICES CASE MANAGEMENT – NON-ASSISTANCE</u>

Includes case management and related WTW activities (e.g., determining exemptions, arranging for the participant's entry into the WTW component; performing needs assessment, etc.,) provided to employed safety net individuals. For additional activities, please refer to the Program Code Descriptions for WTW caseworker activities and the following time study codes:

6201 Pre-Assessment

6211 WTW Post-Assessment; Community Service

6221 WTW Post-Assessment; Other

6231 Post-Assessment; Vocational Education

6241 WTW Assessment

<u>CODE 0561 SAFETY NET-EMPLOYMENT SERVICES CASE MANAGEMENT – ASSISTANCE</u>

Case management and related activities are the same as for Time Study Code 0551 except provided to unemployed Safety Net families.

DEMONSTRATION PROJECTS:

CODE 2631 U.S. RESIDENCY PROJECT – CalWORKs

For Imperial and San Diego Counties only - includes interviewing applicants and recipients of public assistance to determine residency; reviewing documents for authenticity, completeness, and accuracy; determining case status; data collection for project evaluation; and referral of sampled cases for fraud investigation follow-up.

CODE 7001 GENERIC

Includes time spent by caseworkers performing general administrative activities that essentially provide a department-wide benefit such as developing a manual on casework procedures. Also includes time spent training or in conference or staff meetings when the subject has department-wide benefit or cannot be identified to a specific program. This code is not to be used when performing case management activities, which continue to be recorded to the associated program.

SECTION III OTHER PUBLIC WELFARE FUNCTION PROGRAM CODE DESCRIPTION 09/07

GENERAL FUNCTION DEFINITION

Includes activities associated with the eligibility determination process performed on behalf of public assistance applicants (other than CalWORKs) and case management activities for continuing cases.

TIME STUDY STAFF

- **A.** Staff performing activities listed below should record time to appropriate Other Public Welfare codes.
- **B.** Workers performing public assistance eligibility determinations and associated case management activities, including Food Stamp certification workers; as well as referrals for services (such as mental health, substance abuse and domestic violence);
- C. Quality Control/Quality Assurance Staff;
- **D.** Caseworkers who generally perform program activities associated with another function (e.g., CalWORKs, Social Services, etc.) and perform Other Public Welfare Function activities;
- **E.** Clerical and administrative staff performing Other Public Welfare Programs Function activities on a full-time basis;
- **F.** Welfare Fraud Staff (NOTE: These are Welfare Fraud Investigators [WFI] and their first-line supervisors who have peace officer status under Penal Code Section 830. Investigative staff who do <u>not</u> have peace officer status--a requirement necessary for reporting time to the same fraud codes used by WFI--should report time to applicable program codes that do <u>not</u> indicate that they are restricted to WFI staff.);
- G. Caseworkers, clerical, and administrative staff performing fiscal or case budget activities associated with Title IV-D Child Support collections; and
- **H.** First-line supervisors of staff listed in A F above.

CODE 0301 ENHANCED Kin-GAP/FEDERALLY ELIGIBILE

Includes the following activities performed on behalf of Kin-GAP cases: conducting eligibility determinations and benefit payment functions; various intake activities such as screening, approvals, denials; other dispositions of requests for aid, including restorations; budget computations and authorizing actions; child support referrals; home visits; intercounty transfers; and program status changes. Code 0301 also includes activities performed for continuing Kin-GAP case maintenance.

CODE 0311 ENHANCED Kin-GAP/NonFEDERALLY ELIGIBILE

Includes the following activities performed on behalf of Nonfederal Kin-GAP cases: conducting eligibility determinations and benefit payment functions; and various intake activities, such as screening, approvals, denials, and other dispositions of requests for aid, including restorations; budget computations and authorizing actions; child support referrals; home visits; intercounty transfers; and program status changes. Code 0311 also includes activities performed for continuing Kin-GAP case maintenance.

CODE 0291 ROSALES v. THOMPSON

Includes the following activities performed on behalf of Rosales v. Thompson for determining eligibility for new Foster Care and Adoption Assistance program cases: reviewing cases for determining eligibility under Rosales v. Thompson; gathering and verifying information used by the Eligibility Worker in regard to income, parental deprivation, resources, social security numbers, birth certificates, and child support; calculating reimbursement amounts; and documenting adjusted payment in the case file.

CODE 2111 FOOD STAMP ISSUANCE

For costs associated with issuance of Electronic Benefit Transfer (EFT), cards that include food stamps, CalWORKs, and/or general relief, counties shall calculate a ratio based on their caseload in the EBT system, during one month of the quarter, and charge each program using the same coding as if a check were being issued. The exception is Food Stamps where the correct code to charge is 211. General relief costs should be county only costs.

Costs associated with issuance include but are not limited to: card embossing, host to host benefits, issuance of Personal Identification Numbers (PINs), and providing replacement authorization documents.

CODE 2171 COUNTY MEDICAL SERVICES PROGRAM - NON-REFUGEE RESETTLEMENT PROGRAM (RRP)/CHEP

Includes eligibility determinations and case maintenance for County Medical Services Program for the following population:

Applicants or recipients identified as non-aided and non-linked who are not pregnant or who are not living in an Intermediate Care Facility/Skilled Nursing Facility (ICF/SNF).

Persons ineligible for services through RRP or Cuban/Haitian Entrant program.

CODE 2191 TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) - PROBATION ELIGIBILITY

Includes eligibility determinations, screening for prior TANF probation episodes, approvals, denials, authorization actions, and issuance of notices.

CODE 2251 CHILD SUPPORT

Includes activities related to processing support obligations collected by the District Attorney, recoupment and pass-on calculations, and activities performed when disbursing funds to appropriate parties.

CODE 2301 ADOPTION ASSISTANCE PROGRAM (AAP)

Includes eligibility determinations and payment maintenance activities on AAP cases.

CODE 2451 SPECIAL CIRCUMSTANCES ALLOWANCE PROGRAM

Includes time spent determining eligibility, assessing and verifying need for special circumstances, informing applicants of program requirements/benefits, maintaining case files, performing benefit computations, and preparing authorization actions for eligible SSI/SSP recipients.

CODE 3601 FOOD STAMP SANCTION/REINVESTMENT PROJECT

Includes activities associated with developing and implementing a food stamp reinvestment project aimed at reducing food stamp error rates. Staff should only use this code to report time spent on activities that benefit the food stamp program.

FOOD STAMP EMPLOYMENT AND TRAINING (FSET) ABLE BODIED ADULTS WITHOUT DEPENDENTS (ABAWD) – WORKFARE AND EDUCATION TRAINING:

Program codes 306 and 307 capture costs that serve ABAWD in Workfare/Training activities. ABAWDs are Non-Assistance Food Stamps (NAFS) recipients over the age of 17 and under the age of 50, who in order to remain eligible for food stamps must meet the ABAWD work requirement. Related time study codes are as follows:

CODE 3061 FSET ABAWDs - WORKFARE

Includes time associated with offering/filling slots and all other caseworker activities associated with ABAWD participation in qualifying workfare slots. This includes assessment, placement, and case management activities to place and keep ABAWDs in workfare slots. A qualifying workfare slot is an allowable FSET activity that is used to meet ABAWD work requirement.

CODE 3071 FSET ABAWDs - EDUCATION/TRAINING

Includes time associated with offering/filling slots and all other caseworker activities associated with ABAWD participation in qualifying education/training slots. This includes assessment, placement, and case management activities to place and keep ABAWDs in educational or training slots. A qualifying education and training slot is an allowable FSET activity that is used to meet ABAWD work requirement.

CODE 3081 CASH ASSISTANCE PROGRAM FOR IMMIGRANTS (CAPI)

Includes time spent performing selected activities for CAPI applicants and recipients. Activities include, but are not limited to, accepting /screening applications, including applications for SSI; determining/redetermining eligibility; performing grant calculations and grant maintenance functions; informing applicants of program requirements; preparing notice of actions; making fraud referrals; and preparing reports.

CODE 3451 AFDC FOSTER CARE (FC) ELIGIBILITY

Includes the following activities performed on behalf of FC cases: conducting eligibility determinations and benefit payment functions; various intake activities, such as screening, approvals, denials, and other dispositions of requests for aid, including restorations; budget computations and authorizing actions, **referrals to other public assistance programs,** inter-county transfers, and program status changes.

CODE 3481 OCOP/GR Non-EDP

For activities associated with the GR program and for individuals who are not eligible for services under other programs. This code is to be used for those programs that do <u>not</u> benefit from county EDP operations/costs. Programs that do benefit from EDP should be claimed to Code 3521 (OCOP/GR).

CODE 3501 RRP-MEDICAL

Includes RRP Medically Needy Only (MNO) refugees, refugee children less than 21 years of age, pregnant refugee women, refugees residing in an ICF/SNF.

CODE 3511 REFUGEE CASH ASSISTANCE/ENTRANT CASH ASSISTANCE PROGRAM (RCA/ECA)

Includes eligibility determinations and grant maintenance activities for time eligible RCA/ECA recipients and for Unaccompanied Refugee/Entrant Minors. This also includes conducting cause determinations and conciliation for RCA clients.

CODE 3521 OTHER COUNTY ONLY PROGRAM (OCOP)/GENERAL RELIEF (GR)

For the GR program and for individuals who are not eligible for services under other programs. This includes the following activities: eligibility determinations (including fingerprint imaging) and grant maintenance functions; fraud activities related to OCOP or GR programs; providing employment training services to GR recipients and other individuals who are not eligible for services under other employment programs; providing Welfare to Work (WTW) and social services to GR and RCA recipients. This also includes provision of non-CSBG services to refugees. This code is to be used for those programs that benefit from county EDP operations/costs. Programs that do not benefit from EDP should be claimed to Code 3481 (OCOP/GR Non-EDP).

CODE 3891 CASH ASSISTANCE PROGRAM FOR IMMIGRANTS (CAPI) SUPPLEMENTAL SECURITY INCOME (SSI)/NATURALIZATION

Includes time spent assisting CAPI clients in completing SSI appeal forms and referring clients to a panel of attorneys to provide representation at appeal hearings; assisting CAPI clients in collecting medical and psychological records, scheduling medical/psychiatric appointments, arranging for transportation to medical appointments if the client has a

disability determination or appeal hearing pending with the Social Security Administration (SSA) on a disability hearing; submitting completed forms to SSA and the State Disability Determination Office; acting as liaison with SSA and State Disability Determination Office to ensure that all SSI-related requirements are met for SSI approval; and assisting the CAPI client in obtaining citizenship by making referrals to Immigration and Naturalization Service, assisting in completion of documents, making referrals to citizenship courses, and assisting in the SSA appeal process of a citizenship issue.

OTHER FSET ACIVITIES:

Program Code 464 captures costs for the employment and training activities for Non-Assistance Food Stamp (NAFS) applicants and recipients who meet Federal Nutrition Services requirements for food stamp eligibility.

CODE 4641 OTHER FSET ACTIVITIES

This reporting code includes staff time associated with: 1) conducting assessment, placement, and case management activities for FSET program participants who are non-ABAWDs or ABAWDs in non-qualifying activities: 2) determining deferrals; 3) arranging for supportive services payments: 4) conducting good cause determinations; and 5) placing FSET participants into nonmedical alcohol and other drug rehabilitation services. Alcohol and other drug rehabilitation services can only be offered in combination with qualifying work activities and cannot exceed 25% of an ABAWD's total work activities. Non-qualifying activities for ABAWDs include stand-alone job search and stand-alone job club.

CODE 4781 REFUGEE EMPLOYMENT SOCIAL SERVICES

Includes all activities related to provision of employment and training services that are approved in the county's plan. These activities are provided to eligible refugees and funded by Refugee Employment Social Services.

CODE 4801 REFUGEE TARGET ASSISTANCE

Includes all activities related to the provision of employment and training services that are approved in the county's plan. These activities are provided to eligible refugees and funded by Refugee Targeted Assistance.

NONASSISTANCE FOOD STAMP (NAFS):

The following codes currently assigned to the NAFS Program were established to capture caseworker hours associated with performing specific activities previously identified as those that benefit NAFS, or pure FS cases only. As indicated by the

program title, NAFS cases are FS cases that include individuals whom, aside from receiving FS benefits, are not currently receiving a cash grant through the CalWORKs (previously AFDC program). NAFS cases may also include Refugee, GR, Cuban/Haitian Entrant, or MI members.

In contrast, with the exception of Code 2110 (Food Stamp Issuance), caseworker hours performed on behalf of Public Assistance Food Stamp (PAFS) cases (i.e., cases that receive both CalWORKs and FS), as opposed to NAFS cases, should be reported to the appropriate CalWORKs time study code located in the CalWORKs Function PCDs. Code 2110 (Food Stamp Issuance) is an exception because food stamp issuance activities are by definition food stamp costs; therefore, there is no need to distinguish between PAFS and NAFS cases. In addition to the various activities listed below for each individual NAFS time study code, allowable NAFS activities also include: Income and Eligibility Verification System (IEVS) related functions (e.g., inquiries, matches, fraud referrals, Integrated Earnings Clearance/Fraud Detection System (IFD) overpayment computations and related follow- up contacts), fingerprint imaging, hearing preparation and/or presentation, and FS Quality Control (QC) activities.

CODE 2181 NAFS-IEVS

Includes reviewing and verifying that a discrepancy identified by the IFD Wage Match and New Hire Match (NHM) exists between gross earnings and employment reported by the recipient to the county, and by the employer to EDD; contacting recipients and employers to verify if earnings were unreported or underreported by the recipient; determining if an overpayment/overissuance was made; reviewing and verifying whether recipients received duplicate aid as indicated by the IFD Wage Match; contacting recipients, financial institutions, or any persons/agencies to verify existence and ownership of assets identified by the Franchise Tax Board Asset Match System: determining if the recipient was ineligible for aid; determining whether an overpayment/overissuance was made and the amount of overpayment/overissuance if total ineligibility exists; and preparing the associated Notice of Action and IEVS Response Document and IEVS Management Report (DPA 482). (NOTE: NHM information must be processed by dedicated IEVS staff who time study in accordance with CDSS time study instructions. As in the case with the wage match. we recommend that any resulting overpayments and grant reduction collections be initiated by dedicated IEVS or Collections staff, and time studied to Code 2780 (CalWORKs Overpayment Collections [SB 627]).

CODE 2341 FRAUD-NAFS AFIRM - LOS ANGELES (LA) COUNTY

For LA County only - includes referral of cases to fraud investigations, documenting applicant/recipient explanations, and preparing notices of actions.

CODE 2681 SYSTEMATIC ALIEN VERIFICATION FOR ENTITLEMENTS (SAVE) PROGRAM - NAFS

Satisfactory Immigration Status (SIS) verification activities for aliens applying for the NAFS program. Primary and/or secondary verification activities to establish alien SIS with Immigration and Nationalization Service (INS) including: completion of primary and secondary INS verification forms; obtaining, copying, and transmitting alien documents to the INS; comparing INS data with documents submitted by aliens; and execution of consent for disclosure statement for amnesty and special agricultural worker applicants. SIS should be established for all aliens at application and for all alien recipients at recertification or redetermination.

CODE 2751 EARLY FRAUD DETECTION/PREVENTION PROGRAM (EFD/P) NAFS

For counties that have an approved plan for 100% federal and state funding. Activities listed for ED/PP in Code 3441 (NAFS Program Integrity) apply to this program.

CODE 3101 NAFS-FRAUD

Includes fraud activities performed by WFI and their first-line supervisors who have peace officer status under Penal Code Section 830 related to NAFS cases. Do not report time spent on investigative activities to Code 3100 for cases receiving both CalWORKs and FS benefits.

NOTE: This code is reserved solely for WFI and their first-line supervisors who have peace officer status.

CODE 3341 FRAUD-NAFS AFIRM - LA COUNTY

For LA County only - includes activities performed by WFI and their first-line supervisors who have peace officer status under Penal Code Section 830. Allowable activities include: identifying match situations, investigating referrals received from eligibility workers, validating fingerprint matches, referring cases to the District Attorney when necessary, determining if half matches are full matches, referral of full match cases to eligibility staff, and statistical reporting activities.

NOTE: This code is reserved solely for WFI and their first-line supervisors who have peace officer status.

CODE 3411 EFD/P-NAFS (WFI)

Includes NAFS case-related EFD/P activities performed by WFI and their first-line supervisors who have peace officer status under Penal Code

Section 830. Allowable activities include conducting investigations, home visits, interviews, preparing investigative reports for civil and criminal complaints for prosecuting authority, maintaining complete records of investigative activities, and completing statistical reports.

NOTE: This code is reserved solely for WFI and their first-line supervisors who have peace officer status.

CODE 3431 NAFS ELIGIBILITY

Includes NAFS Program intake activities such as: fingerprint imaging and certification or denial of benefits on behalf of new applicants; recertification following a break in receiving benefits; verification of income, mandatory deductions, and other asset-related issues; activities in support of non-Administrative Disqualification Hearings/non-Intentional Program Violation (IPV) cases; budget computation, quality assurance, supervisorial review activities; and Work Opportunity Tax Credit (WOTC) Program-related activities. This also includes continuing NAFS activities, such as: performing budget recomputations, program eligibility termination, making Employment Development Department (EDD) referrals, authorizing actions, intercounty transfers, program loss computations and adjustments, fraud or collection referrals, home visits, expedited service, recertification with no break in benefits, authorization for benefit issuance, budget computations for recertifications, quality assurance or supervisorial review activities, and WOTC Program activities. This also includes time spent providing applicants and recipients with voter registration forms and instructions, assisting in completion of these forms as necessary, and processing voter registration forms for submission to the Secretary of State. NAFS activities performed on Indian Reservations should also be included here.

CODE 3441 NAFS PROGRAM INTEGRITY

This code is intended for use by non-WFI staff performing NAFS administrative hearing activities for IPV cases and FS ED/PP activities. ED/PP activities may include, but are not limited to, conducting investigations, home visits, interviews, preparing investigative reports for civil and criminal complaints for prosecuting authority, maintaining complete records of fraud investigative activities, and statistical reports.

CODE 3471 NAFS QUALITY CONTROL

Includes case reviews, desk audits, third-party verifications, home visits related to case reviews, and all other activities specifically related to Quality Control Review of Food Stamp certification. Do not include time spent performing quality assurance, supervisory reviews or other activities that are not an integral part of the required Quality Control Review.

CODE 6111 NAFS-JAIL MATCH - SB 1556 (Chapter 205, Statutes of 1996)

NAFS cases Jail Match casework activities required by SB 1556 includes reviewing and verifying that a recipient identified by the Jail Match System is, or has been, incarcerated; contacting recipients and jail facilities to verify whereabouts and exact dates of incarceration; determining if recipient was eligible for aid and whether an overpayment/overissuance was made, and the amount of the overpayment/overissuance if ineligibility exists for the recipient or case.

MEDI-CAL:

Includes activities performed on behalf of MNO and MI Medi-Cal Program applicants and recipients. MNO activities are defined as those performed on behalf of applicants/recipients that are linked to an aid program and are not currently receiving aid in the form of a cash grant. MI activities are defined as those performed on behalf of nonaided, nonlinked, applicants and recipients provided that they are either: children under 21 years of age, pregnant, or persons residing in an ICF/SNF.

CODE 2151 MEDI-CAL – INTAKE

Includes screening and referral of MNO applicants; accepting and processing initial applications, reapplications, and transfers-in; hearing activities; and preparing and/or presenting a case for hearing. This also includes time spent providing applicants and recipients with voter registration forms and instructions, assisting in completion of these forms as necessary, and processing voter registration forms for submission to the California Secretary of State.

CODE 2153 MEDI-CAL – CONTINUING

Includes processing approved cases, including budget changes, address changes, redeterminations, discontinuances and rescinded discontinuances, income reporting, and hearings for either MNO or MI recipients. Also includes issuing temporary Medi-Cal cards to SSI/SSP recipients who did not receive their regular Medi-Cal card because of a failure of the SSA system, replacing lost or stolen Medi-Cal cards, and providing additional proof of eligibility labels for SSI/SSP recipients.

CODE 2711 SAVE – MEDI-CAL

SIS verification activities for aliens applying for MNO and MI programs. Primary and/or secondary verification activities to establish alien SIS with the INS include: completion of primary and secondary INS verification forms; obtaining, copying, and transmitting alien documents to the INS; comparing INS data with documents submitted by aliens; and execution of consent for

disclosure statement for amnesty and special agricultural worker applicants. SIS should be established for all aliens at application and for all alien recipients at recertification or redetermination.

TANF FISCAL INCENTIVES:

Welfare and Institutions Code Section 10544.1 established performance incentives to counties to move CalWORKs recipients into employment. Counties may use TANF federal incentive funds for expanded services and benefits that directly lead (or can be expected to lead to) the accomplishment of one of the four purposes of the TANF program.

The following Time Study Codes have been established to capture costs for federal reporting purposes, activities consistent with benefits, or services provided under TANF. These codes will only be used for reporting federal fiscal incentives. Counties may no longer report fiscal incentive expenditures to extraneous; all expenditures must be reported under existing and new program codes. Both state and federal fiscal incentive expenditures will continue to be reported on the addendum page. The listing of potential activities below is by no means exhaustive, but serves to illustrate a few possibilities that counties may consider when designing their programs.

TANF FISCAL INCENTIVES – PROGRAMS THAT PROVIDE ASSISTANCE TO NEEDY FAMILIES:

Activities consistent with the first purpose of TANF are those that provide assistance to needy families so children may be cared for in their own homes or in the homes of relatives. It does not cover children living with non-relatives. Benefits or services may include funding of home repairs or food banks to provide groceries to needy families. Benefits provided under this purpose are not limited to those within the definition of "assistance."

CODE 0911 TANF FISCAL INCENTIVES-PROGRAMS THAT PROVIDE ASSISTANCE TO NEEDY FAMILIES-NON-ADMIN

Includes time spent providing program service information to clients, screening and assessments, case management, data collection, and supportive services.

CODE 0951 TANF FISCAL INCENTIVES-PROGRAMS THAT PROVIDE ASSISTANCE TO NEEDY FAMILIES-ADMIN

Includes time spent performing general administrative activities including, but not limited to, coordination of the program, preparation of program plans, budgets and schedules, and program eligibility determinations.

TANF FISCAL INCENTIVES-PROGRAMS THAT END DEPENDENCE OF NEEDY PARENTS:

Activities consistent with the second purpose of TANF are those that end the dependence of needy parents on government benefits by promoting one of three objectives: 1) job preparation; 2) work; and 3) marriage. Activities would include time spent helping any needy parent, including a noncustodial parent or a working parent, by providing employment, job preparation, or training services. Potential services include job or career advancement activities, marriage counseling, refundable earned income tax credits, childcare services, and employment services designed to increase the noncustodial parent's ability to pay child support. Activities that promote any one of the three objectives (i.e., job preparation, work, and marriage) would be consistent with this purpose.

CODE 0921 TANF FISCAL INCENTIVES-PROGRAMS THAT END DEPENDENCE OF NEEDY PARENTS-NON-ADMIN

Includes time spent providing program service information to clients, screening and assessments, case management, data collection and providing supportive services.

CODE 0961 TANF FISCAL INCENTIVES-PROGRAMS THAT END DEPENDENCE OF NEEDY PARENTS-ADMIN

Includes time spent performing general administrative activities including, but not limited to, coordination of the program, preparation of program plans, budgets and schedules, and program eligibility determinations.

TANF FISCAL INCENTIVES – PROGRAMS THAT PREVENT OR REDUCE OUT-OF-WEDLOCK PREGNANCIES:

Activities consistent with the third purpose of TANF are those that prevent and reduce incidence of out-of-wedlock pregnancies, and establish annual numerical goals for preventing and reducing incidence of these pregnancies. Neither this purpose nor the following purpose is limited to needy families or individuals. Potential activities that are reasonably calculated to accomplish this purpose include abstinence programs, visiting nurse services, and programs and services for youth such as counseling, teen pregnancy prevention campaigns, and after-school programs that provide supervision when school is not in session. Counties may also fund a media campaign for the general population on abstinence or preventing out-of-wedlock childbearing.

CODE 0931 TANF FISCAL INCENTIVES – PROGRAMS THAT PREVENT OR REDUCE OUT-OF-WEDLOCK PREGNANCIES – NON-ADMIN.

Includes time spent providing program service information to clients, screening and assessments, case management, data collection and providing supportive services.

CODE 0971 TANF FISCAL INCENTIVES – PROGRAMS THAT PREVENT OR REDUCE OUT-OF-WEDLOCK PREGNANCIES – ADMIN.

Includes time spent performing general administrative activities including but not limited to coordination of the program, preparation of program plans, budgets and schedules, and program eligibility determinations.

TANF FISCAL INCENTIVES – PROGRAMS THAT ENCOURAGE THE FORMATION AND MAINTENANCE OF TWO-PARENT FAMILIES:

Activities consistent with the fourth purpose of TANF are those that encourage the formation and maintenance of two-parent families. This includes parenting skills training, premarital and marriage counseling, and mediation services; activities to promote parental access and visitation; job placement and training services for noncustodial parents; initiatives to promote responsible fatherhood and increase capacity of fathers to provide emotional and financial support for their children; and crisis or intervention services.

CODE 0901 TANF FISCAL INCENTIVES – PROGRAMS THAT ENCOURAGE THE FORMATION AND MAINTENANCE OF TWO-PARENT FAMILIES-NON-ADMIN

Includes time spent providing program service information to clients, screening and assessments, case management, data collection and providing supportive services.

CODE 0941 TANF FISCAL INCENTIVES – PROGRAMS THAT ENCOURAGE THE FORMATION AND MAINTENANCE OF TWO-PARENT FAMILIES - ADMIN

Includes time spent performing general administrative activities including, but not limited to, coordination of the program, preparation of program plans, budgets and schedules and program eligibility determinations.

CODE 7001 GENERIC

Includes time spent by caseworkers performing general administrative activities that essentially provide a department-wide benefit such as developing a manual on casework procedures. This also includes time spent in training, or in conference, or staff meetings when the subject has department-wide benefit or cannot be identified to a specific program. This code is not to be used when performing case management activities, which continue to be recorded to the associated program.

SECTION IV CHILD CARE FUNCTION PROGRAM CODE DESCRIPTIONS 09/05

GENERAL FUNCTION DEFINITION

Any activity related to a child care program, including providing supportive services to CalWORKs applicants/recipients and other eligible participants who are employed or participating in an approved CalWORKs work activity to help enable them to obtain employment.

TIME STUDY STAFF

- **A.** Staff providing child care program, training services, referrals, including case management and needs assessment;
- B. Appeals Workers; and
- **C.** First-line supervisors of A and B above.

CHILD CARE:

Includes securing child care slots; arranging child care purchase of service contracts; matching participant needs to available services; authorizing/ calculating child care payments and registration fees; preparing Notices of Actions (NOAs); coordinating overpayment grant adjustments with caseworker; fraud referrals; coordinating or consulting with other child care delivery systems, and review and verifying of self-certifications forms. Also included is maintaining records for parental complaints; and referral and verification activities in conjunction with local Resource and Referral agency for families who select a license exempt child care provider under CalWORKs.

CHILD CARE STAGES:

CODE 0361 TWO PARENT FAMILIES (STATE ONLY) STAGE ONE-CHILD CARE

Includes broad-based activities by CWDs related to two-parent families who are simultaneously employed or participating in an approved CalWORKs work activity. Activities include initiating and securing child care slots for use by CalWORKs or Tribal Jobs participants within the existing universe of child care providers; arranging child care purchase of service contracts; matching participant needs to available services; authorizing/calculating child care payments and registration fees; and coordinating or consulting

with other child care delivery systems; benefit computations; over and under payments and adjustments; outreach; and preparing for and providing presentations to community groups and organizations; verifying hours, and coordinating overpayment grant adjustments with a caseworker. With implementation of

AB 1542, counties will no longer be required to calculate childcare payments and registration fees within the 75th percentile Regional Market Rate ceiling. Counties will be required to calculate up to the maximum payment rate for all actual CalWORKs child care at 1.5 times the standard deviation above the mean market rate (EC Section 8357[a]).

CODE 0531 SAFETY NET CHILD CARE CASE MANAGEMENT NON-ASSISTANCE

Case management and related activities provided to employed safety net families include, but are not limited to: determining exemptions; arranging for the participant's entry into the WTW component; referring clients to Tribal TANF for securing child care slots; arranging child care purchase of service contracts; matching participant needs to available services; authorizing/calculating child care payments and registration fees; preparing Notices of Actions; coordinating overpayment grant adjustments with the caseworker; fraud referrals; coordinating or consulting with other child care delivery systems; review and verifying of self-certification forms; maintaining records for parental complaints; and referral and verification activities in conjunction with local resource and referral agencies for families who select a license exempt child care provider under CalWORKs.

CODE 0541 SAFETY NET CHILD CARE CASE MANAGEMENT – ASSISTANCE

Case management and related activities are the same as for Time Study Code 0531 except provided to unemployed Safety Net families.

CODE 4531 STAGE ONE CHILD CARE

Includes broad-based activities by CWDs related to initiating and securing child care slots for use by CalWORKs or Tribal Jobs participants who are employed or participating in an approved CalWORKs work activity; program notifications; benefit computations; over and under payments and adjustments; outreach; and preparing for and providing presentations to community groups and organizations; arranging child care purchase of service contracts; matching participant needs to available services and verifying hours; authorizing / calculating child care payments and registration fees; and coordinating or consulting with other child care delivery systems; overpayment NOAs, and coordinating overpayment grant adjustments with the CalWORKs caseworker. With implementation of AB 1542, counties will no longer be required to calculate childcare

payments and registration fees within the 75th percentile Regional Market Rate (RMR) ceiling. Counties will be required to calculate up to the maximum payment rate for all actual CalWORKs child care at 1.5 times the standard deviation above the mean market rate (EC Section 8357[a]).

CODE 9001 UNABLE TO TRANSFER STAGE ONE TO TWO

Includes activities with the Stage One participant's who remain in Stage One because they cannot move to Stage Two or Stage Three childcare and continue to be served by the CWD. Specific activities performed by the CWD includes initiating and securing child care slots for participants who are employed or participating in an approved CalWORKs activity; child care payment activities; program notification, recertifications, benefit computations, authorization actions, over/under payment computations and adjustments, issuance of notices, fraud referrals, hearings, outreach, and preparing for and providing presentations to community groups and organizations.

CODE 9031 STATE ONLY CHILD CARE

Includes activities (described in Code 4531) related to the provision of child care services for legal aliens that are employed or participating in an approved CalWORKs activity who are ineligible under TANF guidelines, but are being served under CalWORKs Welfare to Work Program as State-only cases. This population is defined as individuals that meet federal requirements of a qualified alien, but enter the U.S. on or after 8/22/96 or meet eligibility requirement of an alien described in CDSS EAS 42-431 (7/1/89).

CODE 9051 STAGE TWO CHILD CARE

For CWDs that are Stage Two Alternative Payment Program (APP) providers, this optional code will permit CWDs to capture and track all Stage Two Child Care-related activities for participants who are employed or participating in an approved CalWORKs work activity. Effective January 1, 1998,the California Department of Education (CDE) is the responsible State agency administering Stage Two-Child Care. Samples of Stage Two child care activities performed in cooperation with CDE requirements include: payments; program notifications; benefit computations; over/under payment computations and adjustments; outreach; preparing for and providing presentations to community groups and organizations and verifying hours.

CODE 9071 STAGE THREE CHILD CARE

For CWDs that are Stage Three APP providers, this optional code will permit CWDs to capture and track all Stage Three Child Care related activities for participants who are employed. Effective January 1, 1998, CDE is the responsible State agency administering Stage Three Child Care. Samples of Stage Three child care activities performed, in cooperation with CDE requirements, include: child care usage and actual costs; determining/calculating the amount of child care payments; authorizing payments; verifying hours of employment; providing the recipient with rights and responsibilities information; and statistical reporting.

CAL-LEARN CHILD CARE:

CODE 8111 STATE-ONLY CAL-LEARN CHILD CARE

Includes activities on behalf of sanctioned Cal-Learn participant's who are employed or participating in an approved activity by matching needs to available child care services; authorizing/ calculating child care payments and registration fees; coordinating or consulting with other child care delivery systems. Also includes completing overpayment NOAs and coordinating overpayment grant adjustments with the CalWORKs caseworker. However, with implementation of AB 1542 counties will no longer be required to calculate childcare payment and registration fees within the 75th percentile RMR ceiling. Effective January 1, 1998, counties will be reimbursed up to the maximum payment rate for all actual CalWORKs child care at 1.5 times the standard deviation above the mean market rate.

CODE 9091 CAL-LEARN CHILD CARE

Activities include matching participants who are employed or participating in an approved CalWORKs activity to available childcare services; authorizing/calculating childcare payments and registration fees; coordinating or consulting with other child care delivery systems. Also includes calculating childcare overpayments, completing overpayment NOAs, and coordinating overpayment grant adjustments with the CalWORKs caseworker. However, with implementation of AB 1542 counties will no longer be required to calculate childcare payment and registration fees within the 75th percentile RMR ceiling. Effective January 1, 1998, counties will be reimbursed up to the maximum payment rate for all actual CalWORKs child care at 1.5 times the standard deviation above the mean market rate.

CODE 9121 NONFEDERAL CAL-LEARN CHILD CARE

The State continues to provide aid to recent non-citizen entrants who are non-federally eligible for assistance, but are employed or participating in an approved CalWORKs activity. This population is defined as individuals that meet federal requirements of a qualified alien, but enter the U.S. on or after August 22, 1996 or meet eligibility requirement of an alien described in CDSS EAS 42-431 (7/1/89). Includes activities on behalf of a non-federally eligible participant's needs to available services, authorizing/calculating childcare payment and registration fees, coordinating or consulting with other childcare delivery systems. This also includes calculating childcare overpayment, completing overpayment NOAs, and coordinating overpayment grant adjustment with CalWORKs caseworker. However, with the implementation of AB 1542, counties will no longer be required to calculate childcare payment and registration fees within the 75th percentile RMR ceiling.

OTHER CHILD CARE PROGRAMS/RESOURCES:

CODE 1601 CHILD CARE AND DEVELOPMENT PROGRAM – COUNTY ONLY

Includes eligibility determination, service arrangement, and associated case management for childcare provided under the standard agreement between the county and the California Department of Education.

CODE 9011 CHILD CARE HEALTH AND SAFETY SELF-CERTIFICATION

Includes the following self-certification activities to gather information from childcare providers serving families that receive child care under CalWORKs and Cal-Learn Programs:

Providing an information notice and self-certification form to all families currently using and/or planning to begin using license-exempt providers.

Reviewing and verifying self-certification forms.

Completing pertinent forms and NOAs.

Maintaining records of parental complaints and making this information available to the public upon request.

Informing exempt providers of the parents' complaints and their right to submit rebuttal.

CODE 9021 CHILD CARE TRUSTLINE

Includes the following Trustline registration activities required for families who select a license exempt child care provider under CalWORKs Stage One Childcare and Cal-Learn Programs:

Advising applicants/recipients who choose license exempt child care of the Trustline Program, requirements, and participant responsibilities; Distributing Trustline brochures, applications, and fingerprint cards; Referral and verification activities in conjunction with local Resource and Referral agency, child care provider, andthe California Department of Justice; and

Completion of pertinent forms and NOAs.

CODE 9061 CHILD CARE CAPACITY BUILDING PROGRAM

Includes activities associated with Child Care Capacity Building Program, including all activities associated with capacity building for both licensed and license-exempt providers that best meet local child care needs.

CODE 7001 GENERIC

Includes time spent by caseworkers performing general administrative activities that essentially provide a department-wide benefit such as developing a manual on casework procedures. This also includes time spent training, or in conference, or staff meetings when the subject has department-wide benefit or cannot be identified to a specific program. This code is not to be used when performing case management activities, which continue to be recorded to the associated program.

SECTION V NONWELFARE FUNCTION PROGRAM CODE DESCRIPTION 09/05

GENERAL FUNCTION DEFINITION

Any activity related to a nonwelfare program. Costs of nonwelfare program activities may be identified to this function or as an Extraneous Cost on the CEC. If claimed to the nonwelfare function, all associated overhead costs are allocated to county-only funding. If claimed as extraneous, County Welfare Departments (CWDs) must apply the appropriate indirect cost rate to these nonwelfare costs.

TIME STUDY STAFF

Casework and support staff performing those activities in support of nonwelfare programs administered and/or operated by the CWD must record time to nonwelfare.

NONWELFARE PROGRAMS:

Examples of nonwelfare programs include, but are not limited to, Public Guardian and Veterans Affairs.

State established Nonwelfare codes are as follows:

CODE 8051 NONWELFARE PROGRAMS

This code is to be used for those nonwelfare programs that benefit from county EDP operations/costs.

CODE 8061 NONWELFARE PROGRAMS – NON-EDP

This code is to be used for those nonwelfare programs that do not benefit from county EDP operations/costs.

CODE 7001 GENERIC

Includes time spent by caseworkers performing general administrative activities that essentially provide a department-wide benefit such as developing a manual on casework procedures. This also includes time spent in training, or in conference, or staff meetings when the subject has department-wide benefit or cannot be identified to a specific program. This code is not to be used when performing case management activities, which continue to be recorded to the associated program.

SECTION VI STAFF DEVELOPMENT PROGRAM CODE DESCRIPTION 09/07

45 CFR 1356.60(b) specifies (1) Federal matching funds for State and local training for foster care and adoption assistance under Title IV-E is available at the rate of 75 percent for the costs of: (i) Training personnel employed or preparing for employment by the State or local agency administering the plan, and (ii) Providing short-term training (including travel and per diem expenses) to current and prospective foster or adoptive parents and the members of the State-licensed or approved child care institutions providing care to foster and adopted children receiving Title IV-E assistance. (2) All training activities and costs funded under Title IV-E shall be included in the State agency's training plan for Title IV-B. (3) Short and long term training at educational institutions and in-service training may be provided in accordance with provisions of Section 235.63 through 235.66(a) of this title.

For purposes of 45 CFR 1356.60(b)(1)(ii), the State or local agency administering the plan is limited to State and County Welfare Department (CWD) and another public agency that has responsibility for placement and care and has entered into a Title IV-E Section 472(a)(2) agreement with the CWD to operate Title IV-E. The only agency who currently has this agreement is County Probation.

COSTS REIMBURSABLE AT 75 PERCENT FEDERAL FINANCIAL PARTICIPATION (FFP)

The federal regulations at 45 CFR 235.64 established the guidelines for training expenditures that are eligible for reimbursement at the enhanced rate of 75 percent. These costs include:

Salaries, fringe benefits, travel, and per diem for:

Staff development personnel (including support staff) assigned full time to training functions; and

Staff development personnel assigned part time to training functions to the extent the time is spent performing such functions.

For agency training sessions, FFP is available for:

Salaries, fringe benefits, travel and per diem for employees in initial in-services training of at least one week;

Travel and per diem for employees in agency training sessions away from the employee's work site, or in institutes, seminars, or workshops related to the job and sponsored by professional organizations;

Salaries, fringe benefits, travel and per diem for experts outside the agency engaged to develop or conduct special training programs; and Costs of space, postage, teaching supplies, purchase or development of teaching material and equipment, and costs of maintaining and operating the agency library as an essential resource to the agency's training program.

For training and education outside of the agency, FFP is available for:

Salaries, fringe benefits, dependency allowance, travel, tuition, books and educational supplies for employees in full-time, long-term training programs (with no assigned agency duties);

Salaries, fringe benefits, travel, tuition, books, and educational supplies for employees in full-time, short-term training programs of four or more consecutive work weeks:

Travel, per diem, tuition, books, and educational supplies for employees in short-term training programs of less than four consecutive work weeks, or part-time training programs; and

Employees in full-time, long-term training who make a commitment to work in the local agency for a period of time equal to the period of which financial assistance is granted.

For training and education for persons preparing for employment with the local agency, FFP is available for:

Stipends, travel, tuition, books and educational supplies for persons preparing for employment with the State or local agency, as long as the following conditions are met:

- o The individual is selected by the local agency and accepted by the school;
- The program is approved by the State;
- The individual has a legally binding commitment to work for the local agency for a period of time at least equal to the period for which financial assistance is granted;
- The local agency offers the individual a job within tow months after completion of training;
- The State evaluates the program;
- The local agency keeps a record of the employment of persons trained which also specifies the reason for non-employment; and
- Any recoupment of funds from trainees failing to fulfill their commitment shall be deducted from total training costs.

In addition, FFP is available for:

Payments to educational institutions to develop, expand, or improve training for agency personnel for salaries, fringe benefits, and travel for instructors, clerical assistance, teaching materials, and equipment; and

Providing short-term training (including travel and per diem) to current and prospective foster or adoptive parents, and the members of the state-licensed or approved child care institution providing care to foster and adoptive children receiving Title IV-E assistance.

COSTS REIMBURSABLE AT 50 PERCENT FFP

The costs of training any other county staff are eligible only for the 50 percent Title IV-E administrative match rate provided that the staff is contracted by the CWD to perform a Title IV-E administrative function and training is necessary for such staff to perform the Title IV-E administrative function, e.g. multi-disciplinary teams.

COST NOT ELIGIBLE UNDER STAFF DEVELOPMENT AND TRAINING

The federal regulations do not allow the following costs to be claimed as staff development and training, but may be claimed under Title IV-E administrative costs:

Salaries of supervisors (day-to-day supervision of staff is not a training activity); and

Employment of students on a temporary basis, such as in the summertime.

COSTS NOT ELIGIBLE FOR TITLE IV-E

FFP is for administrative costs necessary for the proper and efficient administration of the Title IV-E State Plan. Therefore, county staff, which are not necessary for the administration of the Title IV-E foster care program, are not eligible for claiming Title IV-E for training.

Training costs must be relevant to the operation of the Title IV-E foster care and adoption assistance programs. For example, training mandated reporters is not eligible for Title IV-E at any rate. Similarly, training for hotline workers, and emergency response workers such as investigating allegations of child abuse and neglect is not considered necessary for administering Title IV-E.

DISCOUNT RATE

It should be noted that <u>all</u> Title IV-E training costs will have a non-federal discount rate applied pursuant to California's countrywide cost allocation plan. The discount rate is applied automatically on the county expense claim using each county's individual non-federal discount rate.

Please ensure local procedures for claiming Title IV-E training costs are in compliance with federal regulations.

GENERAL FUNCTION DEFINITION

Staff development personnel are required to complete a continuous time study. In addition, part-time staff must record time spent performing staff development activities on a continuous basis as well.

TIME STUDY STAFF

Trainers, their first-line supervisors, and non-supervisory training coordinators time study to staff development all activities that are specified in the county's Annual Training Plan. For staff not assigned full-time, non-staff development time is recorded as casework or administrative activity in accordance with Support Staff Time Reporting Plan (SSTRP).

Clerical staff, who are assigned to support the staff development unit, record this time to Staff Development Support on the DFA 7. For those staff who also provide support to non-staff development units, non-staff development support time is recorded in accordance with SSTRP and, as a result, their salaries and benefits are prorated between Staff development Costs and other applicable cost pools.

Second-line staff development supervisors who are assigned to the staff development unit record their time to Staff Development Support on the DFA 7. If not assigned solely to staff development, non-staff development time is recorded in accordance with SSTRP, their salaries and benefits are prorated between Support Staff Costs and Staff Development Costs pools.

Staff Development Trainees do not time study to staff development.

- Caseworkers attending induction training or full-time training of at least four consecutive weeks do not complete any time study.
- Caseworkers in continuing training record the time to the benefiting program as a casework activity; generic training is recorded as generic.
- In SSTRP counties, administrative and clerical staff record time for program or function-related training to the level approved in SSTRP on the Support Staff Time Report; generic training is recorded as generic.

TIME STUDY INSTRUCTIONS

Staff development activities include planning, needs assessment, course design, presenting training, monitoring and evaluation. Staff development activities are identified to tree categories: function, specific to program, or generic. Identify activities to the category based on the following definitions:

<u>Function</u>: The training activity relates to a function, but is not specific to one program within the function:

- Social Services General
- o CalWORKs General
- Other Public Welfare General
- Child Care General
- Nonwelfare General
- o Generic

<u>Program</u>: The training activity relates to one or more specific programs that can be identified. For example, CalWORKs eligibility worker induction training covers both Food Stamp and CalWORKs programs, the training activity is prorated between the two programs based on training time spent in each program area. Activities are recorded to programs using the appropriate four-digit code; refer to Program Code Description for each function to obtain the appropriate code. <u>Generic</u>: The training activity does not relate to a particular function or program. Some examples of Generic training subjects are time management, supervising techniques, civil rights, first aid, and stress reduction.

SECTION VII ELECTRONIC DATA PROCESSING (EDP) PROGRAM CODE DESCRIPTION 03/01

TIME STUDY STAFF

County welfare department employees who are assigned to perform EDP activities on a temporary or permanent basis will record time as specified. Eligible EDP activities include: analysis, feasibility and system studies, system design, development, programming, implementation, and maintenance.

Electronic data processing staff and first-line EDP supervisors who perform these EDP activities will record time to developmental or maintenance and operations (i.e., M and O) category, as applicable. These staff must complete continuous time studies.

Other CWD staff who are temporarily assigned to perform EDP activities will record their EDP time to the developmental category only. Their non-EDP time will be recorded, as applicable, to those activities in accordance with Staff Support Time Reporting Plan (SSTRP). Both the EDP and non-EDP time must be recorded on a continuous basis in order to capture total hours worked for the day.

Administrative and clerical staff who are assigned to support the EDP unit record this time to EDP Support on the DFA 7. For those staff who also provide support to the non-EDP units, the non-EDP support time is recorded in accordance with the SSTRP, and as a result their salaries and benefits are prorated between EDP and other cost pools.

TIME STUDY INSTRUCTIONS

County welfare department staff are required to record their EDP activities as M and O or developmental.

M and O:

Activities are recorded to the program, function, or SAWS project, if EDP activity benefits one specific program, function or one SAWS project. If the activity benefits more than one function, the activity is recorded to Generic. Record activities to these designators:

A. Social Services	B3. SAWS	E. Nonwelfare
B1. CalWORKs	C. Other Public Welfare	F. Generic
B2. Central Data Base SAWS	D. Child Care	G. Direct-to-Program

Developmental Projects:

Activities or Purchase of Service benefiting developmental projects are recorded to project number, project title, and/or program code.

SECTION VIII SUPPORT STAFF TIME REPORTING INSTRUCTIONS 06/06

STAFF REQUIRED TO COMPLETE SUPPORT STAFF TIME REPORT (DFA 7)

The DFA 7 is completed by all county welfare department (CWD) support staff who perform department administrative support, program administrative support, and clerical support identified in the Support Staff Time Reporting Plan (SSTRP). In non-SSTRP counties, CWD support staff complete the DFA 7 if they perform: direct service delivery, electronic data processing (EDP) support, staff development support, nonwelfare activities, or direct-to-program/functions.

SUPPORT STAFF SALARY POOLS

General Administrative Support: Staff (includes both management/supervisory and clerical) who perform activities having department-wide benefit or who are not in direct support of casework staff.

Program Administrative Support: Administrative staff who predominantly supports casework staff.

Clerical Support: Clerical staff who are predominantly in direct support of casework staff.

BENEFITING LEVEL

Generic: Activities of unit staff typically have department wide benefit. EDP Support: Staff who are organizationally assigned to support an EDP office on a full- or part-time basis. The salary of individuals reporting time to EDP support will be reported on the DFA 325.1A, EDP Cost Detail Schedule. Staff Development Support: Staff who are organizationally assigned to support a staff development office on a full- or part-time basis. The salary of individuals reporting time to staff development support will be reported on the DFA 325.1C, Staff Development Schedule.

Nonwelfare: Staff who supports nonwelfare activities.

Function(s): Activities of unit staff are identified to one or more of the functions individually.

Multifunction: Activities of unit staff are identified to combined functions. There are now 25 combinations of functions. Staff should write on their time studies the functions they support. Multifunction combinations are available each quarter on the CEC template.

Direct Service Delivery (DSD): The DSD codes listed below are for use by staff who provide services to clients on a full- or part-time basis. The salary of individuals who perform DSD will be reported on the DFA 325.1B, Direct Cost Schedule.

Direct-to-Program/Functions: Activities time studied to functions/programs by recording the applicable alphanumeric support staff codes that are listed below.

NONWELFARE SUPPORT TIME

Support staff salaries, benefits and overhead costs (determined by the indirect cost rate) will be identified to the Direct Cost pool when there are no casework hours for the nonwelfare program. Counties shall report nonwelfare support costs, when there are casework hours, to the Nonwelfare Function to allow for appropriate distribution of allocable costs.

COMPLETING THE DFA 7

Check the appropriate box to indicate the worker's classification: General/Direct-to Program/Function management/supervisory or clerical, EDP support, or staff development support. A worker may have more than one classification. If a worker is recording time to the program level, enter the program code from the appropriate function Program Code Descriptions and record on the generic DFA 7.

Record travel and continuing training time to the program or function level approved in the SSTRP. Travel and training time having a department-wide benefit or cannot be identified to a program or function will be recorded as generic. For staff not included in a SSTRP, record this time to time study code used for all other customary activity.

- Time Study Staff
- o Complete the DFA 7 on a daily basis throughout the month.
- Check Time Study box.

Time Certification Staff

Record nonallocable time daily; record total allocable time at the end of the month only.

Check the Time Certification box.

At the end of each time study month, each first-line supervisor will attest to the accuracy of the time studies and certifications completed by employees in their units by signing the designated line.

TIME REPORTING INSTRUCTIONS FOR FIRST-LINE SUPERVISORS

First-line supervisors may certify time spent supervising their unit if their staff certify. If their staff time study they must prorate their supervisory time based on the allocable time reported by unit staff.

TIME REPORTING FOR SECOND-LINE SUPERVISORS THROUGH DIRECTORS

Second-line supervisors and above will time study/time certify as specified in the SSTRP. Please refer to General Time Study Instructions.

SECTION IX DIRECT-TO-PROGRAM/FUNCTION SUPPORT STAFF CODES 09/ 07

SOCIAL SERVICES FUNCTION

A1	IHSS	
	IHSS-PCSP/Non HR	103
	IHSS – Non PCSP/Non HR	104
A2	CSBG	
	CSBG-HR	114
	CSBG	115
A3	Adoptions	
	Adoptions - Case Management	117
	Independent Adoptions	118
A4	SSI/SSP Out-of-Home Care	135
A5	RRP	
	RRP – CWS	140
	RRP – CSBG	141
	RRP – Unaccompanied Minors	142
A6	CWS	
	CWS – Eligibility Determination	143
	CWS – HR	144
	CWS – Training	145
	CWS – Services, Nonfederal	146
	CWS – Court Related Activities	147
	CWS - Case Management	148
A7	Early Periodic Screening, Detection, and Treatment	150
A8	Foster Family Licensing	
	Foster Family Licensing	155
A9	Licensing – Day Care	157
A10	Cohort 1- Sac/Placer	032
A11	FPP	
	FPP – HR	168
	FPP – Services	175
	FPP Pre-Placement Prevention CM	177
	FPP – Case Management – Foster Care	179
A12	ILP	
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A13	DTP Support Staff Code	003
A14	Emergency Assistance (EA) - CWS	
	EA – ER	513
	EA – FC Eligibility	223

A15	PSSF Support Services	516
A16	PSSF Adoption and Promotion	675
A17	Time Limited Family Reunification	676
A18	Edu and Trng Voucher	067
A19	CWS – Minor Parent Investigation	544
A20	CWS - MPS	556
A21	IHSS – CSBG	330
A22	AB 2129 – Foster Parent Recruitment	506
A23	FPSP – Family Preservation Services	515
A25	Adult Protective Services (APS)	
	APS – Emergency Response	569
	APS – Case Management	570
	APS – HR – Response	573
	APS – HR – Case Management	574
A28	STOP – Assessment/Case Plan	588
A31	Specialized Training for Adoptive Parents (STAP)	005
A32	Intensive Services Case Management	010
A33	Wraparound Services Case Management	012
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SECTION X DIRECT SERVICE DELIVERY (DSD) CODES 09/04

SOCIAL SERVICES FUNCTION

<u>PIN</u>	TITLE	PROGRAM
101060	DSD	IHSS-Welfare Staff Service Providers
102060	DSD	IHSS-Skilled Professional Medical Personnel
103003	Transportation	IHSS-HR/Personal Care Services Program
103260	DSD	(PCSP) IHSS-Supported Individual Providers (SIP) PCSP/WAIVER
103360	DSD	IHSS-SIP-HR
104160	DSD	IHSS-SIP-Non-HR/PCSP/Waiver
108060	DSD	IHSS-PCSP-Welfare Staff Service Providers
113060	DSD	CSBG-SPMP
114003	Transportation	CSBG-HR
115003	Transportation	CSBG
117003	Transportation	Adoptions-Case Management
138060	DSD	CWS-SPMP
141003	Transportation	Refugee Resettlement Program (RRP)/CSBG Services
144103	Transportation	CWS-HR/Emergency Response (ER)
144203	Transportation	CWS-HR/Family Maintenance (FM)
144303	Transportation	CWS-HR/Family Reunification (FR)
144403	Transportation	CWS-HR/Permanent Placement (PP)
147103	Transportation	CWS-Court-Related/ER
147203	Transportation	CWS-Court-Related/FM
147303	Transportation	CWS-Court-Related/FR
147403	Transportation	CWS-Court-Related/PP
148103	Transportation	CWS-Case Management/ER
148303	Transportation	CWS-Case Management/FR
148403	Transportation	CWS-Case Management/PP
159060	DSD	FPP-SPMP
168003	Transportation	FPP-HR
175003	Transportation	FPP-Counseling/Nonfederal
179003	Transportation	FPP-Case Management: Foster Care
184003	Transportation	ILP-Services
184060	DSD	ILP-Services
515060	DSD	FPSP-Family Preservation Services
516060	DSD	FPSP-Family Support Services
569060	DSD	APS Response
570060	DSD	APS Case Management
573060	DSD	APS HR-Response

574060	DSD	APS HR-Case Management
570400	DOD	E to a la INValenta a A lastatacta

Extended Voluntary Administration 578160 DSD

CalWORKs FUNCTION

<u>PIN</u>	<u>TITLE</u>	<u>PROGRAM</u>
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Transportation Transportation Transportation Nonfederal WTW 451003

Food Stamp Employment and Training 468003

OTHER PUBLIC WELFARE PROGRAMS FUNCTION

<u>PIN</u>	<u>TITLE</u>	<u>PROGRAM</u>
211025 215060 217060	Food Stamp Issuance DSD DSD	Food Stamp Issuance Medi-Cal CMSP/Non-RRP/CHEP
349060	DSD	Medi-Cal Section 1931

SECTION XI GENERAL TIME STUDY INSTRUCTIONS 06/04

GENERAL INSTRUCTIONS FOR COMPLETING THE TIME STUDY

Complete the time study on a continuous basis throughout the day.

Round hours to the nearest quarter hour.

Record the total hours worked for each day; do not record overtime (OT) and compensating time off (CTO) hours worked in the total hours for the day. When CTO is used, record the time to the program or activity that caused the overtime. If the county is unable to track CTO to the program that caused the overtime, CTO may be recorded as nonallocable when used.

Record travel time to the program with which it is associated.

Record docks, furlough, leave without pay, holidays, jury duty, military leave, sick leave, and vacation as nonallocable. Lunch and normal days off are not recorded.

Time spent on breaks are allocable hours and must be reported to the last activity that staff was performing prior to going on break.

Record time spent in continuing training to the associated program; if not identifiable to a program, record as generic.

Record quality control/quality assurance and program integrity activities to the associated program.

Record time for conferences and staff meetings to the associated program or function; if not identifiable to either, record as generic.

The total allocable and nonallocable hours recorded for each day must equal the total assigned routine work hours as defined by the County Welfare Department (CWD).

Caseworkers, who perform administrative activities, whether full-time or part-time, will record these activities to generic.

First-line supervisors of caseworkers record their nonallocable time and any direct time spent on casework activities on a daily basis. Time spent on supervision is allocated to the appropriate programs at the end of the time study period based on the allocable time of their staff.