



FAMILY INDEPENDENCE ADMINISTRATION

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POLICY BULLETIN #11-70-OPE

(This Policy Bulletin Replaces PB #04-172-OPE)

REVISION TO THE “ARE YOU DISABLED?” BROCHURE

Date: August 4, 2011	Subtopic: Forms
<p> This procedure can now be accessed on the FIAweb.</p>	<p>The purpose of this policy bulletin is to inform all staff that the “Are You Disabled?” (Formerly W-681A, now BRC-681A) brochure has been renumbered and revised to reflect the Agency’s most current terminology and logo.</p> <p>Additional revisions to the original brochure are as follows:</p> <ul style="list-style-type: none"> • The form number has been changed from W-681A to BRC-681A, which now makes the old form and number obsolete. • The graphics, color scheme, and format of the brochure have been revised. • The Commissioner’s name has been updated. • The term “Public Assistance” has been replaced with “Cash Assistance,” where appropriate. <p>BRC-681A explains the ways in which the Agency accommodates applicants/participants with mental and physical impairments, and consists of six sections:</p> <p>“Are You Disabled?” (Cover Page):</p> <p>The text reads, “Do you need assistance with your application, recertification or other program requirements?”</p> <p>Section 2:</p> <p>The text reads, “If you are physically or mentally disabled and as a result you need help completing your forms or have difficulty waiting to be interviewed, please notify the Receptionist or your Worker.”</p>

HAVE QUESTIONS ABOUT THIS PROCEDURE?
Call 718-557-1313 then press 3 at the prompt followed by 1 or
send an e-mail to *FIA Call Center Fax* or fax to: (917) 639-0298

“What Is A Reasonable Accommodation?” (Section 3)

This section lists examples of reasonable accommodations offered by HRA for people with disabilities, and a partial list of conditions that may be disabling.

“How Do I Request A Reasonable Accommodation?” (Section 4)

This section informs the applicant/participant that he/she can make an oral request for a reasonable accommodation at his/her local Center, and that if the oral request is denied, he/she can request a reasonable accommodation in writing.

Submitting a written request.

To submit a written request, the applicant/participant must complete the Reasonable Accommodation Request (RAR) form which can be obtained in the following manner:

- from his/her local Center;
- by calling the Office of Constituent Services (OCS) at (212) 331-4640;
- by sending a fax to OCS at (212) 839-4685/86; or
- by emailing OCS at constituentaffairs@hra.nyc.gov.

Submitting the RAR form.

Once the RAR form is completed, including the medical documentation section which must be filled out by the applicant/participant’s doctor, it can be submitted by US mail, fax or email to the Human Resources Administration, Office of Constituent Services, 180 Water Street, New York, NY 10038, Fax: (212) 331-4685/6, constituentaffairs@hra.nyc.gov.

HRA will evaluate the request and determine if the reasonable accommodation requested is appropriate.

“Please Note” (Section 5):

In this section, HRA reiterates its policy that no individual shall, on the basis of a disability, be subjected to any discrimination with regard to access to programs, activities, or services.

The contact information for the Agency’s Americans With Disabilities Act (ADA) Compliance Officer, was revised to include the following email address: ADAOLA@hra.nyc.gov

“If You Need Help” (Section 6):

This section informs the applicant/participant that HRA can help provide assistance to participants with physical and/or mental impairments to ensure that such participants receive meaningful access to the Agency’s programs, benefits, and services.

Forms **M-90c**, **M-90d**, and **M-90e**.

Note: BRC-681A must be included in the Cash Assistance Application Kit (**M-90c**), the Cash Assistance Recertification Kit (**M-90d**) and the Non Cash Assistance Food Stamp (NCA FS) Application and Recertification Kit (**M-90e**).

Job Center Directors and NCA FS Center Managers must ensure that all versions of **W-681A** and its multilingual equivalents are removed from circulation and recycled.

Effective Immediately

Attachments:

☞ Please use Print on Demand to obtain copies of forms.

- BRC-681A** “Are You Disabled?” Brochure (Rev. 5/11)
- BRC-681A (S)** “Are You Disabled?” Brochure (Spanish) (Rev. 5/11)
- W-681A** “Are You Disabled?” Brochure (Obsolete)
- W-681A (S)** “Are You Disabled?” Brochure (Spanish) (Obsolete)

PLEASE NOTE

No qualified individual shall, on the basis of disability, be subject to discrimination in programs, activities, or services of the Human Resources Administration.

If you believe you or a member of your household has been discriminated against because of a disability for a reason other than a denial of a reasonable accommodation, you may direct a complaint by letter, fax, or email to:

**ADA Compliance Officer
Human Resources
Administration/Office of Legal Affairs
180 Water Street, 17th floor
New York, NY 10038
Fax: 212-331-4465
Email: ADAOLA@hra.nyc.gov**

The complaint shall include your name, mailing address, telephone number, and HRA case number, if available. The complaint shall specify the date and location of the incident, names and titles of agency employees, and the HRA center, program or service involved. In addition, the complaint shall describe the particular way in which you believe you were discriminated against.

IF YOU NEED HELP

If it is difficult to meet HRA's requirements because of a physical or mental limitation, we can help.

HRA recognizes its responsibility under the law to provide reasonable accommodations to people with disabilities. HRA is also required to make reasonable modifications to its policies and procedures to ensure that people with disabilities receive meaningful access to HRA programs and services, except where such a change would be a fundamental alteration of HRA practices.



Michael R. Bloomberg
Mayor

**Human Resources
Administration**
Department of
Social Services

Robert Doar
Commissioner

BRC-681A LLF
Rev. 05/11

**Include in the Application/
Recertification Kit**

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Are You Disabled?

Do you need assistance with your application, recertification or other program requirements?



NYC Human Resources
Administration
Department of
Social Services

WHAT IS A REASONABLE ACCOMMODATION?

Examples of a reasonable accommodation offered by HRA for people with disabilities are:

- flexible scheduling
- priority appointments
- sign language interpreters
- assisting applicants with the completion of forms
- conducting business by telephone, fax, or mail, where appropriate
- home visits, where necessary

If you need a reasonable accommodation to participate in a program activity or to receive a public benefit or service, you may use HRA's reasonable accommodation process, as described on the next page.

Here is a partial list of conditions that may be disabling:

- **Cancer**
- **Hearing impairment**
- **Epilepsy**
- **AIDS/HIV-related conditions**
- **High blood pressure**
- **Mental illness**
- **Heart disease**
- **Cerebral palsy**
- **Orthopedic-related conditions**
- **Speech impairment**
- **Visual impairment**

If you are physically or mentally disabled and as a result you need help completing your forms or have difficulty waiting to be interviewed, please notify the Receptionist or your Worker.

HOW DO I REQUEST A REASONABLE ACCOMMODATION??

You may make an oral request for a reasonable accommodation to your local Center. If your oral request is denied, you may request a reasonable accommodation in writing.

To submit a written request, you must complete the **Reasonable Accommodation Request (RAR)** form. You can obtain an RAR form from your local Center or you may call the **Office of Constituent Services (OCS)** at **212-331-4640**, fax OCS at **212-331-4685/86**, or email OCS at **constituentservices@hra.nyc.gov** to obtain a copy. Your doctor will also need to complete the section of the form that asks for medical documentation.

Once the RAR form is completed, you may mail, email, or fax the RAR form along with the required medical documentation to:

**Human Resources Administration
Office of Constituent Services
180 Water Street
New York, NY 10038
Fax: 212-331-4685 or 212-331-4686
Email: constituentservices@hra.nyc.gov**

You may also submit the RAR form and required medical documentation to HRA in person at your local Center. If your disability prevents you from completing the RAR, you may call OCS for assistance at **212-331-4640**.

HRA will evaluate the request and determine if the reasonable accommodation you requested is appropriate.

POR FAVOR NOTAR

Ninguna persona cualificada debe ser sujeta a discriminación, por motivo de incapacidad, en los programas, actividades, o servicios de la Administración de Recursos Humanos.

Si cree que usted o algún miembro de su familia ha sido discriminado(a) por su incapacidad por un motivo que no sea un arreglo razonable denegado, puede enviar una carta de queja, un fax, o email a:

ADA Compliance Officer
Human Resources Administration/Office of Legal Affairs
180 Water Street, 17th floor
New York, NY 10038
Fax: 212-331-4465
Email: ADAOLA@hra.nyc.gov

La queja debe incluir su nombre, dirección, número de teléfono, y el número de caso de la HRA, si está disponible. La queja debe especificar la fecha y lugar del incidente, nombres y títulos de los empleados de la agencia, y el programa o servicio involucrado del Centro de HRA. Además, la queja debe describir la manera particular en que usted cree fue discriminado.

SI NECESITA AYUDA

Si le resulta difícil cumplir los requisitos de la HRA debido a una limitación física o mental, nosotros le podemos ayudar.

La Administración de Recursos Humanos (Human Resources Administration – HRA) reconoce su responsabilidad, conforme a la ley, de facilitar los arreglos razonables a las personas incapacitadas. Además, la HRA debe modificar sus políticas y procedimientos de modo razonable para garantizar que las personas incapacitadas reciban acceso beneficioso a los programas y servicios de la HRA, excepto en caso de que los cambios supongan una alteración fundamental de las prácticas de la HRA.



Michael R. Bloomberg
Mayor

Human Resources Administration
Department of Social Services

Robert Doar
Commissioner

BRC-681A LLF
Rev. 04/11

**Include in the Application/
Recertification Kit**

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¿Está Usted Incapacitado?

¿Necesita ayuda con su solicitud, recertificación u otro requisito del programa?



NYC Human Resources Administration
Department of Social Services

¿EN QUÉ CONSISTE UN ARREGLO RAZONABLE?

Los siguientes son ejemplos de arreglos razonables realizados por la HRA para las personas incapacitadas:

- horario flexible
- citas prioritarias
- intérpretes de lenguaje de señas.
- asistencia a solicitantes para llenar los formularios
- trámites telefónicos, por fax, o por correo, según convenga
- visitas al hogar, en caso necesario

Si necesita un arreglo razonable para participar en un programa de actividad o para recibir beneficio público o servicio, usted puede usar el proceso de arreglo razonable de la HRA, según se describe en la siguiente página.

A continuación aparece una lista parcial de condiciones médicas que pueden causar incapacidad:

- Cáncer
- Sordera
- Epilepsia
- VIH/SIDA o enfermedades relacionadas
- Presión sanguínea alta
- Problemas mentales
- Problemas cardíacos
- Parálisis cerebral
- Enfermedades relacionadas con la ortopedia
- Impedimentos del habla
- Impedimentos de la vista

¿CÓMO SOLICITO UN ARREGLO RAZONABLE?

Usted puede presentar una solicitud oral o por escrito para un arreglo razonable a su Centro Local. Si su solicitud oral es rechazada, usted puede solicitar un arreglo razonable por escrito.


Para presentar una solicitud por escrito, usted debe llenar el formulario de **Solicitud de Arreglo Razonable (RAR)**. Usted puede obtener un formulario de RAR en su Centro local, o si no puede llamar a la **Office of Constituent Services (Oficina de Servicios para los Electores – OCS)** al **212-331-4640**, o mandar un fax a OCS al **212-331-4685/86**, o mandar un email a OCS a **constituentsaffairs@hra.nyc.gov** para obtener una copia. Su médico también tiene que llenar la sección del formulario que pide documentación médica.

Una vez llenado el formulario RAR, usted debe enviarlo por correo, fax o email junto con los documentos médicos solicitados a:

**Human Resources Administration
Office of Constituent Services
180 Water Street
New York, NY 10038
Fax: 212-331-4685 o 212-331-4686
Email: constituentsaffairs@hra.nyc.gov**

Usted puede además presentar el formulario de RAR y la documentación médica requerida al HRA en su Centro Local. Si su incapacidad no le permite que complete el formulario de RAR, puede llamar al OCS para solicitar ayuda al **212-331-4640**.

HRA evaluará el pedido y determinará si el arreglo razonable que solicitó es apropiado.



Si usted es una persona física o mentalmente incapacitada y por consiguiente necesita ayuda para llenar los formularios o si le resulta difícil esperar su entrevista, favor de avisar en la Recepción o a su Trabajador.

HRA Grievance Procedure

Any applicant or participant who believes s/he has been discriminated against based on a mental or physical disability or denied a reasonable accommodation in any Human Resources Administration (HRA) program may file a written complaint. The complaint shall contain information about the alleged discrimination, including the name, address and telephone number of the complainant, the location, date, description of the problem and, if applicable, any current medical documentation necessary to support a request for a reasonable accommodation. HRA shall provide assistance to any person with a disability who needs a reasonable accommodation to enable him/her to file a complaint. The complaint shall be submitted no later than 60 calendar days after the alleged violation to:

ADA Compliance Officer
Office of Legal Affairs
180 Water Street, 17th Floor
New York, NY 10038
or
Fax: (212) 331-4465

OBSOLETE



The City of New York
Human Resources Administration

Are You Disabled?

Do you require assistance
with your application or
recertification?

If you are physically or
mentally disabled and as a result
you need help completing your forms or
have difficulty waiting to be interviewed,
please notify the Receptionist or your Worker.



Service Assistance

The Americans with Disabilities Act states that no “qualified individual with a disability” can be excluded by reason of such disability from programs or activities of a public entity.

You are a “qualified individual with a disability” if you meet the essential eligibility requirements of our program, with or without reasonable modifications to our policies or practices.

The Human Resources Administration (HRA) recognizes its responsibility under the law to make reasonable accommodations to the physical or mental limitations of individuals applying for or in receipt of social services, including but not limited to cash assistance, medical assistance and/or food stamps.

The Director’s Designee in Job Centers and the Mail Processing Unit in Non-Public Assistance Food Stamp (NPA-FS) Offices will assist applicants and participants when special help is needed.

Home visits may be arranged for homebound individuals who are applying for or in receipt of public assistance. Telephone interviews and, if necessary, mail certifications can be arranged for homebound individuals in receipt of or applying for food stamps. Contact the Receptionist or your Worker for more information.

If you feel that your request for assistance based on your disability has not been addressed, you may contact the Fair Hearing and Conference Unit (FH&C) in a Job Center. In Non-Public Assistance Food Stamp (NPA-FS) Offices, you can contact the Receptionist and request to speak to the Office Site Manager or his/her designee.



Did You Know?

As a person with a disability, your rights with HRA are protected by Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act. These laws define a person with a disability as anyone with a physical or mental disability that substantially impairs or restricts one of the major life activities, such as walking, seeing, hearing, speaking, working or learning.

A record of such an impairment, or being regarded as a person with such an impairment, is also recognized as a disability under these regulations.

Here is a partial list of conditions that may be disabling:

- Cancer
- Hearing impairment
- Epilepsy
- AIDS/HIV-related conditions
- High blood pressure
- Mental illness
- Heart disease
- Cerebral palsy
- Orthopedic-related conditions
- Speech impairment
- Visual impairment

Procedimiento de Agravios de la HRA

Todo solicitante o participante que se considere haber sido víctima de discriminación a causa de una incapacidad física o mental en cualquier programa de la Administración de Recursos Humanos (HRA), puede presentar una queja por escrito. Dicha queja debe presentar información sobre la discriminación alegada, e incluir nombre, dirección y número de teléfono del demandante, así como lugar, fecha y descripción del problema. Si corresponde, también debe incluir cualquier documentación médica necesaria para justificar la petición de adaptaciones razonables. La HRA le proporcionará asistencia a toda persona con una incapacidad quien necesite adaptaciones razonables para presentar una queja. La queja debe presentarse dentro de 60 días de la discriminación alegada a:

ADA Compliance Officer
Office of Legal Affairs
180 Water Street, 17th Floor
New York, NY 10038

o
Por fax: (212) 331-4465

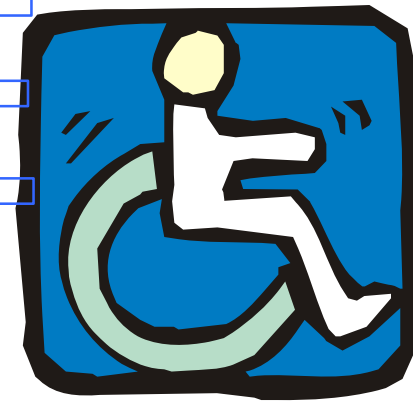


The City of New York
Human Resources Administration

¿Está Usted Incapacitado?

¿Necesita ayuda con su solicitud o recertificación?

OBSOLETE



Si usted es una persona física o mentalmente incapacitada y por consiguiente necesita ayuda para llenar los formularios o si le resulta difícil esperar para su entrevista, favor de avisar en la Recepción o a su Trabajador.

Servicios de Ayuda

La Ley de los Norteamericanos Incapacitados (Americans with Disabilities Act) estipula que ninguna “persona calificada” debe ser excluida, debido a su incapacidad, de programas y actividades de entidades públicas.

Se considera una “persona calificada” toda aquella persona incapacitada que cumple los requisitos de elegibilidad básicos de nuestro programa o las modificaciones razonables de nuestras políticas o prácticas.

La Administración de Recursos Humanos (Human Resources Administration – HRA) reconoce su responsabilidad conforme a la ley de hacer los arreglos que puedan facilitarle al solicitante incapacitado física o mentalmente su solicitud de servicios sociales, incluidos la ayuda en efectivo, ayuda médica y/o cupones para alimentos.

La Persona Designada por el Director en los Centros de Trabajo y la Unidad de Correos en las Oficinas de Cupones para Alimentos de No Asistencia Pública (Non-Public Assistance Food Stamps – NPA FS) le prestará ayuda especial al solicitante y participante que la necesite.

Las personas confinadas al hogar que soliciten o reciban asistencia pública pueden ser visitadas al domicilio. A las personas confinadas al hogar que soliciten o reciban cupones para alimentos se les pueden programar entrevistas por teléfono, y si es necesario, enviarles certificaciones por correo. Para más información comuníquese con la Recepción o su Trabajador.

Si usted estima que su solicitud de asistencia no ha sido atendida debido a su incapacidad, puede comunicarse con la Unidad de Conferencias y Audiencias Imparciales (Fair Hearing and Conference Unit – FH&C) en un Centro de Trabajo. En las Oficinas de Cupones para Alimentos de No Asistencia Pública, puede dirigirse a la Recepción y pedir que le atienda el Gerente de la Oficina o la persona designada.



¿Sabía Usted?

La HRA protege los derechos de las personas incapacitadas conforme a la Ley de Rehabilitación de 1973 Sección 504 y la Ley de los Norteamericanos Incapacitados. Estas leyes definen a la persona incapacitada como toda aquélla con impedimentos físicos o mentales que restrinjan considerablemente cualquiera de las actividades diarias principales como: caminar, ver, oír, hablar, trabajar, o aprender.

Bajo dichas reglas se reconoce también como persona incapacitada a toda aquella que posea documentación con respecto a su padecimiento, o que se le considere incapacitada por dichas reglas.

A continuación aparece una lista parcial de condiciones médicas que pueden causar incapacidad:

- Cáncer
- Sordera
- Epilepsia
- VIH/SIDA o enfermedades relacionadas
- Presión sanguínea alta
- Problemas mentales
- Problemas cardíacos
- Parálisis cerebral
- Enfermedades relacionadas con la ortopedia
- Impedimentos del habla
- Impedimentos de la vista