

FAMILY INDEPENDENCE ADMINISTRATION

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POLICY BULLETIN #04-172-OPE

REVISED ARE YOU DISABLED? PAMPHLET (FORM W-681A)

| Date: | Subtopic(s): |
|---|---|
| September 28, 2004 | Forms |
| This procedure can now be accessed on the FIAweb. | This policy bulletin is to inform staff that the Are You Disabled? Pamphlet (Form W-681A) has been revised. The W-681A is included in all Public Assistance and Non-Public Assistance Food Stamp Application and Recertification Kits. Changes to the pamphlet are as follows: Information related to possible eligibility for other benefits was deleted for lack of relevance. Information regarding the scheduling of home visits for homebound individuals applying for or in receipt of public assistance has been added. Information regarding the availability of telephone interviews, home visits or mail certifications for homebound individuals applying for or in receipt of Food Stamps has been added. The form is now available as a multilingual form. The language on the back page of the pamphlet has been revised as follows: Old language: "HRA shall provide assistance in filing the complaint for any reasonable accommodation to enable him/her to file the complaint." New language: "HRA shall provide reasonable accommodations to any disabled complainant who requires assistance in filing a complaint." |

Center Directors must ensure that all prior versions of the form, both English and Spanish, are recycled.

The **W-681A** is to be placed in all Application and Recertification Kits.

Effective Immediately

Please use Print on Demand to obtain copies of forms.

Attachments:

 W-681A
 Are You Disabled? (Rev. 9/28/04)

 W-681A (S)
 Are You Disabled? (Spanish) (Rev. 9/28/04)

HRA Grievance Procedure

Anyone who believes that he/she has been discriminated against, based on a mental or physical disability, in any 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, and location, date and description of the problem. The complaint shall be submitted no later than 60 calendar days after the alleged violation to Director, Equal Employment Opportunity (EEO)/Disability Access and Compliance at 180 Water Street, 7th Floor, New Yor NY 10038, or and to (200 331-4332.

HRA shall provide reasonable accommode for complainant who requires assisted the in Finge

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The City of New York Human Resources Administration

Are You Disabled?

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



Form WV-681A LLF/MLF Rev. 9/28/04

| 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. | cancer Hearing mpanne | Epilepsy | AIDS/HIV-related conditions | High blood pressure | Mental illness | Heart disease | Cerebral palsy | Orthopedic-related conditions | Speech impairment | Visual impairment |
|--------------------|--|--|--|---|---|--|--|--|--|---|---------------------------------------|-------------------|
| 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 with- out reasonable modifications to our rules, 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, me cal asserve and recommod stamps. | The Director's Designee in Job Centers and the Mail Processing Unit in Non-Public Assistance Food Starp Centers NP/FS) will assist applicants and participant when special tep is needed. | Home visits may be arranged for homebound individuals who | are applying for or in receipt of public assistance. Ielephone interviews and, if necessary, mail certifications can be arranged | for nomebound individuals in receipt of or applying for hour stamps. Contact the Receptionist or your Worker for more information. | If you feel that your request for assistance based upon 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) Centers, you can contact the Receptionist and request to speak to the Center | Director or his/her designee. | | 3 |

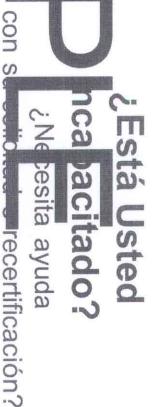
Procedimiento de Agravios de la HRA

Toda persona que se considere haber sido víctima de discriminación a causa de incapacidad física o mental en cualquier programa de la 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 reseña del problema. La queja debe ser sometida al Director de Igualdad de Oportunidad de Empleo (Equal Employment Opportunity – EEO)/Cumplimiento y Ameso para Incapacitados (Disability Access and Compliance) a 180 W ater Straet. 7th Fluor New York, NY 10038, o por fax al (2 y 331-4332.





The City of New York Human Resources Administration





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



Form W-681A (S) LLF/MLF Rev. 9/28/04

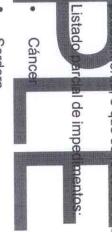
| Impedimento | • | |
|----------------------|-------|---|
| | | o la persona designada. |
| Impedimento | • | de Cuportes para Attituentos de tvo Asisteriora i donca, i doco dirigirse a la Recepción y pedir que le atienda el Director del Centro |
| Enfermedade | • | Conference Unit – FH&C) en el Centro de Trabajo y en los Centros |
| Parálisis cere | | Si usted estima que su solicitud de asistencia no ha sido atendida de debido a su incapacidad, puede comunicarse con la Unidad de Conferenciae y Audienciae Imparciales (Fair Hearing and |
| Problemas ca | • | Trabajador. |
| Problemas m | • | enviarles certificaciones por correo a las personas continadas. Para más información comuníquese con la Recepción o su |
| Presion sangu | | programar entrevistas por vía telefónica, y si es necesario, |
| VIH/SIDA o er | ٠ | Las personas confinadas al hogar que soliciten o reciban asistencia pública pueden ser visitadas al domicilio. A las perso- |
| - Pilopoid | į | quien la necesite. |
| Enilensia | • | NPA FS) le prestará ayuda especial al solicitante y participante |
| Sordera | | de No Asistencia Pública (Non-Public Assistance Food Stamps – |
| Cance | • | La persona designada por el Director en os centros de ranajo |
| | | para alimentos. |
| Listado parcial de l | | X |
| | | la ley de hacer los arreglos que puedan facilitar e al solicitar e |
| toda aquella que | 000 a | Administration – HRA) reconoce surresponsabilidad conforme a |
| Bajo dichas reglas | Ba | reglas, políticas o prácticas. |
| principales como: c | pri | nuestro programa o las modificaciones moderadas de nuestras |
| que restrinjan consi | qu | Se considera una "persona calificada" toda aquella persona |
| incapacitada como | inc | de entidades públicas. |
| a la Ley de Rehat | N N | ser excluida, debido a su incapacidad, de programas y actividades |
| La HRA protege los | La | La Ley de los Norteamericanos Incapacitados (Americans with Disabilities Act) estinula que ninguna "persona calificada" debe |
| | | Servicios de Ayuda |



¿Sabía Usted?

caminar, ver, oír, hablar, trabajar, o aprender. derablemente cualquiera de las actividades diarias toda aquélla con impedimentos físicos o mentales ncapacitados. Estas leyes definen a la persona bilitación de 1973 Sección 504 y la Ley de los derechos de las personas incapacitadas conforme

ue se se reconoce también como persona incapacitada ue posea documentación con respecto a su tere incapacitada.



- nfermedades relacionadas
- uínea alta
- ientales
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- ebral
- es relacionadas con la ortopedia
- s del habla
- os de la vista