



CDSS

WILL LIGHTBOURNE
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY
DEPARTMENT OF SOCIAL SERVICES

744 P Street • Sacramento, CA 95814 • www.cdss.ca.gov



EDMUND G. BROWN JR.
GOVERNOR

June 10, 2015

ALL COUNTY LETTER NO. 15-53

REASON FOR THIS TRANSMITTAL

- State Law Change
- Federal Law or Regulation Change
- Court Order
- Clarification Requested by One or More Counties
- Initiated by CDSS

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY CHILD CARE COORDINATORS
ALL WELFARE-TO-WORK COORDINATORS
ALL CALIFORNIA WORK OPPORTUNITY AND RESPONSIBILITY
TO KIDS (CaWORKs) PROGRAM SPECIALISTS

SUBJECT: CalWORKs STAGE ONE CHILD CARE FOR SANCTIONED
ADULTS

REFERENCE: MANUAL OF POLICIES AND PROCEDURES (MPP) SECTIONS
42-721.41, 47-220.32, 47-230.142, 47-301.5, EDUCATION CODE
SECTIONS 8351 and 8353 CALIFORNIA CODE OF
REGULATIONS (CCR) TITLE 5 SECTIONS 18400(o)

The purpose of this letter is to provide clarification on Stage One child care policies for Welfare-to-Work (WTW) sanctioned clients. The letter also transmits the attached child care forms: NA 834 (Notice of Action Child Care Denial) and NA 835 (Notice of Action Child Care Discontinuance). The forms were revised to provide additional guidance for noticing clients who are in a sanctioned status.

Pursuant to the MPP section 42-721.41, in summary, a county must impose a sanction when a non-exempt WTW participant fails or refuses to comply with program requirements, without good cause, and efforts to resolve their noncompliance status through the compliance process has failed. The sanction occurs when the non-exempt aided adult is removed from the assistance unit.

Stage One Child Care and Sanctioned CalWORKs Adults

Current regulations provide that a sanctioned or penalized individual remains eligible for Stage One child care for the hours that they are working or participating in county-approved activities (MPP section 47-220.32). Stage One child care should be provided to a sanctioned individual in the following circumstances: 1) when the client is in the process of curing a sanction; and 2) during the months in sanction the client is working

or participating in a county-approved program activity (MPP section 47-220.32). County-approved “activities” are activities that are assigned as part of a WTW plan, or activities necessary to accept or retain employment. The county-approved activities may also include, but are not limited to, pre-assessment activities, orientation, appraisal, education and training, job search and/or activities assessed by the county as needed to develop the WTW plan.

Under existing regulations, necessary supportive services must be available to every participant in order to participate in the county-approved program activities to which he or she is assigned or to accept or retain employment. If necessary supportive services are not available, the individual has good cause for not participating in the activities on their WTW plan, and thus is not subject to WTW sanctions.

Clients who are in a sanctioned status can request to comply with WTW requirements by entering into a plan to stop the WTW sanction (WTW 29), either at a scheduled meeting with the county, or by mail, and be satisfactorily performing the county-approved activities specified in the curing plan until completed, or up to a maximum of 30 calendar days, whichever is shorter, from the date the curing plan is signed. During this time, a client will be provided a full array of supportive services as necessary to meet his/her curing plan requirements. Any sanctioned individual who is unable to cure a sanction due to the lack of necessary supportive services must have the sanction removed on the basis of good cause for non-participation.

Transitioning Between the Stages of Child Care for Sanctioned CalWORKs Adults

The County Welfare Departments (CWDs) are responsible for managing a client’s transition from Stage One to Stage Two child care after determining the family’s situation is stable (MPP section 47-301.5 and Education Code section 8351(b)). Under existing regulations, a sanctioned client is eligible for Stage One child care as long as they are participating in county-approved program activities or working (MPP section 47-220.32).

However, if a sanctioned client engages in activities outside of his/her curing plan or is working, they may still be eligible for Stage Two child care pursuant to the California Department of Education (CDE) regulations. For example, a sanctioned client who fails to perform the activities specified in the curing plan, but is participating in an approvable activity should be assessed by the CWDs to determine whether or not transfer may be appropriate. When deemed appropriate, the CWD should transfer sanctioned families to Stage Two through the formal process. When a CWD transfers a sanctioned client to Stage Two, they should follow the same transfer procedures it uses to transition non-sanctioned families to Stage Two.

This does not prohibit a sanctioned client from applying on his/her own with the local Stage Two child care contractor or any other subsidized child care provider. In the event that Stage Two funding is inadequate and some clients are transitioned back to Stage One, child care services must be available to those sanctioned clients who are working or engaged in their county-approved program activities. The CWDs should not deny child care services to sanctioned clients that are engaged in a county-approved program activity or working.

For Stage Two child care eligibility, please refer to California Education Code section 8353 and California Code of Regulation (CCR), Title 5 section 18400(o). The CCR Title 5 section 18409 also describes the process for transferring families receiving CalWORKs Stage One into the Stage Two child care program.

Child Care Informing Notices: (Notice of Actions) NA 834 and NA 835

The Department has also revised the CalWORKs Stage One child care forms NA 834 and NA 835. The forms have been updated to remind sanctioned families at the time that his/her Stage One child care has been denied or discontinued that they may still be eligible for child care services in Stage Two. These forms are now required with substitutions permitted. The CWDs may request to substitute a child care form by contacting their CDSS Child Care Programs Bureau analyst.

Form Implementation

The CWDs shall begin using the revised forms as soon as administratively feasible. However, the CWDs may choose to exhaust their hard copy stock of the earlier version before transitioning to the revised form.

Translations and Camera-Ready Copies

For camera-ready copies in English, contact the Forms Management Unit at fmudss@dss.ca.gov. If your office has internet access, you may obtain these publications from the CDSS webpage at <http://www.dss.cahwnet.gov/cdssweb/PG167.htm>.

When translated forms are completed per MPP section 21-115.2, including Spanish forms, they are posted on an ongoing basis on the CDSS webpage. Copies of the translated forms can be obtained at http://www.dss.cahwnet.gov/cdssweb/FormsandPu_274.htm.

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For questions on translated materials, please contact Language Services at (916) 651-8876. Until translations are available, recipients who have elected to receive materials in languages other than English should be sent the English version of the form or notice along with the [GEN 1365-Notice of Language Services](#) and a local contact number.

If you have any questions regarding this letter, please contact the Child Care Programs Bureau Policy Unit at (916) 657-2144.

Sincerely,

Original Document Signed By:

TODD R. BLAND
Deputy Director
Welfare to Work Division

Attachments

NOTICE OF ACTION CHILD CARE DENIAL

COUNTY OF _____

STATE OF CALIFORNIA
HEALTH AND HUMAN SERVICES AGENCY
CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

Notice Date : _____
Case Name : _____
Number : _____
Worker Name : _____
Number : _____
Telephone: _____
Address : _____

(ADDRESSEE)

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Questions? Ask your Worker.

State Hearing: If you think this action is wrong, you can ask for a hearing. Your benefits may not be changed if you ask for a hearing before this action takes place. If you and the county disagree or if you have not heard back from your worker, do not wait to ask for a hearing. You must ask for the hearing before a certain number of days. See the back of this notice for more information and to find out how to ask for a hearing.

Starting on _____ the child care for _____
DATE NAME OF CHILD
is denied for the following reason:

- Your request for CalWORKs child care services has been denied.
- Your child care reimbursement to _____
for _____ is denied and will not be paid.
MONTH PROVIDER
- Your request to raise your child care reimbursement limit is denied.
- Reimbursement for your child care for _____
is denied. NAME OF CHILD

HERE'S WHY WE ARE DENYING YOUR REQUEST:

- You are not in an approved CalWORKs activity/program.
- You are already getting the most the county can reimburse based on your area's child care costs.
- The child's other parent is in the home and available to provide care. This parent is not in an approved WTW activity, and does not have a condition that impairs his/her ability to care for the child.
- You did not cooperate with CalWORKs program. (See notes).
- Your child _____ is over 12 years old and
NAME OF CHILD
is not disabled or under court supervision.
- You did not provide the proof that we asked you to give us on _____
DATE
that shows your aided child has a physical or mental condition.
- The child care provider is your child's parent, legal guardian, or a member of your CalWORKs/Cal-Learn assistance unit.
- Your license-exempt child care provider, _____
NAME
had his/her application for TrustLine denied, closed, or revoked.
- You did not return completed Health and Safety forms.
- You are no longer eligible for post aid child care services because _____
REASON
- You have good cause for not participating in your welfare to work activities and have chosen not to participate as a volunteer. (See notes).
- Other:

Sanctioned Cases:

If you are being sanctioned and need child care for activities that are not approved by the county, you may still be eligible for Stage Two child care or another state or federally funded child care and development program. If you are being sanctioned and engaged in activities that are not approved by the county, you may ask the county for help in transferring you to other child care for which you may be eligible. You may also apply on your own to the Resource and Referral agency listed below.

Notes

Rules: These rules apply. You may review them at your welfare office: CalWORKs MPP Sections 42-713.2, 47-260, 47-430.2, 47-620.32; Education Code Sections 8350-8353, 8357. Welfare & Institutions Code Sections 11322.9, 11323.6, 11323.4 and 11323.8, or visit www.cdss.ca.gov or www.leginfo.ca.gov.

YOUR HEARING RIGHTS

You have the right to ask for a hearing if you disagree with any county action. You have only 90 days to ask for a hearing. The 90 days started the day after the county gave or mailed you this notice. If you have good cause as to why you were not able to file for a hearing within the 90 days, you may still file for a hearing. If you provide good cause, a hearing may still be scheduled.

If you ask for a hearing before an action on Cash Aid, Medi-Cal, CalFresh, or Child Care takes place:

- Your Cash Aid or Medi-Cal will stay the same while you wait for a hearing.
- Your Child Care Services may stay the same while you wait for a hearing.
- Your CalFresh benefits will stay the same until the hearing or the end of your certification period, whichever is earlier.

If the hearing decision says we are right, you will owe us for any extra Cash Aid, CalFresh or Child Care Services you got. To let us lower or stop your benefits before the hearing, check below:

Yes, lower or stop: Cash Aid CalFresh
 Child Care

While You Wait for a Hearing Decision for:

Welfare to Work:

You do not have to take part in the activities.

You may receive child care payments for employment and for activities approved by the county before this notice.

If we told you your other supportive services payments will stop, you will not get any more payments, even if you go to your activity.

If we told you we will pay your other supportive services, they will be paid in the amount and in the way we told you in this notice.

- To get those supportive services, you must go to the activity the county told you to attend.
- If the amount of supportive services the county pays while you wait for a hearing decision is not enough to allow you to participate, you can stop going to the activity.

Cal-Learn:

- You cannot participate in the Cal-Learn Program if we told you we cannot serve you.
- We will only pay for Cal-Learn supportive services for an approved activity.

OTHER INFORMATION

Medi-Cal Managed Care Plan Members: The action on this notice may stop you from getting services from your managed care health plan. You may wish to contact your health plan membership services if you have questions.

Child and/or Medical Support: The local child support agency will help collect support at no cost even if you are not on cash aid. If they now collect support for you, they will keep doing so unless you tell them in writing to stop. They will send you current support money collected but will keep past due money collected that is owed to the county.

Family Planning: Your welfare office will give you information when you ask for it.

Hearing File: If you ask for a hearing, the State Hearing Division will set up a file. You have the right to see this file before your hearing and to get a copy of the county's written position on your case at least two days before the hearing. The state may give your hearing file to the Welfare Department and the U.S. Departments of Health and Human Services and Agriculture. **(W&I Code Sections 10850 and 10950.)**

TO ASK FOR A HEARING:

- Fill out this page.
- Make a copy of the front and back of this page for your records. If you ask, your worker will get you a copy of this page.
- Send or take this page to:

OR

- Call toll free: 1-800-952-5253 or for hearing or speech impaired who use TDD, 1-800-952-8349.

To Get Help: You can ask about your hearing rights or for a legal aid referral at the toll-free state phone numbers listed above. You may get free legal help at your local legal aid or welfare rights office.

If you do not want to go to the hearing alone, you can bring a friend or someone with you.

HEARING REQUEST

I want a hearing due to an action by the Welfare Department of _____ County about my:

- Cash Aid CalFresh Medi-Cal
 Other (list) _____

Here's Why: _____

- If you need more space, check here and add a page.
 I need the state to provide me with an interpreter at no cost to me. (A relative or friend cannot interpret for you at the hearing.)

My language or dialect is: _____

NAME OF PERSON WHOSE BENEFITS WERE DENIED, CHANGED OR STOPPED

BIRTH DATE

PHONE NUMBER

STREET ADDRESS

CITY

STATE

ZIP CODE

SIGNATURE

DATE

NAME OF PERSON COMPLETING THIS FORM

PHONE NUMBER

- I want the person named below to represent me at this hearing. I give my permission for this person to see my records or go to the hearing for me. (This person can be a friend or relative but cannot interpret for you.)

NAME

PHONE NUMBER

STREET ADDRESS

CITY

STATE

ZIP CODE

NOTICE OF ACTION CHILD CARE DISCONTINUANCE

COUNTY OF _____

STATE OF CALIFORNIA
HEALTH AND HUMAN SERVICES AGENCY
CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

Notice Date : _____
Case Name : _____
Number : _____
Worker Name : _____
Number : _____
Telephone: _____
Address : _____

(ADDRESSEE)

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Questions? Ask your Worker.

State Hearing: If you think this action is wrong, you can ask for a hearing. Your benefits may not be changed if you ask for a hearing before this action takes place. If you and the county disagree or if you have not heard back from your worker, do not wait to ask for a hearing. You must ask for the hearing before a certain number of days. See the back of this notice for more information and to find out how to ask for a hearing.

Your child care reimbursement for _____ will stop on _____.
NAME OF CHILD DATE

HERE'S WHY:

- You are not in an approved CalWORKs activity/program.
- You moved out of this county. We are no longer the county processing your child care. You need to apply for child care services in your new county of residence, so the new county can determine your eligibility for child care.
- You do not have to go to the approved county welfare-to-work activity/program right now and have chosen not to participate as a volunteer.
- You did not meet the CalWORKs program requirements. (See notes).
- You went off CalWORKs cash aid. You may be eligible for Stage Two child care. Please call the Child Care Resource and Referral agency listed below.
- You asked that your child care reimbursements stop.
- Your child is older than 12, and we do not have information that shows your child is disabled or under court supervision to keep getting child care.
- Your child(ren) no longer need(s) child care because _____
REASON
- Your child care provider is a member of your CalWORKs/ Cal-Learn assistance unit.
- Your child care provider _____, had his/her application for TrustLine, denied, or closed, or revoked.
NAME
- Your income is \$ _____ which is more than the 70% percentile of the State median income limit. State law limits eligibility to this income amount.
- You are no longer eligible for post aid child care services because _____.
REASON
- Other: _____

You can also call your worker/case manager if you think this notice is wrong.

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To see if you may qualify for other child care programs, you can contact the local Child Care Resource and Referral agency listed below:

Name: _____ Telephone: _____
Address: _____

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- Your CalFresh benefits will stay the same until the hearing or the end of your certification period, whichever is earlier.

If the hearing decision says we are right, you will owe us for any extra Cash Aid, CalFresh or Child Care Services you got. To let us lower or stop your benefits before the hearing, check below:

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PHONE NUMBER

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CITY

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