



FAMILY INDEPENDENCE ADMINISTRATION

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POLICY BULLETIN #05-08-OPE

OBSOLETE FORMS

| Date: January 19, 2005 | Subtopic(s): Forms |
|--|---|
| <input type="checkbox"/> This procedure can now be accessed on the FIAweb. | This policy bulletin is to inform Job Center staff that the following forms are no longer required and are being made obsolete: |
| M-267b | <ul style="list-style-type: none">• Report of Outstanding Applications for Week Ending __ (M-267b) The information provided on this report is included on the POS Management Console Application Aging Report, Welfare Management System (WMS) WINRO135 Outstanding Applications, and WINRO136 Outstanding Applications Older than 25 Days. |
| W-111B | <ul style="list-style-type: none">• Report of Outstanding Applications (W-111B) The information provided on this report is included on the POS Management Console Application Aging Report, Welfare Management System (WMS) WINRO135 Outstanding Applications, and WINRO136 Outstanding Applications Older than 25 Days. |
| W-171B | <ul style="list-style-type: none">• Service Section/Special Tasks Activity Recap Report (W-171B) The Service Section/Special Task unit no longer exists in the Model/Job Center operations. |
| W-532X | <ul style="list-style-type: none">• Daily Record of "I" Interviews (W-532X) The information provided on this report is included on the NYCWAY Demographic Data and Activity Inquiry screens. |
| W-532CC | <ul style="list-style-type: none">• NYCWAY Management Indicators Family Assistance (FA) Cases (W-532CC) Information for this report can be accessed through the NYCWAY Demographic Data, Activity Inquiry and Worklist screens. |

HAVE QUESTIONS ABOUT THIS PROCEDURE?
Call 718-557-1313 then press 2 at the prompt followed by 765 or
send an e-mail to *FIA Call Center*

Samples of the obsolete forms have been attached.

Effective Immediately

Attachments:

Obsolete Forms

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

- | | |
|----------------|--|
| M-267b | Report of Outstanding Applications for Week Ending_____ (Obsolete) |
| W-111B | Report of Outstanding Applications (Obsolete) |
| W-171B | Service Section/Special Tasks Activity Recap Report (Obsolete) |
| W-532X | Daily Record of "I" Interviews (Obsolete) |
| W-532CC | NYCWAY Management Indicators Family Assistance (FA) Cases (Obsolete) |

Report of Outstanding Applications for Week Ending _____

Page _____ of _____

IS Center No. _____ Form Prepared by: _____

| Outstanding Applications Over 25 Days (26 Days & Over) (Required Review by Center Director) | | | | | | | | | |
|---|---------------|-----------------|-------------|----------|----------------------|---------------------------------|---------------------------|------------------------|---------------|
| 1 Case Name | 2 Category | 3 Appl. Reg. | 4 Case # | 5 SSN | 6 FS File Date | 7 Appl. Interview Date | 8 EVR Appt. Date | 9 Receipt Cashed | 10 Comment |
| obsolete | | | | | | | | | |
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| | |
|--------------------|--------------|
| Total Cases | |
| Reviewed by: _____ | (Date) _____ |
| Reviewed by: _____ | (Date) _____ |
| Reviewed by: _____ | (Date) _____ |

| | |
|-----------------------------------|-------|
| 11. Reason for Outstanding Status | Total |
| Code 1. On Supervisor's Desk | |
| Code 2. On ES' Desk | |
| Code 3. Deferred for Basic Doc. | |
| Code 4. Awaiting EVR Disposition | |

Report of Outstanding Applications

IS/Job Center No. _____ Week ____ / ____ / ____
Ending

A
FA/EAF

B
SN/EAA

C
Total A+B

| | | | | | | | | | |
|--|------|-------|-------|-----------|------|-------|-------|-----------|--|
| 1. Total Opening Balance | | | | | | | | | |
| 2. Break down of Outstanding Applications from Beginning of Week | 0-25 | 26-30 | 31-35 | 36 & Over | 0-25 | 26-30 | 31-45 | 46 & Over | |
| 3. Number of Applications Received During the Week | | | | | | | | | |
| 4. Total Number of Applications (Add Lines 2 & 3) | | | | | | | | | |
| 5. Number of Cases Accepted During the Week | 0-25 | 26-30 | 31-35 | 36 & Over | 0-25 | 26-30 | 31-45 | 46 & Over | |
| 6. Number of Cases Rejected During the Week | 0-25 | 26-30 | 31-35 | 36 & Over | 0-25 | 26-30 | 31-45 | 46 & Over | |
| 7. Total Number of Applications Processed During the Week (add lines 5 & 6) | 0-25 | 26-30 | 31-35 | 36 & Over | 0-25 | 26-30 | 31-45 | 46 & Over | |
| 8. Total Number of Applications Outstanding at End of Week (Line 4 minus Line 7) | 0-25 | 26-30 | 31-35 | 36 & Over | 0-25 | 26-30 | 31-45 | 46 & Over | |

obsolete

Total Line 8A

Total Line 8B

F/A/EAF S/N/EAA Total

| | | | | | |
|---|--|--|--|-----------------|------------|
| 9. Total Number of Individuals Prescreened | | | | Applic. Assess. | Case Mgmt. |
| 10. Total Number of Appointments Scheduled | | | | 10A. | 10B. |
| 11. Total Number of Appointments Kept | | | | 11A. | 11B. |
| 12. Number of Applicants Never Known to the System | | | | | |
| 13. Number of Reapplicants Previously Known to the System | | | | | |
| 14. Total Number of Single Issue Cases | | | | | |
| 15. Deferred Applications (applicants who were given Form W-113K) | | | | | |
| 16. Undercare: New Suffix Accepts | | | | | |
| 17. Undercare: Reopenings | | | | | |
| 18. Undercare: Total (add lines 16 & 17) | | | | | |

Prepared By _____

Date _____

Deputy Director

Director's Signature

IS Center _____

Week Ending _____

SERVICE SECTION/SPECIAL TASKS ACTIVITY RECAP REPORT

| IS SERVICE SECTION WORKER | MAN DAYS | OFFICE TASKS | | | | | | | | | | | FIELD TASKS | | | | | |
|---------------------------|-------------|--------------|----|---|-----|---|----|----|---|---|----|----|-------------|-----------------------|----|----|----|---|
| | | HC | OI | T | CVD | M | RA | SP | C | O | AI | RI | AR | HOMEBOUND DELIVERY | | | | |
| | | | | | | | | | | | | | CK | MC | PI | FS | HR | O |
| obsolete | | | | | | | | | | | | | | | | | | |
| TOTAL | | | | | | | | | | | | | | | | | | |

LEGEND

- HC - Housing Consultation
- OI - Office Interview
- T - Telephone
- CDV - Client Verif./Doc.
- M - Moves
- RA - Referral to Other Agencies
- SP - Special Projects
- C - Correspondence
- O - Other

- AI - Application Interview
- RI - Recertification Interview
- AR - Agency Representation
- CK - Check
- MC - Medicaid Card
- PI - Photo ID
- FS - Food Stamps
- HR - Housing Related

Prepared By _____ Date _____

Prepared By _____ Date _____

ROUTING: IS Statistics
Center Director
Office Manager
Sr. Soc. Serv. Sup
File

**NYC WAY Management Indicators
Family Assistance (FA) Cases**

IS/Job Center _____

Week Ending _____

| Indicators | Mon | Tues | Wed | Thur | Fr. | Totals |
|------------------------------|-----|------|-----|------|-----|--------|
| # FA Pre-Screens | | | | | | |
| # FA Interviews compl. | | | | | | |
| # EVR Appointments Scheduled | | | | | | |
| # FEDS Referrals | | | | | | |

Exclusions from EVR

| | | | | | | |
|------------------------------|--|--|--|--|--|--|
| # Rejected | | | | | | |
| # Withdrawn | | | | | | |
| # Others not Referred to EVR | | | | | | |
| _____ | | | | | | |
| _____ | | | | | | |
| Total # Excluded | | | | | | |
| # IS/Job Referrals | | | | | | |

obsolete

Exclusions from Employment Services

| | | | | | | |
|----------------------------------|--|--|--|--|--|--|
| # HSS Medical Referrals | | | | | | |
| # Domestic Violence | | | | | | |
| # Homeless | | | | | | |
| # SSI Pending or Reconsideration | | | | | | |
| # Pregnant | | | | | | |
| # Children Under 5 | | | | | | |
| # One Shot Deals | | | | | | |
| # Application Withdrawn | | | | | | |
| # Application Rejected | | | | | | |
| # Others | | | | | | |
| Total # Excluded | | | | | | |

| | | | | | | |
|--------------|--|--|--|--|--|--|
| # FA Rejects | | | | | | |
| # FA Accepts | | | | | | |