

FAMILY INDEPENDENCE ADMINISTRATION

Matthew Brune, Executive Deputy Commissioner



James K. Whelan, Deputy Commissioner Policy, Procedures, and Training

Lisa C. Fitzpatrick, Assistant Deputy Commissioner Office of Procedures

### POLICY DIRECTIVE #10-26-OPE

(This Policy Directive Replaces PD #09-23-OPE)

#### SUMMER CHILDCARE

Deter	Subtania(a):
<b>Date:</b> June 30, 2010	Subtopic(s): Childcare, Camp
AUDIENCE	The instructions in this policy directive are for staff in the Job Centers who process childcare and are informational for all others.
REVISIONS TO THE PRIOR	This policy directive has been revised as follows:
DIRECTIVE	<ul> <li>References to \$5 per day summer day camps and sleep away camps have been removed since these camps are no longer participating in the summer childcare program.</li> <li>The Summer Camp Child Enrollment Program Form (Non ACEE) (CS-274E) is no longer needed to enroll children into a summer camp that is not participating in the automated eligibility determination and enrollment process.</li> <li>Legally-exempt childcare providers citywide now need to be enrolled by the legally-exempt childcare provider enrollment agency.</li> <li>The Childcare Liaison must now fax the Summer Camp Childcare Enrollment Program Form (ACEE) (CS-274N) to the Summer Childcare Unit instead of mailing the original form.</li> <li>Parents/guardians who want to enroll a child in a camp not included on the Summer Automated Childcare Eligibility and Enrollment (ACEE) Camp Listing or in the Automated Childcare Information System (ACCIS) must bring the Childcare Provider Enrollment Supplement (CS-274W) form to the camp for completion.</li> </ul>

**POLICY** Childcare for the summer months must be in place for all school-age children to ensure that parents/guardians receiving Cash Assistance (CA) will be able to continue in work-related activities.

#### BACKGROUND

There are several summer childcare options available to CA families. Parents/guardians who are engaged in work-related activities have the option of:

Summer childcare for parents/guardians in work-related activities

- keeping the child with the current school year provider;
- enrolling the child with a temporary summer childcare provider;
- enrolling the child in a regular rate summer camp; or
- enrolling the child with a new year-round program or provider.

A mailing is sent each year by New York City Children's Services (ACS) to parents/guardians regarding preparation for summer childcare. The purpose of the mailing is to remind parents/guardians of the need to plan for the summer vacation and inform them of options for summer childcare. Each year, staff will be notified under separate cover when the mailing is conducted.

#### REQUIRED ACTION

Current school

year provider

# Summer Childcare for Parents/Guardians Engaged in Work-Related Activities

The process for securing childcare during the summer months for parents/guardians already engaged in work-related activities is as follows:

 If the child will remain with the current school year provider during the summer, no forms need to be submitted. Providers caring for the child more than six hours per day need only indicate this in the "FT Days" column on the Provider Attendance Sheet (ACS1). Providers utilizing the Childcare Automated Phone System (CAPS) must enter the number of full-time days in the system.

Temporary summer childcare	• If the child will be enrolled with a temporary childcare provider during the summer or will be enrolled in a summer camp, the parent/guardian must complete the <b>CS-274W</b> and either the Enrollment Form for Provider of Legally-Exempt Family Childcare and Legally-Exempt In-Home Childcare ( <u>OCFS-LDSS-4699</u> ) or the Enrollment Form for Provider of Legally-Exempt Group Childcare ( <u>OCFS-LDSS-4700</u> ), with the camp or provider and return it to the JOS or Childcare Specialist in the Job Center.
See <u>PD #10-17-EMP</u> . Revised	<b>Reminder</b> : Parents/guardians utilizing legally-exempt childcare providers must have the provider approved by the legally-exempt childcare provider enrollment agency prior to receiving authorization for payment.
	<ul> <li>If the parent/guardian needs assistance in securing temporary summer childcare or a new permanent childcare provider, the JOS/Worker must provide parents/guardians with names of available regulated childcare providers, in accordance with current procedure.</li> <li>When the parent/guardian returns to the Job Center with the completed forms, JOS/Workers must process the childcare requests in ACCIS.</li> </ul>
Parents/guardians in WEP/vendor activities	For parents/guardians participating in approved work activities, the <b>CS-274W</b> , <b>OCFS-LDSS-4699</b> , and <b>OCFS-LDSS-4700</b> forms will be available at Job Centers and WEP/vendor sites. The parent/guardian must bring the completed forms to the Job Center for processing. Transitional Childcare (TCC) families that need to make new childcare arrangements should contact the TCC hotline at <b>(212) 835-7681</b> to request forms.
	Summer Childcare Program/Camp Registration Fees
Requests must be received by the first week in July.	Camps that charge a registration fee must forward documentation requesting the registration payment to the Summer Childcare Unit at 66 John Street, 7th Floor, New York, NY 10038, or fax the documentation to <b>(212) 487-9166</b> . Requests must be received by the first week in July.
	The Voucher Payment Unit (VPU) will only process requests for registration fees (up to a maximum of \$50) for newly enrolled children who are on CA and whose parents/guardians are in compliance with engagement requirements, or who are TCC families.

#### Summer ACEE Project

	The ACEE Project, implemented in June 2004, allows selected programs/camps to submit the enrollment information via the Internet for automated eligibility determination and enrollment of eligible children.
	Form <b>CS-274N</b> is an expedited enrollment form to be completed for ACEE participants. Form <b>CS-274N</b> replaces forms <b>CS-274E</b> and <b>CS-274W</b> for all ACEE Project camps.
Confirmation of enrollment in the ACEE Project	The Summer Childcare Unit has instructed all Camp Directors to make a copy of the completed <b>CS-274N</b> form and give it to the parent/guardian as confirmation of enrollment of the child in the camp for engagement purposes.
Revised	The Summer Childcare Unit will distribute a list of regular rate summer programs participating in the ACEE Project to all Job Center Childcare Liaisons.
Revised	If a parent/guardian reports to the Job Center with an original completed <b>CS-274N</b> form and the camp is one of those listed as part of the ACEE Project, the JOS/Worker <u>must</u> scan Form <b>CS-274N</b> , file it in the electronic case record, and then refer the parent/guardian to the Childcare Liaison. The Childcare Liaison will fax the form to the Summer Childcare Unit at <b>(212) 487-9166</b> to the attention of the Summer Childcare Unit, who will expedite the enrollment process.
Camps Not Listed	For parents/guardians wanting to enroll a child in a camp that is not included on the Summer ACEE Camp Listing or in ACCIS, the JOS/Worker must:
Revised	<ul> <li>inform the parent/guardian that the camp must be willing to accept direct payment from ACS.</li> <li>have the parent bring Form CS-274W to the camp for completion.</li> <li>forward the completed forms with a copy of the program license to Childcare Support Services (CCSS) at 109 East 16th Street, 3rd Floor, New York, NY 10003, or fax to (212) 835-8252. CCSS will enroll the <u>new camp</u> into ACCIS, providing them with an ACCIS number.</li> <li>enroll the <u>child</u> in ACCIS.</li> </ul>
	If the camp does not accept direct payment from ACS but the parent/guardian still wishes to enroll the child in that particular camp, the JOS/Worker must inform the parent/guardian that it is the parent's/guardian's responsibility to pay the required camp fees.

#### Out of School Time (OST) Summer Day Camp Program

Refer to <u>PD #10-01-EMP</u> for information about OST Summer Childcare Programs. Parents/guardians of school-aged children must be given information about the Department of Youth and Community Development (DYCD) Out of School Time (OST) summer day care camps for elementary and middle school children. The camps provide a mix of academic and recreational activities. They are open five days a week from 8:00 AM to 6:00 PM and operate from July 6 to August 20, 2010. OST Programs are available at no cost to families and have no income eligibility requirements.

The JOS/Worker can help the parent/guardian find an OST Summer Day Camp by:

- calling **311**,
- calling **800-246-4646**, or
- visiting the DYCD web site at <u>www.nyc.gov/dycd</u>.

#### Enrollment Process for Temporary Summer Childcare Providers or Summer Camp

Summer camps and temporary summer childcare providers must be enrolled in ACCIS in order to receive payment. For summer camps already enrolled in ACCIS, JOS/Workers can enter summer childcare information into ACCIS up to four weeks prior to the camp start date but no earlier than June 1, 2010.

To enroll a child attending a regular rate summer camp or enrolled with a temporary provider in ACCIS, the JOS/Worker must:

- ensure that the submitted CS-274W, OCFS-LDSS-4699, and OCFS-LDSS-4700 forms have been completed;
- verify that the case/child is eligible; and
- begin the data entry process from Child Maintenance Screen 2 of 2 in ACCIS as follows:
  - Terminate the Current Enrollment
    - Click Modify F4.
    - Enter **25** (Transfer to Another Program) in **TC** field.
    - Enter the last day of care by this provider in the End Date.
    - Enter the last day of care by this provider in the **Drop Date**.

- Enter the Summer Enrollment
  - Enter the enrollment information of the temporary provider: **Hrs**, **Loc**, **Provider/Program**.
  - Enter the date day care begins with this provider in the **Start Date**.
  - Enter **31** (Summer Enrollment for Voucher Use Only) in **TC** field.
  - Enter the date day care will end with this provider in **End** date.
  - Leave **Drop Date** blank.
  - Click Save F7.

Terminating Enrollment with Temporary Summer Childcare Providers or Summer Camp

At the end of the summer the JOS/Worker must terminate the summer childcare and enroll the child with the regular school session provider. The JOS/Worker must:

- ensure that the submitted CS-274W, OCFS-LDSS-4699, and OCFS-LDSS-4700 forms have been completed;
- begin the data entry process from Child Maintenance Screen 2 of 2 in ACCIS as follows:
  - Enter Regular School Session Provider
    - Click More F10.
    - Click **Complete/Supplementary Enrollment** on menu.
    - Click Supp. on the Supp. Indicator box.
    - Click **Modify F4** on the **Supplementary Enrollment** screen.
    - Enter the enrollment information: **Hrs**, **Loc**, **Provider/Program**.
    - Enter the date child will return to current provider in the **Start** date.
    - Click Save **F7** on the Supplementary Enrollment screen.

#### PROGRAM IMPLICATIONS

Paperless Office System (POS) Implications JOS/Workers at POS Centers will record childcare expenses on the **Other Expenses** window in the "Has Child or Dependent Care Expenses?" question. POS does not budget any childcare expenses entered. JOS/Workers at POS Centers may access ACCIS to make childcare entries by minimizing POS and clicking the ACCIS shortcut on the desktop.

- Scan the completed and signed OCFS-LDSS-4699/LDSS-4700 and/or CS-274W form into the electronic case record. Enter a case comment for the childcare by clicking the case comments
   icon or pressing <ALT>M on the keyboard.
- Scan all non POS-generated forms and notices that are signed by the individual into the electronic case record.

Food Stamp Implications When the actual summer childcare expense exceeds the maximum permitted childcare allowance, the excess childcare expense is counted as an out-of-pocket expense for food stamp budgeting. This may or may not increase the food stamp allotment.

Medicaid Implications There are no Medicaid implications.

LIMITED ENGLISH SPEAKING ABILITY (LESA) AND HEARING-IMPAIRED IMPLICATIONS

FAIR HEARING

Avoidance/ Resolution

Revised

Ensure that all case actions are processed in accordance with current procedures and that electronic case files are kept up to date.

The applicant/participant must receive either adequate or timely and adequate notification of all actions taken, depending upon the circumstances of his/her case. When a parent's/guardian's **OCFS-LDSS-4699/LDSS-4700** and/or **CS-274W** form, or **CS-274N** form are correct and the payments have not been authorized in a timely manner, the parent/guardian may request a Fair Hearing.

In an effort to resolve the issue without a Fair Hearing, the JOS/Worker must review the case record and the documentation submitted. If all the documentation is in order and the provider is eligible, authorize payment.

Conferences An applicant/participant can request and receive a conference with a Fair Hearing & Conference (FH&C) AJOS/Supervisor I at any time. If the applicant/participant comes to the Job Center and requests a conference, the Receptionist must notify the FH&C AJOS/ Supervisor I. In Model Centers, the Receptionist at Main Reception will issue an FH&C ticket to the applicant/participant to route him/her to the FH&C Unit and does not need to verbally alert the FH&C staff.

The FH&C AJOS/Supervisor I will listen to and evaluate any material presented by the applicant/participant, review the case file, and discuss the issue(s) with the JOS/Worker responsible for the case and/or the JOS/Worker's Supervisor. The AJOS/Supervisor I will explain the reason for the Agency's action(s) to the applicant/participant.

If the applicant/participant has in fact presented good cause for the infraction or shown that the outstanding NOI needs to be withdrawn for other reasons, the FH&C AJOS/Supervisor I will Settle in Conference (SIC), enter detailed case notes in New York City Work, Accountability and You (NYCWAY), and forward all verifying documentation submitted by the applicant/participant to the appropriate JOS/Worker for corrective action to be taken.

In addition, if the adverse case action still shows on the "Pending" (**08**) screen in the Welfare Management System (WMS), the AJOS/Supervisor I must prepare and submit a Fair Hearing/Case Update Data Entry Form (<u>LDSS-3722</u>), change the **02** to **01** if the case has been granted Aid to Continue (ATC), or prepare and submit a PA Recoupment Data Entry Form – WMS (<u>LDSS-3573</u>) to delete a recoupment. The AJOS/Supervisor I must complete a Conference Report (<u>M-186a</u>). If the participant fails to show good cause for the infraction or if it is determined that the Agency's action(s) should stand, the AJOS/Supervisor I will explain to the applicant/participant why he/she cannot SIC. The AJOS/Supervisor I must complete form **M-186a**.

Evidence Packets Should the applicant/participant elect to continue his/her appeal by requesting or proceeding to a Fair Hearing, which has already been requested, the FH&C AJOS/Supervisor I is responsible for ensuring that further appeal is properly controlled and that appropriate follow-up action is taken in all phases of the Fair Hearing process.

All Evidence Packets must include a detailed history, copies of relevant WMS screen printouts, other documentation relevant to the action taken, and copies of NYCWAY **Case Notes** screens.

#### RELATED ITEMS PD #10-17-EMP PD #10-01-EMP

ATTACHMENTS	CS-274N	Summer Camp Child Enrollment Program Form
Please use Print on Demand to obtain copies of forms.	CS-274W	(ACEE) (Rev. 7/08) Childcare Provider Enrollment Supplement (Rev. 4/08)

# **Summer Camp Child Enrollment Form**





Camp Address:						
	Camp Address Line 1					
	Camp Address Line 2					<u></u>
	City			St	tate Z	lip Code
ACCIS Program	Number:					
Family Inform Parent Name: _	nation					
Parent Address	Parent Address Line 1 Parent Address Line 2				]	
	City			St	ate Z	ip Code
Cash Assistanc	e Case Number:				Will the c	•
Parent Social S	ecurity Number:	(Optional	)		return schoo provie	to the I year
Child	(ren)'s Name	Date of Birth	Camp Start Date	Camp End Date	Yes	No

\_/\_ Date Signature of Parent Are you the parent of all children under the age of 16 in the household? 
Yes No If no, the head of household must sign this form. / /

Head of Household Name (please print)	Head of Household Signature	,,,,
Camp Director Name (please print)	Camp Director Signature	// Date

Fax this form (for manual enrollments only) along with the Summer Camp Acceptance Form (CS-931) to (212) 835-7739. Email questions to summerchildcare@acs.nyc.gov.

# Inscripción y Elegibilidad Automatizada





## Información del Campemento

Nombre del Campamento de Verano:					· · · · · · · · · · · · · · · · · · ·	
Dirección del Campamento de Verano:	: Linea de Dirección 1 del Campamento					
	Linea de Direc	ción 2 del Campa	amento			
	Ciudad		Esta	ido Cód	igo Postal	
Nombre del Programa ACCIS:					-	
Información sobre la Familia Nombre del Padre/de la Madre:						
$( \land ) \land \land \land$	de Dirección 2 d	del Padre/de la M del Padre/de la M		do Cóc	ligo Postal	
Número del Caso de Asistencia Publica Número del Seguro Social del Padre/de		(opcioi	nal)	دRegres أ niños al provee año eso	dor del	
Nombre(s) del/de los Niño(s)	Fecha de Nacimiento	Fecha de Comienza en del Campamento	Fecha en que Termina el Campamento	Si	No	
Entiendo y reconozco que el programa tendrá a edad. Autorizo a la Administración de Servicio información sobre la elegibilidad de mi(s) hijo(s	s Infantiles (Adr	ninistration for Chi	Idren's Services -	ACS) a que		
Firma del Padre/Madre				/ Fecha	/	
¿Es usted el padre/madre de todos los De ser no, el jefe del hogar debe firm			en el hogar? □	I Sí □ No		
Nombre del Jefe del Hogar (en letra de molde, por favor)	Firma del c	lefe de Hogar		/ Fecha	/	
Nombre del Director del Campamento (en letra de molde, por favor) Para matriculaciones manuales solo e		or del Campament		/ Fecha		

Para matriculaciones manuales solo, envie un fax de este formulario junto al formulario de Aceptación al Campamento de Verano (Summer Camp Acceptance Form) (CS-931) al (212) 835-7739. Email preguntas a <u>summerchildcare@acs.nyc.gov</u>.



## **Child Care Provider Enrollment Supplement\***

To be used with LDSS-4699/LDSS-4700 for all unregulated providers

PARENT/CARETAKER'S NAME:			CASE NUMBER:				
ADDRESS:							
TELEPHONE:	SOCIAL SECURIT	Y NUMBER (OPTIONAL	L, SEE BELOW):1	ACCIS CASE NUM	/BER:		
PROVIDER'S NAME:				DATE OF BIRTH:2	:		
ADDRESS WHERE CARE IS GIVEN:							
PROVIDER'S ADDRESS (IF DIFFERENT):							
TELEPHONE:	PROVIDER'S SOC		SE NUMBER/EIN				
your Social Security number as a con will be used to assist in identifying yo	<sup>1</sup> The parent/caretaker may, but does not have to, list his/her Social Security number. You cannot be required to disclose your Social Security number as a condition of eligibility for child care services. If provided, your Social Security number will be used to assist in identifying your child care file. It may also be used by Federal, State and local agencies to prevent duplication of services and fraud, and for Federal reporting.						
their own child(ren).	<sup>2</sup> Legally-responsible relatives (parents, stepparents, and legal guardians) cannot be paid as child care providers for						
Provider/Agency Name: ACCIS Provider Number (if availab							
-							
Provider's License Type: License Number: Expiration Date: / /							
<b>Provider Rate</b> (All providers, except ACS-contracted programs, must complete this section.)							
My weekly child care rates are as f	ollows:				1		
Indicate the rate charged for each	age level	INFANT Under 18 months	TODDLER 18 months – under 3 years	PRESCHOOL 3 years – under 6 years	SCHOOL-AGE 6 – 12 years		
Full time (30 hours or more per week)							
Part time (15 – 29 hours per week)							
Hourly (1 – 14 hours per week but less than 3 hours per day)							

- \*ATTENTION: 1. Regulated/licensed providers are not required to complete the LDSS-4699 or the LDSS-4700. They should complete only pages 1 and 2 of this form and return to the parent/legal guardian. Regulated providers without an ACCIS number must also submit a copy of their license along with the competed CS-274W.
  - 2. Informal providers must provide documentation of BOTH their identification and their address in order to be paid by ACS. Please ask your JOS/ACS Worker for the Proof of ID and Residency for Your Child Care Provider or "Babysitter" (CS-574FF), which is the list of approved types of ID.



Date: \_\_\_\_\_

Indicate the weekly schedule(s) of child care services for the child(ren) listed below:

Child's	CHILD'S NAME		CHILD'S NAME		CHILD'S NAME	
Name						
Date of Birth	MONTH DA	AY YEAR	MONTH D.	AY YEAR	MONTH DA	IY YEAR
Date Care Began	MONTH DA	AY YEAR	MONTH D.	AY YEAR	MONTH DA	Y YEAR
Weekly Schedule	From	То	From	То	From	То
Monday						
Tuesday						
Wednesday						
Thursday	$\frown$					
Friday	$(\bigcirc)$	$ \rangle$		$\neg \rangle    $		
Saturday						
Sunday						
OFFICE USE	Total Hours per Week		Total Hours per Week		Total Hours per Week	
ONLY	ACS Child Care Rate		ACS Child Care Rate		ACS Child Care Rate	

□ I acknowledge that receiving payment from the City of New York for child care services provided does not make me an employee of the City of New York. I am an employee of the parent/legal guardian of the child for whom I provide care.

#### **Provider Certification**

I am enrolling this child in a child care program. I understand that I will be paid only after the child's attendance data is received by ACS and for so long as the above parent/guardian is engaged in an FIA-approved activity or employed. If the parent/guardian fails to meet these criteria, I will be sent a letter from ACS informing me that ACS will no longer pay for child care. I agree that the amount I am charging this parent is not more than the amount I charge for other children of the same age. I understand that I cannot be paid if I do not list all my rates.

I will allow the parent/guardian of the children named on this form unlimited access to his/her children and the premises and will make myself available whenever the children are in my care.

I certify that the statements above are accurate and true to the best of my knowledge. I understand that providing false information may lead to the suspension or termination of payments and the recovery of any payments to which I was not entitled.

Provider's Name (print clearly): \_\_\_\_\_ Official Title (if applicable): \_\_\_\_\_

Signature: \_\_\_\_\_

#### **Parent/Guardian Certification**

I certify that I have reviewed the above information and that it is correct. I understand I must report any changes to ACS.