

**Allegheny County
Department of Human Services**



**Office of Community Services
Bureau of Employment & Training**

**Subrecipient Contract Manual
For Programs Funded Under TANF
(Temporary Assistance for Needy Families)**

Revised October 2014

INTRODUCTION

This CONTRACT MANUAL is intended to provide requirements for compliance with specific provisions, terms and conditions applicable to the service or services to be provided through an agreement between the ALLEGHENY COUNTY Department of Human Services, Office of Community Services and a contracted SERVICE PROVIDER. By reference in the Agreement, the applicable compliance chapters of provisions of the CONTRACT MANUAL are correspondingly incorporated herein.

The terms, conditions, forms and procedures in this manual are subject to change from time to time as required by law, and shall be amended or modified by written notification from the COUNTY to the SERVICE PROVIDER.

CONTRACT CONDITIONS

The SERVICE PROVIDER shall adhere to the terms and conditions as established in:

- DHS General Requirements/Contract Specification Manual
- DHS Payment Provisions Manual

As well as those detailed in this CONTRACT MANUAL.

The SERVICE PROVIDER shall be responsible for completing and submitting all applicable forms and reports as listed in this manual and/or referred to in the SERVICE PROVIDER's Exhibit A Scope of Services of the Agreement.

It is understood upon formal notification from OCS, reporting forms, format, and/or reports are subject to change during the Agreement period.

Copies of forms/reports applicable to Agreements include but are not limited to forms in this CONTRACT MANUAL.

The following links provide a federal overview of the legislation which guides the Pennsylvania Employment Advancement and Retention Network (EARN).

TANF Reauthorization Fact Sheet

<http://www.acf.hhs.gov/programs/ofa/drafact.htm>

Final Interim Rules Fact Sheet

<http://www.acf.hhs.gov/programs/ofa/regfact.htm>

OVERVIEW OF EMPLOYMENT & TRAINING PROGRAMS

OVERVIEW

The Allegheny County Department of Human Services, Office of Community Services, Bureau of Employment & Training provides workforce development services to Allegheny County residents, both job seekers and employers. Job seeker services are targeted to welfare participants and older adults. The goal of all the services is to enable customers to find and retain self-sustainable employment, explore career opportunities, and become job ready.

Welfare programs are funded by the PA Department of Public Welfare and contracted to the DHS Office of Community Services. The goal of these programs is to assist recipients of Temporary Assistance to Needy Families (TANF) to become self-sufficient through gaining and retaining sustainable employment. These programs provide employment and training services including assessment, intensive case management, work activities, job skills training, job placement, follow-up, and retention services to cash welfare and SNAP (Supplemental Nutrition Assistance Program) clients. Funds come to Allegheny County by formula.

The Welfare Delivery System – The EARN and Work Ready Program

The Employment, Advancement and Retention Network (EARN) Program was developed in 1987 (formerly SPOC) to address the needs of welfare clients with barriers to employment. EARN is designed to provide comprehensive work activities, job placement and retention, supportive services and child care to welfare recipients to enable them to move from welfare to self-sustaining employment. EARN provides services to TANF recipients and to small percentages of SNAP recipients.

The Work Ready Program serves welfare clients with serious barriers to full participation in the work force. The program works to alleviate barriers and transition clients to work or to full participation in the EARN program.

The Office of Community Services, in conjunction with contracted agencies, operates three EARN Centers and one Work Ready Center. Additional services are contracted to public, not-for profit, community-based and for-profit organizations.

EARN Performance and Monitoring Requirements, Forms, Policies and Procedures

OIM-Bureau of Program Evaluation

Division of Program Implementation

EARN Monitoring Overview

Two Types of Reviews

- Monthly Payment Validation
- Monthly Random Sample

Payment Validation

- Review will be conducted on all participants for whom payment was issued
- Paystubs for all hours reported in CWDS must be provided via DocuShare
- Pay information must be uploaded to DocuShare by **No Later Than** the 15th of the month for participants listed in the payment report issued the beginning of the month
- Any documentation not received by the 15th will **not** be used for payment validation

Payment Review Process/Timeline

- CWDS report will be available on or about the 1st of each month (Starting 1 Dec 12)
- Report accessible via CWDS for each provider
- Provider has until the 15th of the month to upload documentation into DocuShare
- BPE-DPI begins validation once all info is received

CWDS Placement Report



RPT172 - B - PRM - Job Placement

7/1/2011 - 7/31/2011

Run Date: 11/5/20

Participant ID	CASE ID	Name	Provider Name	Enrollment Date	Employment Begin Date	Week 1		Week 2		Week 3		Week 4	
						Date	Hours	Date	Hours	Date	Hours	Date	Hours
Program ID:D0002 - ST. BENEDICT EDUCATION CENTER													
2987765	10417535	Baral, T	St. Benedict Education Center	07/15/2011	07/25/2011	07/30/2011	40	08/06/2011	40	08/13/2011	40	08/20/2011	40
449728	10439565	Burger, B	St. Benedict Education Center	07/21/2011	07/23/2011	08/06/2011	34	08/13/2011	35	08/20/2011	35	08/27/2011	35
377191	10404804	Campbell, L	St. Benedict Education Center	07/06/2011	08/31/2011	09/03/2011	23	09/10/2011	23	09/17/2011	30	09/24/2011	30
71820	10453520	Davenport, B	Clarion Office	07/23/2011	09/22/2011	10/08/2011	42	10/15/2011	42	10/22/2011	42	10/29/2011	42
371256	10406481	Echeverria, M	St. Benedict Education Center	07/12/2011	09/12/2011	09/17/2011	37	09/24/2011	37	10/01/2011	40	10/08/2011	40
1207850	10382061	Feely, A	Venango Office	07/05/2011	08/16/2011	08/20/2011	24	08/27/2011	24	09/03/2011	24	09/10/2011	24
3062898	10406621	Kliem, T	Crawford Office	07/12/2011	07/18/2011	07/23/2011	23	07/30/2011	23	08/06/2011	29	08/13/2011	29
1722707	10439582	Macko, J	St. Benedict Education Center	07/21/2011	07/25/2011	07/30/2011	40	08/06/2011	40	08/13/2011	20	08/20/2011	20
1192471	10473862	Mcquire, S	Crawford Office	08/01/2011	09/09/2011	09/17/2011	41	09/24/2011	33	10/01/2011	38	10/08/2011	38
3108331	10452266	Michaels, M	St. Benedict Education Center	07/19/2011	07/25/2011	07/30/2011	26	08/06/2011	26	08/13/2011	26	08/20/2011	26
1172662	10431597	Moore, S	St. Benedict Education Center	07/19/2011	09/16/2011	10/22/2011	26	10/29/2011	26	11/05/2011	26	11/12/2011	26
3092949	10404813	Noble, M	St. Benedict Education Center	07/07/2011	09/16/2011	09/17/2011	20	09/24/2011	20	10/01/2011	20	10/08/2011	20
1918127	10448179	Williamson, D	St. Benedict Education Center	07/21/2011	08/30/2011	09/17/2011	21	09/24/2011	21	10/01/2011	21	10/08/2011	21

Carryover Count: 179

Monthly Enrollment: 60

Total Enrollment: 239

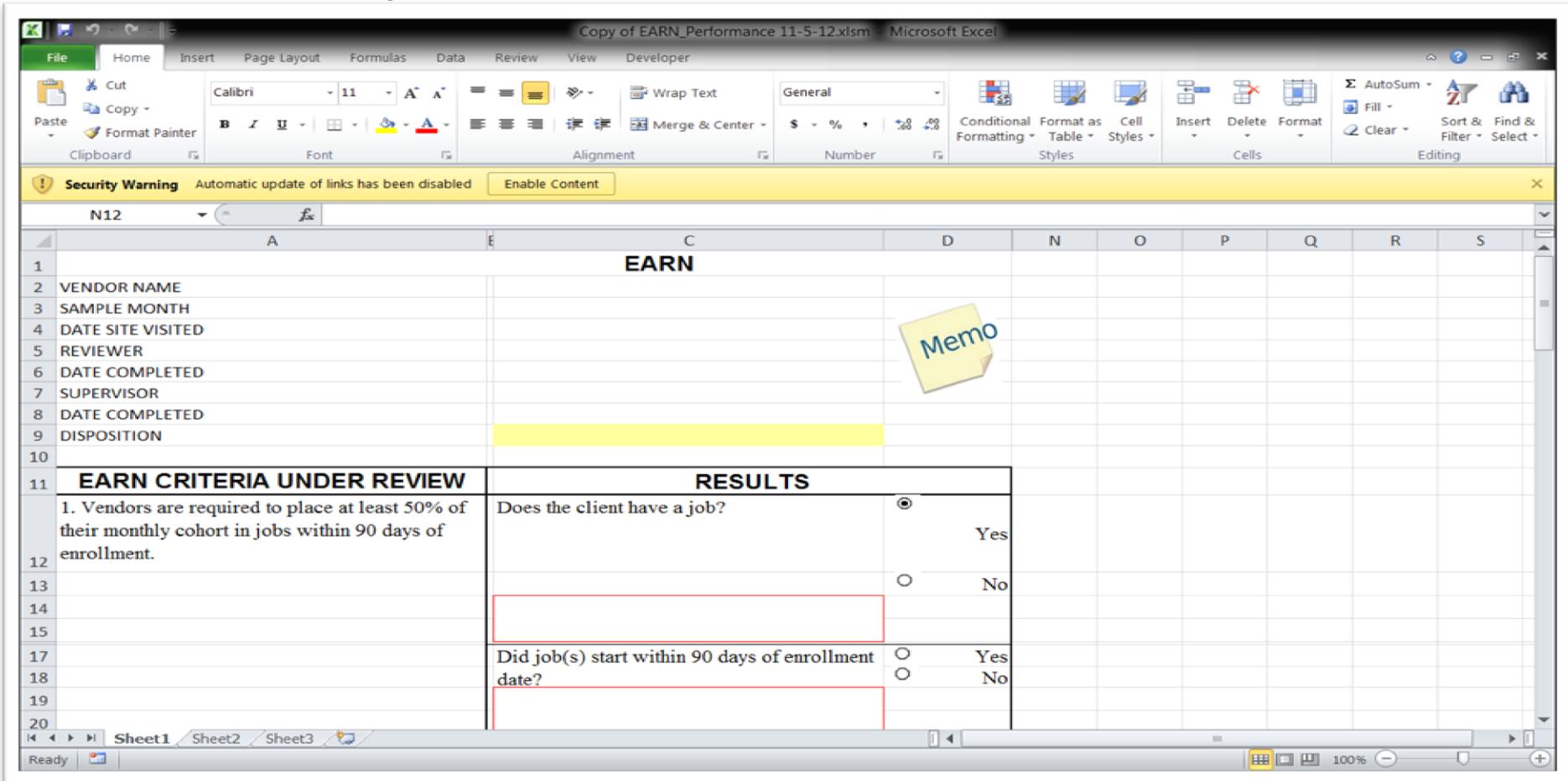
Total Placements: 13

Placement Percentage: 5.4%

Program ID:D0003 - PITTSBURGH WIA

2932438	10436493	Bayts, E	Pittsburgh RTC	07/21/2011	09/14/2011	09/17/2011	20	09/24/2011	20	10/01/2011	20	10/08/2011	20
1247332	10456615	Bonner, J	Pittsburgh RTC	07/21/2011	10/03/2011	10/08/2011	37	10/15/2011	37	10/22/2011	37	10/29/2011	37
1384882	10425531	Coffey, S	Pittsburgh RTC	07/12/2011	09/14/2011	09/17/2011	38	09/24/2011	38	10/01/2011	38	10/08/2011	38
208989	10417180	Flowers, D	Pittsburgh RTC	07/12/2011	08/22/2011	09/03/2011	36	09/10/2011	36	09/17/2011	36	09/24/2011	36
2243901	10412352	Frye, D	City of Pittsburgh	07/11/2011	07/11/2011	07/16/2011	35	07/23/2011	20	07/30/2011	20	08/06/2011	40
3106751	10484011	Ginyard, J	Hill Oakland Workforce Collaborative/Job Links of OPDC	07/28/2011	09/14/2011	09/17/2011	20	09/24/2011	20	10/01/2011	20	10/08/2011	20
241240	10453800	Jamison, L	Pittsburgh RTC	07/26/2011	10/03/2011	10/08/2011	43	10/15/2011	43	10/22/2011	43	10/29/2011	43
283743	10416843	Jeffries, J	Pittsburgh RTC	07/05/2011	07/29/2011	08/06/2011	32	08/13/2011	32	08/20/2011	32	08/27/2011	32
1688609	10404208	Johnson, L	Pittsburgh RTC	07/07/2011	07/09/2011	07/09/2011	21	07/16/2011	21	07/23/2011	21	07/30/2011	21
1727696	10455005	Martin, A	Pittsburgh RTC	07/21/2011	08/31/2011	09/10/2011	20	09/17/2011	20	09/24/2011	20	10/01/2011	20
2898880	10453692	Murray, G	Pittsburgh RTC	07/26/2011	08/26/2011	09/10/2011	25	09/17/2011	25	09/24/2011	25	10/01/2011	25
1641122	10424741	Seav, I	Pittsburgh RTC	07/14/2011	08/15/2011	08/20/2011	20	08/27/2011	20	09/03/2011	20	09/10/2011	20

Payment Review Form



Copy of EARN_Performance 11-5-12.xlsm - Microsoft Excel

File Home Insert Page Layout Formulas Data Review View Developer

Clipboard Font Alignment Number Styles Cells Editing

Security Warning Automatic update of links has been disabled Enable Content

N12

	A	E	C	D	N	O	P	Q	R	S
1			EARN							
2			VENDOR NAME							
3			SAMPLE MONTH							
4			DATE SITE VISITED							
5			REVIEWER							
6			DATE COMPLETED							
7			SUPERVISOR							
8			DATE COMPLETED							
9			DISPOSITION							
10										
11			EARN CRITERIA UNDER REVIEW							
12										
13			1. Vendors are required to place at least 50% of their monthly cohort in jobs within 90 days of enrollment.	Does the client have a job?	<input checked="" type="radio"/>	Yes				
14					<input type="radio"/>	No				
15										
16										
17				Did job(s) start within 90 days of enrollment date?	<input type="radio"/>	Yes				
18					<input type="radio"/>	No				
19										
20										

Sheet1 Sheet2 Sheet3

Ready 100%

Sample Review

- Review will be conducted on randomly selected cases from the monthly cohort
- 30 cases per month for Philadelphia
- 30 cases per month for the rest of the state
- Review targets parameters outlined in the EARN Program and Procedure Manual
- Notification letter will be sent indicating the participants names, documents for submission and date documents are due

Sample Review Process/Timeline

- Sample cases provided via email within first five business days of the month
- Providers have until ***No Later Than*** the 15th of the month to upload documentation into DocuShare
- BPE-DPI begins review as soon as documentation is received
- BPE-DPI compiles review data and provides summary to providers

Sample Review Letter



Date

Subject: Monthly Sample Review

To: Contact Name
Executive Director
Contractor Name|

FROM: Sue A. Pulaski
Director
Bureau of Program Evaluation
Division of Program Implementation

The Bureau of Program Evaluation is responsible for monitoring each of its welfare client employment and training programs to ensure compliance with applicable federal, state, and DPW regulations, as well as contract provisions. As part of the monitoring process the Bureau will be conducting monthly case record reviews for contracted vendors currently administering the Employment Advancement and Retention Network (EARN), and Work Ready (WR) programs. The purpose of this review is to verify compliance with your organizations contractual obligations and to ensure that quality service is being provided to program participants. Once the review is completed you will receive notification identifying

Sample Documentation

Monthly Sample Checklist – Acceptable Documentation

The following are acceptable forms of documentation:

Referral / Enrollment

- Agreement of Mutual Responsibility form (AMR) (PA 1661);
- Employment and Development Plan (EDP) (PA 1531); and
- Case Management Narratives.

Service Plan Completion

- AMR (PA 1661);
- EDP (PA 1531);
- Signed Service Plan; and
- Medical Assessment Form (MAF) (PA 635, PA 1663).

Activities / Time Tracking

- AMR (PA 1661);
- EDP (PA 1531);
- Attendance / Activity Sheets;
- Community Service Agency Agreement Form (PA 1694);
- Community Service Weekly Participation Report (PA 590);
- Excused Absence Tracking Log;

Sample Checklist



EARN / WR Monthly Case Record Review Form Checklist

Program Name:

Provider Name:

Review Month:

BPE Due Date:

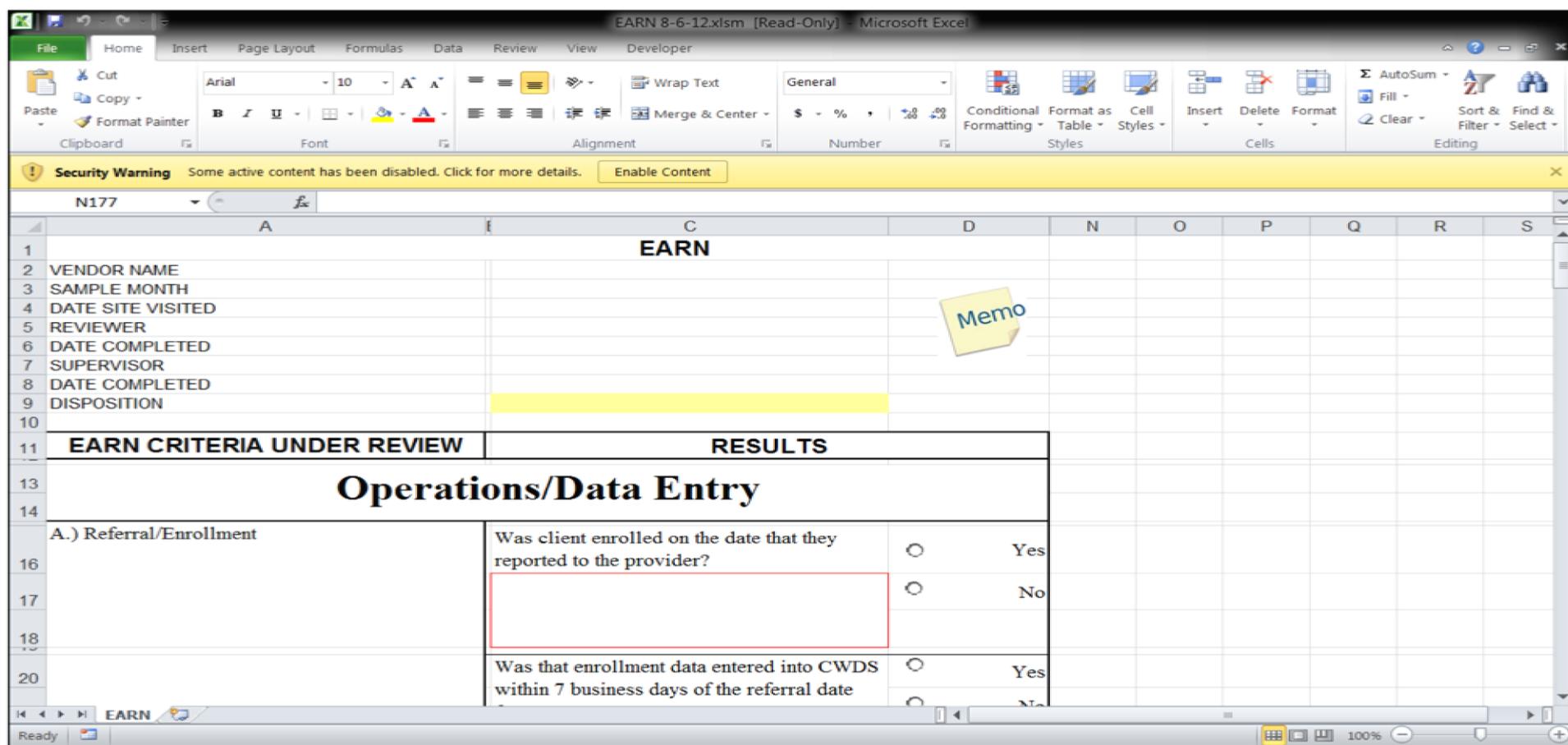
Participant Name:

Participant ID#:

Enrollment Date:

<u>#</u>	<u>Document</u>	<u>Provided Yes/ No</u>	<u>Comments</u>
1	AMR (PA 1661) / EDP (PA 1531)		
2	Signed Service Plan		

Sample Review Form



EARN

EARN CRITERIA UNDER REVIEW	RESULTS
Operations/Data Entry	
A.) Referral/Enrollment	
Was client enrolled on the date that they reported to the provider?	<input type="radio"/> Yes
	<input type="radio"/> No
Was that enrollment data entered into CWDS within 7 business days of the referral date	<input type="radio"/> Yes
	<input type="radio"/> No

DocuShare

- Accessed via Internet at <https://www.dpwds.state.pa.us/docushare/dsweb/HomePage>
- Houses documents, provides notifications and view log and other features
- Each vendor has at least one DocuShare user
- Provides quick and easy upload to all file types

Monitoring Review Process



DocuShare Login - Windows Internet Explorer provided by PA Dept of Public Welfare

https://www.dpwds.state.pa.us/docushare/dsweb

Share Browser WebEx

McAfee

USS RONALD REAGAN Fa... pa department of transpo... Web Slice Gallery

DocuShare Login x iGoogle

Home RSS Mail Print Page Safety Tools



Login

Location: Home

Login:

Access to the site is restricted to specific users
Access to the registry is restricted to specific users
Account creation is restricted to administrators
Group creation is restricted to administrators

Username

Password

Domain

Retain login for future

***For Business Account Users ONLY* (b-)**
[Reset Password](#) - You must have already set your hint in order to reset your password.
[Set Hint](#)

Note: You must login to add content or see restricted content.

Monitoring Review Process



My DocuShare - Windows Internet Explorer provided by PA Dept of Public Welfare
http://docushare.dpw.lcl/docushare/dsweb/MyHomePage

Share Browser WebEx
McAfee
Favorites: USS RONALD REAGAN Fa... pa department of transpo... Web Slice Gallery
Payment My DocuShare



spulaski Logout My Tasks

Location: Home

My DocuShare

Your DocuShare Personal Home Page

Personal Collection

Show: All Go

(Page 1 of 1)

Title	Owner	Edited	Size	Actions
BETP F&DM	spulaski	05/22/09	0	
SOAR Project	spulaski	05/22/09	0	

Site Home

View the top level contents.

(Page 1 of 4)

Type	Title	Owner	Edited	Size	Actions
Folder	BFO	admin	04/01/09	7	

Favorites

Show: All Go

(Page 1 of 1)

My Groups

View the groups you belong to.

(Page 1 of 12)

- [DEPPM-RFP16-09-Reviewers](#)
- [DPW on the Move Readers](#)
- [Imaging Steering Committee](#)
- [IM-SecuredHQStaff](#)

Monitoring Review Process



[spulaski](#) | [Logout](#) | [My DocuShare](#) | [My Tasks](#)

Search In: This Collection [Advanced](#)

My Background Jobs (2)

Location: [Home](#) » [BPE-Div of Program Implementation](#) » [BPE/DPI Monitoring Listing](#)

BPE/DPI Monitoring

- Properties
- Add to Favorites

Edit Selected... Add...

<input type="checkbox"/>	Type	Title	Owner	Edited	Size	Actions
<input type="checkbox"/>	Folder	EARN	ggomez	07/31/12	30	
<input type="checkbox"/>	Folder	Work Ready	ggomez	07/31/12	39	

Monitoring Review Process



 EARN

 Properties
 Add to Favorites
▼

Edit Selected... Add...

Show: 1 - 20 of 30  

<input type="checkbox"/>	Type	Title	Owner	Edited	Size	Actions
<input type="checkbox"/>	Folder	Project ID - D0002 Northwest WIA	ggomez	08/22/12	2	    ▼
<input type="checkbox"/>	Folder	Project ID - D0003 City of Pittsburgh	ggomez	08/22/12	1	    ▼
<input type="checkbox"/>	Folder	Project ID - D0004 Allegheny County	ggomez	08/22/12	1	    ▼
<input type="checkbox"/>	Folder	Project ID - D0006 Tri-County WIA	ggomez	08/22/12	1	    ▼
<input type="checkbox"/>	Folder	Project ID - D0007 Westmoreland-Fayette WIA	ggomez	08/22/12	1	    ▼

Monitoring Review Process



Location: Home » BPE-Div of Program Implementation » BPE/DPI Monitoring » EARN » Project ID - D0002 Listing

Project ID - D0002 Northwest WIA

-  Properties
-  Add to Favorites

Contractor Name: Regional Center for Workforce Excellence (Northwest WIA)
Subcontractor: St. Benedicts Education Center
Counties Served: Clarion, Crawford, Erie, Forest, Venango, Warren

Edit Selected... <input type="button" value="Go"/>		Add... <input type="button" value="Go"/>	Refresh		
<input type="checkbox"/>	Type Title	Owner	Edited	Size	Actions
<input type="checkbox"/>	 Payment *NEW	ggomez	11/05/12	0	    
<input type="checkbox"/>	 Sample *NEW	ggomez	11/05/12	0	    



Uploading Instructions

- Documents should be converted to a .pdf file and uploaded into EARN Project ID folder for payment month
- All documents for an individual participant should be converted to ONE .pdf file
- Scanned documents must be scanned in chronological order, from oldest to newest
- Naming convention = “Last Name First Name.pdf” (GomezGilbert.pdf)
- Access will be limited to user folder only, or any public access folders created by BPE/DPI in DocuShare

HIPAA SECURITY TRAINING

HIPAA was designed to reform the way health care information was shared by providers.

Vocabulary:

PHI - Protected Health Information

HIPAA - Health Insurance Portability and Accountability Act of 1996

Who is covered?

- Health Care Providers
- Health Care Clearinghouses (Billing Companies)
- Health Care Plans
- DPW

What does HIPAA cover?

- Treatment codes, forms, and processes used by providers
- Identifier codes or numbers for providers, health plans, and employers
- Privacy addresses who has access to PHI in any form (oral, written, electronic)
- Security addresses how PHI is protected, both in storage and in transmission

What are we securing?

- Data that identifies or includes information that could identify an individual
- Data that relates to the past, present, or future
- The physical or mental health, provision of health care to the individual
- Payment for health care to an individual

What is HIPAA security?

- The technical controls to ensure that: Only the right people see the data, data is what it's supposed to be, it has not been changed or corrupted, and the data is available when it is needed. The data is protected from threats or hazards - fire, flood, theft, storm, disclosures not permitted by policy, accidental or deliberate access or unauthorized person.

Who cares?

- Commonwealth of PA: Misuse or unauthorized disclosure of this data could lead to **TERMINATION OR OTHER DISCIPLINARY ACTION, POSSIBLE CRIMINAL CHARGES, AND/OR CIVIL PENALTIES.**
- Federal Government: Misuse or unauthorized disclosure can result in **CRIMINAL PENALTIES INCLUDING IMPRISONMENT OF UP TO 10 YEARS AND FINES OF UP TO \$250, 000.** Additional penalties may be applied as a result of civil action.

General DPW Practices:

- Abide by user ID and password policies
- Lock work stations
- Don't install software from home or from the internet onto your work station
- Limit internet use to work-related activities
- Don't open unsolicited email
- Immediately report unusual work station behavior to your supervisor
- Immediately report possible theft or misuse of your user ID and/or password to your supervisor



AGREEMENT OF MUTUAL RESPONSIBILITY

YOUR RESPONSIBILITIES ARE TO:

- ✓ Work with your caseworker to develop a plan for how you can take care of yourself (and your family) without using cash assistance. This includes filing for child or spousal support unless you have a good reason for not doing so.
- ✓ Discuss and agree on other specific things you need to do (goals), and the dates you will get them done.
- ✓ Work with your caseworker to set new goals if your situation changes, and tell your caseworker when you finish parts of your plan.
- ✓ Complete the steps in your plan (meet your goals) by the dates you discussed with your caseworker.
- ✓ Make sure your children get proper medical care and keep up to date with all their shots.
- ✓ Make sure your children attend school.
- ✓ Cooperate with TANF random sampling if you are asked. This could include providing employment and work-related activity hours to your caseworker.

OUR RESPONSIBILITIES ARE TO:

- ✓ Explain that you may receive cash assistance from the Temporary Assistance for Needy Families (TANF) Program for a total of only 5 years (60 months) in your lifetime. TANF provides temporary help until you and your family are again able to support yourself.
- ✓ Explain that the Time-Out program can provide benefits that do not count against the 5-year limit for families that meet certain program requirements.
- ✓ Explain that you and your family may receive other cash assistance to help you pay necessary living expenses if you are not eligible for TANF.
- ✓ Explain that help to pay for child care is available so you can attend school, work, or participate in other activities to help you qualify for a job.
- ✓ Explain which special allowances for supportive services such as transportation, child care, and clothing, may be available to you and assist you in getting the paperwork needed to qualify for those supportive services.
- ✓ Help you decide what steps you can take so you are able to support yourself and your family without using cash assistance.
- ✓ Help you find other groups and/or people who can help you with your plans to meet your goals.
- ✓ Explain other ways that we can help you, such as The Disability Advocacy Program (DAP), Earned Income Credit (EIC), Time-Out, the Maximizing Participation Project (MPP), and special ways we can work with victims of domestic violence.
- ✓ Explain available education and training opportunities.
- ✓ Explain your right to volunteer for work-related activities or education/training if you are not required to work.
- ✓ Give you information about the Food Stamp Program and the possibility of continuing to receive Food Stamps, Medicaid, and child care assistance when you stop receiving TANF due to earnings from a job.

Customer Initials

Date

Agency Initials

Date

TAKING STEPS TO SUPPORT YOURSELF AND YOUR FAMILY

EMPLOYMENT

- If you are not working an average of at least 20 hours per week or in an approved education or job skills training activity during the first 24 months you receive cash assistance, you must start a job search or take part in a work activity or work-related activity unless you have a good reason not to. We have information and workshops that can help you with your job search.
- After you have received cash assistance for 24 months, you must either be working an average of at least 20 hours per week or be participating in a work activity or approved education or job skills program.
- A caseworker is available to discuss programs that are available to assist you.
- We can help with the cost of child care, transportation and other expenses, if needed. Ask your caseworker about how to find a good child care provider and referral services to help you find other groups and/or people who can help you follow your plan.

COURT-ORDERED SUPPORT

- Income from a support order combined with the wages you earn from a job can make the difference in moving you and your family toward no longer needing cash assistance. Getting a job will not affect your right to get child support.
- You must cooperate with the local Domestic Relations agency to obtain child support unless you have good reason for not doing so. This includes providing the name and any other information you have about an absent parent, signing and returning support forms, keeping appointments and/or attending any paternity or support hearings at the local Domestic Relations agency.
- You do not have to file for support if you feel that doing so would place either you or your children in danger of abuse from an absent parent, make it harder for you to flee from an abusive parent, or penalize you or your children because of abuse.
- We will help you complete the required papers or make an automated referral to Domestic Relations.

CHILDREN'S NEEDS

- Health screenings, shots, and medical care, as suggested by your doctor or clinic, will help your children grow into healthy adults. Ask about the health screening program for children under age 21.
- Ask your caseworker about help you may get if you are caring for a special needs child.
- Making sure your children go to school everyday will give them a head start on a better tomorrow.
- Select child care with a safe, nurturing environment and learning opportunities for your child.

HEALTH

- Keeping yourself and your children healthy is an important step to independence.
- If you are pregnant, it is important that you keep all appointments scheduled by your doctor or clinic.
- You can get help from your caseworker if you need transportation to get to your doctor or clinic.
- If drugs or alcohol are preventing you from finding or keeping a job, you must participate in and complete an available certified substance abuse counseling program. All services will be confidential.
- If you or a family member has a mental health or mental retardation issue that prevents you from working, we can make a referral to an agency that can help you. All services will be confidential.

EDUCATION

- Getting a high school diploma or learning a skill or trade can mean a good job and a brighter future. You may also choose to get additional education or training, including a college degree.
- We can help you with expenses, such as the cost of child care and transportation, so you can return to school.

OTHER ACTIVITIES

- Make all payments to child care providers and other providers from benefits given to you for these services.
- Your caseworker will help you identify other activities that will help you improve your situation and your chances for being able to support yourself and your family.

Customer Initials

Date

Agency Initials

Date

**PLAN FOR SUPPORTING MYSELF
AND MY FAMILY**

AGREEMENT OF MUTUAL RESPONSIBILITY

LINE NO:	NAME:	SOCIAL SECURITY NO:	
COUNTY:	CASE NO:	TELEPHONE NO:	DATE:

GOALS:

My long term goals:

My goal for the next six months:

Number of TANF Days _____ GA days _____ used to date

Time Out Begins ____/____/____ Time Out Ends ____/____/____

Initial Job Search Completed Yes No

Highest Education Level Completed _____

Birth Date of the Youngest Child _____

Paid Work Experience Weeks Completed _____

Allowable Community Service Hours Per Week _____

EMPLOYMENT & TRAINING STATUS:

Exempt Mandatory With Good Cause Mandatory

BARRIERS TO BEING ABLE TO SUPPORT MYSELF AND FAMILY:

PLAN TO ADDRESS BARRIERS/FAMILY ISSUES:

**PLAN FOR SUPPORTING MYSELF
AND MY FAMILY**

AGREEMENT OF MUTUAL RESPONSIBILITY

LINE NO:	NAME:	SOCIAL SECURITY NO:	
COUNTY:	CASE NO:	TELEPHONE NO:	DATE:

PARTICIPATION ACTIVITIES:

Good cause has been reviewed and is:

Granted

Denied

Not Applicable

Number of hours required to participate _____

What:

Where:

When:

Hours:

Number of hours required to participate _____

What:

Where:

When:

Hours:

AGENCY HELP:

Report on this plan to _____ by: _____
Worker's Name
Date
Telephone Number

I have read and understand this agreement. I understand that signing this agreement is a condition of eligibility and that the penalties, listed on page 5 of this form, may be imposed if I willfully fail, without good cause (good reason), to complete mandatory activities. I agree to take the actions outlined in this plan. (62 P.S. 405.3)

Customer Signature

Date

The agency will provide services to help you, to the extent possible, so you can complete the actions outlined in your plan.

Agency Signature

Date

AGREEMENT PENALTIES

IF YOU REFUSE OR WILLFULLY FAIL TO:	THE PENALTY WILL BE:
Develop a plan with your caseworker and sign the Agreement of Mutual Responsibility, unless you have a good reason for not doing so.	You will not be eligible for your share of the cash grant until you complete and sign an Agreement.
Cooperate with the requirements to seek support and/or verify paternity, unless you have a good reason for not doing so.	You will be removed from the grant. Your benefits will be reduced by at least 25 percent. Benefits for your children will be sent to a protective payee.
<p>Meet work requirements, unless you have a good reason for not doing so. This includes, but is not limited to:</p> <ul style="list-style-type: none"> • participating in a work or work-related activity including education and training; • attending scheduled assessment interviews and work shops; <p style="text-align: center;">and</p> <ul style="list-style-type: none"> • actively searching for a job and providing required documentation. 	<p>1st violation – Ineligible for 30 days or until you comply, whichever is longer.</p> <p>2nd violation – Ineligible for 60 days or until you comply, whichever is longer.</p> <p>3rd violation – Permanent disqualification.</p> <p>During the first 24 months of receiving assistance, these penalties apply only to you. After 24 months, these penalties will apply to your entire family.</p>
Maintain earnings by voluntarily, and without good reason, reducing your work hours to less than an average of 20 hours per week while receiving assistance.	Your grant will be reduced by an amount equal to what you would have earned if you had not voluntarily reduced your hours to less than an average of 20 hours per week.
Participate in available drug or alcohol treatment if substance abuse is preventing you from finding or keeping a job.	You will not be eligible for your share of the cash grant until you cooperate with an available treatment plan.
Apply for other possible sources of income.	If you are an applicant for General Assistance, you are ineligible for at least 60 days and until compliance. Otherwise, you are ineligible until you agree to meet the requirements.

YOUR RIGHTS

Prior to your benefits being reduced or discontinued, you have the right to have your case reviewed to determine if you had good cause (good reason) for not meeting requirements. You have the right to receive a notice of action before your benefits are reduced or stopped. You have the right to appeal and request a fair hearing if you disagree with our decision. Your benefits will continue if you file your appeal within 10 days of the date of the notice proposing to reduce or stop your benefits.

GOOD CAUSE

Good cause will be considered if the reason for not completing the steps in your Plan for Supporting Yourself and Family is beyond your control. Examples of good cause are domestic violence, not having proper child care, below-standard conditions at the job, or the need to care for a disabled or ill person.

Customer Initials

Date

Agency Initials

Date

CONTRACTOR RESPONSE FORM

PROGRAM: _____

RETURN FORM TO: _____

FAX: _____

DISTRICT OFFICE: _____

PHONE: _____

CLIENT INFORMATION

NAME: _____

RECORD No: _____ **LINE No:** _____

REFERRAL REJECTIONS:

Client did not keep program appointment on _____.

Referral will be rejected. Client rescheduled for _____ (date)

Client did not respond to outreach.

Client kept initial appointment on _____ (date) but did not complete enrollment.
Referral will be rejected.

ENROLLMENT:

Client was enrolled on _____ (date)

Client was terminated from program on _____ (date)

Reason: _____

COMMENTS:

Contractor Use Only

City Earn

County Earn

- Pittsburgh
- McKeesport
- Wilkinsburg

ETSU

- Self-Initiated
- Low Hours

Keys

Work Ready

- PSCI
- Life's Work

PERSON RESPONDING _____ **DATE:** _____ **10/2011**

SUBJECT: PROJECT REFERRAL FORM

DATE _____

TO: _____ Agency/Program

FROM: _____ Name _____ District

PHONE: _____ E-Mail _____

REFERRAL NAME: _____

ADDRESS: _____

RECORD NO: _____ LINE NO: _____ PHONE: _____

REFERRED TO:

City EARN – Pittsburgh Partnership

County Earn – Allegheny County Department of Human Services (select location)

PITTSBURGH

MCKEESPORT

WILKINSBURG

Work Ready (select location)

LIFE'S WORK

PSCI

KEYS

Campus Site _____ Course Major _____

ETSU - EMPLOYMENT & TRAINING SUPPORT UNIT - self-initiated into vocational education

REFERRAL INFORMATION: (Check ALL that Apply)

TANF Extended TANF SNAP Mandatory Volunteer/Exempt/Good Cause

TANF DAYS _____ AS OF _____.

Number of Used PWE Weeks (26) _____

Number of Used Voc/ED Months (24, 16, 15, 14) _____

Number of Used Job Search Hours in past 12 Months (42, 44) _____

Number of Used Rehab Service Weeks in past 12 Months (48, 49) _____

COMMUNITY SERVICE CALCULATION:

PURE TANF/FS HH: FS allotment + FSA minus support (include pass thru) ÷ \$7.25 ÷ 4weeks = _____ Hours/Week

MIXED HOUSEHOLD: FSA minus support (include pass thru) ÷ \$7.25 ÷ 4 weeks = _____ Hours/Week

Child under 6 in Household

No Children under 6 in Household

2-Parent Household Hours Required _____

Under 20 years old

Comments: _____

Appointment Date _____

COUNTY EARN – DOWNTOWN PITTSBURGH

NAME: _____

is being referred to EARN.

LOCATION

333 Forbes Ave
Second Floor
Pittsburgh, PA 15222

CONTACT

Lorie Appleton
412-765-1280

Fax: 412-765-3572

DIRECTIONS

County EARN – Downtown Pittsburgh is located on Forbes Ave between Wood and Smithfield Streets. The entrance is at the crosswalk in the middle of the block in the Reemployment Transition Center.

APPOINTMENT DETAILS

You are to report on _____ (date) at _____ (time).

**Class hours begin at 8:30AM unless otherwise indicated. You must be on time.

MINIMUM HOURLY REQUIREMENT

20 hours/week because you have a child under 6 in your household

30 hours/week because there are no children under 6 in your household or you are receiving Extended TANF

_____ hours/week because both parents are in the household and this is your share

PROGRAM EXPECTATIONS

- On your first day, you will be scheduled for EARN Intake/Orientation. The program requirements will be reviewed and you will be introduced to the TEAM Members.
- You will be scheduled to begin program on the following day. The first week you will participate in evaluation and brush up of your existing skills.
- You may be required to participate in work activities. You may or may not get paid for these activities depending on past activities.
- You may be scheduled for education or vocational activities.
- Employment is your goal.
- You can receive 6 months of retention services. You will receive regular calls from a counselor who will ask you how things are going on your job and help you with any problems or services you may need. The agency will also help if this job does not work out for you.

PARTICIPANT SIGNATURE: _____

DATE: _____

IF YOU CANNOT KEEP THIS APPOINTMENT CALL 412-765-1280



Incident Report

Incident reports **must be filed with BOP within one business day** any time contractors become aware of any type of:

- ✓ Theft of property
- ✓ Theft of service
- ✓ Theft of information
- ✓ Need for law enforcement at the contractor's site or at any subcontractor site
- ✓ Breach of confidentiality or HIPAA requirements
- ✓ Failure to enroll clients on the first day they report to the program
- ✓ Significant inconsistencies between client record information and reports available through CWDS or on the Cumulative Monthly Participation Report
- ✓ Filing of a grievance by a client for any reason
- ✓ Firing of staff due to involvement with any of these issues
- ✓ Report of sexual harassment

BOP Contractor Incident Report

Contractor: _____ **Date Report Prepared:** _____

EARN **WORK READY** **Other:** _____

Person Preparing the Report: _____

Address of Preparer: _____

Phone Number of Preparer: _____ **E-mail:** _____

Submit the report to: RA-BOPEARNPOLICY@pa.gov

Subject title: Incident Report

Incident reports are due within one business day of the occurrence of the incident.

**Allegheny County Department of Human Services, Office of Community Services
Bureau of Employment & Training Services, PY13 Scope of Services (7/1/13 – 6/30/14)**

Provider Name:

Provider Address/ Name of Contact:

Name of Program:

Location of Services:

Target Population:

Recruitment/ Referral Methods:

Enrollment Level:

Program Staffing Level (Job Titles & Brief Description of Duties):

Intake/Assessment/Eligibility Determination Methods:

Content and Length of Services:

Data Entry and Reporting Methodology:

Performance Evaluation



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

Employment Advancement and Retention Network (EARN)

Authorization for Release of Information

I hereby authorize and request the disclosure to the EARN service provider any information concerning education and training activities and any additional information involving eligibility for myself. As a client in EARN, I give permission to the EARN service provider to discuss my case with other agencies as needed to further my participation in EARN. It is understood that the information obtained will be used only for purposes directly related to the participation and eligibility with the EARN service provider.

Staff Signature:	Date:
Client Signature:	Date

EARN PROGRAM ATTENDANCE SHEET

SERVICE PROVIDER NAME	
------------------------------	--

CLIENT NAME	
--------------------	--

WEEK ENDING	<input style="width: 100%; height: 20px;" type="text" value="___/___/___"/>
--------------------	---

ACTIVITY (Name and CWDS Code)	Sun	Mon	Tues	Wed	Thurs	Fri	Sat	TOTAL HOURS
TOTAL ACTIVITY HOURS								

TOTAL HOURS	
--------------------	--

Client Signature

Date

Staff Signature

Date



WEEK BEGIN DATE (SUNDAY)	WEEK END DATE (SATURDAY)	DUE DATE*

*Due at county assistance office no later than Friday following the "Week End Date"

COMMUNITY SERVICE AGENCY		
AGENCY NAME	PHONE NUMBER	FAX NUMBER
ADDRESS		

COUNTY ASSISTANCE OFFICE			
COUNTY	DISTRICT	CO	RECORD NUMBER
ADDRESS			
ATTENTION	PHONE NUMBER	FAX	

COMMUNITY SERVICE PARTICIPANT IDENTIFICATION		
PARTICIPANT'S NAME	PHONE NUMBER	MAXIMUM WEEKLY HOURS

DAILY HOURS WORKED							
SUN	MON	TUES	WED	THUR	FRI	SAT	TOTAL WEEKLY HOURS

These signatures certify that the information provided above is accurate.

_____ Participant

_____ Date

_____ Supervisor or Authorized Agency Representative

_____ Date

() _____ Telephone Number

The CAO must validate "Daily Hours Worked" and sign this form only if the signature of the Agency Representative is unattainable by the "Due Date".

_____ CAO Representative Signature

_____ Date

FAILURE TO COOPERATE - The community service agency should complete and fax/mail this form to the county assistance office immediately.

DID NOT REPORT FOR ASSIGNMENT

TERMINATED

OTHER (EXPLAIN)

_____ Authorized Agency Representative Signature and Title

_____ Telephone Number

_____ Date

COUNTY OF

ALLEGHENY



RICH FITZGERALD
COUNTY EXECUTIVE

REGINALD YOUNG
DEPUTY DIRECTOR, ALLEGHENY COUNTY DHS
OFFICE OF COMMUNITY SERVICES
1 SMITHFIELD STREET, 2ND FLOOR • PITTSBURGH, PA 15222
PHONE (412) 350-5709 • FAX (412) 350-2785

CONSENT FOR RELEASE OF INFORMATION

Job Seeker Name: _____

Last 4 Soc. Sec. #: _____

I hereby authorize the Allegheny County Department of Human Services EARN/WORK READY Programs to (check one or both): _____ obtain from the following _____ release to the following

AGENCY & CONTACT NAME: _____

ADDRESS: _____

The following document(s):

- | | | |
|---|---|--|
| <input type="checkbox"/> Attendance Information | <input type="checkbox"/> TABE/Assessment Scores | <input type="checkbox"/> Pre-Employment Health Information |
| <input type="checkbox"/> Contact Notes | <input type="checkbox"/> GED Information/Scores | Specify information to be released/obtained |
| <input type="checkbox"/> Progress Reports | <input type="checkbox"/> Transcripts | <input type="checkbox"/> Employment Information |
| <input type="checkbox"/> Treatment/Family Service Plans | <input type="checkbox"/> 33/34/FBI Clearances | <input type="checkbox"/> Other: _____ |

Any documents being sent to Allegheny County EARN/Work Ready should be mailed or faxed to the following:

CENTER: _____
ATTENTION: _____
ADDRESS: _____

FAX: _____ **PHONE:** _____

The records are required for the specific purpose of providing employment and training services. This form is in effect from _____ to _____, but not to exceed six months from the date of the Job Seeker's signature. I fully understand the nature of this consent. I understand I have the right to revoke this authorization at any time by written, dated communication, except to the extent the person making the disclosure has acted in reliance on it.

Job Seeker Signature

Date

Staff Signature

Date

cc. file
cc. job seeker
revised 11/8/12

**STATEMENT OF RECEIPT
APPLICANT/PARTICIPANT RIGHTS FORM**

I hereby certify that I have received, read and understand my "Civil Rights" as an Applicant/Participant of the WIA program and acknowledge so with my signature.

Applicant/Participant Signature	Date Signed
---------------------------------	-------------

Witnessed by WIA Representative	Date Witnessed
---------------------------------	----------------

Witnessed at (name and address where the document was received, signed and dated)

Note: This document must be retained in the Applicant/Participant file.

WIA-1 6 10-00 COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF LABOR AND INDUSTRY OFFICE OF EQUAL OPPORTUNITY

**DECLARACION D- RECIBO
SOLICITANTE/PARTICIPANTE**

Por este medio certifico que he leído y entiendo mis "Derechos Civiles" y como Solicitante/Participante en el programa "Workforce Investment Act" firmo este documento como prueba.

Firma del Solicitante/Participante	Fecha
------------------------------------	-------

Testigo representando a WIA	Fecha
-----------------------------	-------

Testigo (nombre y dirección donde se recibió y se firmó este documento)

Nota: Este documento debe mantenerse en el archivo de los Solicitantes/Participantes.

WIA-1 6S 10-00 COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF LABOR AND INDUSTRY OFFICE OF EQUAL OPPORTUNITY

COUNTY OF



ALLEGHENY

RICH FITZGERALD
COUNTY EXECUTIVE

GRIEVANCE FORM

JOB SEEKER NAME		CENTER	
CASE RECORD #		CENTER ADMINISTRATOR	
PARTICIPANT ID#		SERVICE COORDINATOR	
DATE		ON-SITE CAO WORKER	

PRINCIPAL PERSON(S) WITH WHOM YOU HAVE DISCUSSED YOUR COMPLAINT: _____

STATEMENT OF GRIEVANCE: _____

ACTION REQUESTED: _____

JOB SEEKER SIGNATURE & DATE

<p>Please submit completed form to:</p> <p>Allegheny County EARN & Work Ready Program Manager One Smithfield Street, 2nd Floor</p>

DATE RECEIVED BY ALLEGHENY COUNTY DHS: _____

ACTION TAKEN: _____

ALLEGHENY COUNTY DHS REVIEWER SIGNATURE & DATE

COUNTY OF



ALLEGHENY

RICH FITZGERALD
COUNTY EXECUTIVE

***ATTACH ADDITIONAL PAGES IF NECESSARY**
7/9/12

MARC CHERNA, DIRECTOR
DEPARTMENT OF HUMAN SERVICES
EXECUTIVE OFFICE

HUMAN SERVICES BUILDING • ONE SMITHFIELD STREET • SUITE 400 • PITTSBURGH, PA 15222
PHONE (412) 350-5701 • TDD (412) 473-2017 • FAX (412) 350-4004

EARN ORIENTATION CHECKLIST

PLEASE CHECK ALL APPROPRIATE ITEMS. YOU ARE VERIFYING THAT THESE STATEMENTS ARE TRUE.

I VERIFY THAT...

I have received, read, and understand the **ALLEGHENY COUNTY EARN HANDBOOK**. I understand my rights and responsibilities as outlined in the Handbook, and I agree to follow all rules and regulations. All of the following items are included in my Program Handbook:

- CCIS INFORMATION**
- WORK ACTIVITY INFORMATION**
- ATTENDANCE POLICY**
- INCENTIVE POLICY**
- SUPPORT SERVICE INFORMATION**
- CONDUCT POLICIES**
- COMPLAINT & GRIEVANCE POLICY**
- SEXUAL HARASSMENT POLICY**
- CIVIL RIGHTS/EQUAL OPPORTUNITY STATEMENT**
- FBI FLYER "KNOW YOUR RIGHTS"**
- HIPAA SECURITY TRAINING**

I have received, read, and understand the **ALLEGHENY COUNTY EARN WORK ACTIVITY HANDBOOK** and agree to follow all rules and regulations found within the handbook.

(initial & date if completed after Orientation)

Job Seeker Signature

Date

Service Coordinator Signature

Date

HIPAA SECURITY TRAINING STATEMENT

I, the undersigned, have read, understand, and received a copy of the **HIPAA SECURITY TRAINING** (Health Insurance Portability and Accountability ACT of 1996). I understand that the material I may be exposed to while performing my work activity:

- 1) May contain information about the program and/or its participants.
AND
- 2) Any information with identifying characteristics of the program and/or its Job Seekers is confidential and private.
AND
- 3) By signing this form, I understand and agree to keep confidential any and all information that I may be exposed to.

PLEASE PRINT NAME

SIGNATURE

DATE

**FAILURE TO ABIDE BY THIS CONFIDENTIALITY STATEMENT WILL RESULT IN YOUR
TERMINATION FROM THIS WORK ACTIVITY POSITION.**

[WORK READY SITE LETTERHEAD]

[DATE]

[ADDRESS]

[ADDRESS]

[ADDRESS]

Dear **[PARTICIPANT NAME]**:

The following letter contains **very important information!** Due to _____, you are in danger of being terminated from the Allegheny County Work Ready Program. It is absolutely imperative that you contact us immediately. We will do everything we can to help you resolve this matter!

Please call me or come into the office as soon as possible.

Sincerely,

[SERVICE COORDINATOR NAME & TITLE]

[SC PHONE NUMBER]

[SITE PHONE NUMBER]

cc: file

7/17/12

[EARN SITE LETTERHEAD]

[DATE]

[ADDRESS]

[ADDRESS]

[ADDRESS]

Dear **[JOB SEEKER NAME]**:

We regret to inform you that it was necessary to end your enrollment in the Allegheny County EARN Program. Your official Program End Date is: _____

Please feel free to contact me if you have any questions or need additional resources.

Sincerely,

[SERVICE COORDINATOR NAME & TITLE]

[SC PHONE NUMBER]

cc: file

DATE

Dear_____:

CONGRATULATIONS on your new employment! Now that you are working, you can **earn over \$1,000 in incentives for 26 to 36 weeks** while participating in the Retention Program! The only requirement is that you maintain at least 15 hours each week of employment and submit your pay stubs to me within 15 days of getting paid. **Call me ASAP to learn** more about this opportunity, and I will further explain how you can earn:

- up to **\$100 per month** in **Giant Eagle or Wal-Mart** gift cards
- **monthly Bus Pass OR monthly Gas Card**
- an additional **\$250** at the end of the Retention Program

I look forward to working with you and helping you achieve Retention!

Name

Title

Phone#

ALLEGHENY COUNTY EARN & WR SUPERVISED JOB SEARCH LOG

JOB SEEKER: _____ ID#: _____ WEEK ENDING: _____

DATE	COMPANY	CONTACT PERSON	PHONE	CODE	TOTAL HOURS	✓ = VERIFIED	JD INITIALS
SUN							
MON							
TUES							
WED							
THURS							
FRI							
SAT							
*JS on this log CANNOT duplicate time given while signed in at Center. *Documentation must be attached for each item.					TOTAL WEEKLY HRS		

A = APPLICATION R = RESUME I = INTERVIEW JF = JOB FAIR O = OTHER (include description)

JOB SEEKER'S SIGNATURE & DATE

JOB DEVELOPER'S SIGNATURE & DATE

COMMENTS: _____

ALLEGHENY COUNTY EARN INCENTIVE TRACKING FORM

AMOUNTS (FOR 2 WEEKS OF PAY): \$50 IF 20+ HRS/WK & ON TIME; \$25 IF 20+ HRS/WK & NOT ON TIME; \$25 IF 15-19 HRS/WK & ON TIME; \$15 IF 15-19 HRS/WK & NOT ON TIME

NAME:				ID#:			#33 STARTED:				MUST WORK AT LEAST 26 WKS <u>AND</u> MUST HAVE 520 HRS BY: (36 WKS AFTER START)	
WK #	WEEK ENDING DATE	DATES COVERED ON PAY	PAY DATE	PAY DUE TO EARN	PAY SUBMITTED TO EARN	HRS FOR THE WEEK	INCENTIVE AMOUNT	CUM HRS TOTAL	INCENTIVE TYPE	DATE RECEIVED	RECEIVED BY (SIGNATURE)	ISSUED BY (SIGNATURE)
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												

ALLEGHENY COUNTY EARN INCENTIVE TRACKING FORM

WK #	WEEK ENDING DATE	DATES COVERED ON PAY	PAY DATE	PAY DUE TO EARN	PAY SUBMITTED TO EARN	HRS FOR THE WEEK	INCENTIVE AMOUNT	CUM HRS TOTAL	INCENTIVE TYPE	DATE RECEIVED	RECEIVED BY (SIGNATURE)	ISSUED BY (SIGNATURE)
15												
16												
17												
18												
19												
20												
21												
22												
23												
24												
25												
26												
27												
28												
29												
30												

ALLEGHENY COUNTY EARN INCENTIVE TRACKING FORM

WK #	WEEK ENDING DATE	DATES COVERED ON PAY	PAY DATE	PAY DUE TO EARN	PAY SUBMITTED TO EARN	HRS FOR THE WEEK	INCENTIVE AMOUNT	CUM HRS TOTAL	INCENTIVE TYPE	DATE RECEIVED	RECEIVED BY (SIGNATURE)	ISSUED BY (SIGNATURE)
31												
32												
33												
34												
35												
36												
OTHER INCENTIVES								INC AMT	INC TYPE	DATE RECEIVED	RECEIVED BY (SIGNATURE)	ISSUED BY (SIGNATURE)
ADVANCEMENT: CLIENT WORKED AT LEAST 30 HRS LAST WEEK OF RETENTION												
ACHIEVEMENT: CIRCLE ONE...GED/HS OR DRIVER'S LICENSE (& ATTACH DOCUMENTATION)												
ACHIEVEMENT: CIRCLE ONE...GED/HS OR DRIVER'S LICENSE (& ATTACH DOCUMENTATION)												
TRAVELERS' AID/TRANSPORTATION												
MONTH	<u>INCENTIVE TYPE (AND \$ AMOUNT INCENTIVE IS WORTH) - LIST ALL TYPES RECEIVED FOR EACH MONTH</u> ZONE 1 MONTHLY PASS (\$97.50) ZONE 2 MONTHLY PASS (\$146.25) MONTHLY GAS CARD (\$97.50) ZONE 1 WEEKLY PASS (\$25.00) ZONE 2 WEEKLY PASS (\$37.50) OTHER (GIVE TYPE & AMOUNT)										RECEIVED BY (SIGN & DATE)	ISSUED BY (SIGN & DATE)
1												
2												
3												
4												
5												

ALLEGHENY COUNTY EARN INCENTIVE TRACKING FORM

WK #	WEEK ENDING DATE	DATES COVERED ON PAY	PAY DATE	PAY DUE TO EARN	PAY SUBMITTED TO EARN	HRS FOR THE WEEK	INCENTIVE AMOUNT	CUM HRS TOTAL	INCENTIVE TYPE	DATE RECEIVED	RECEIVED BY (SIGNATURE)	ISSUED BY (SIGNATURE)
6												
7												
8												
9												



YOUR CAREER IS WAITING!

There is a job with your name on it . . . let us help you find it!!

And we'll be there to help you transition into your new career.

The entire **ALLEGHENY COUNTY EARN TEAM** is eager to provide all the support and resources you need!

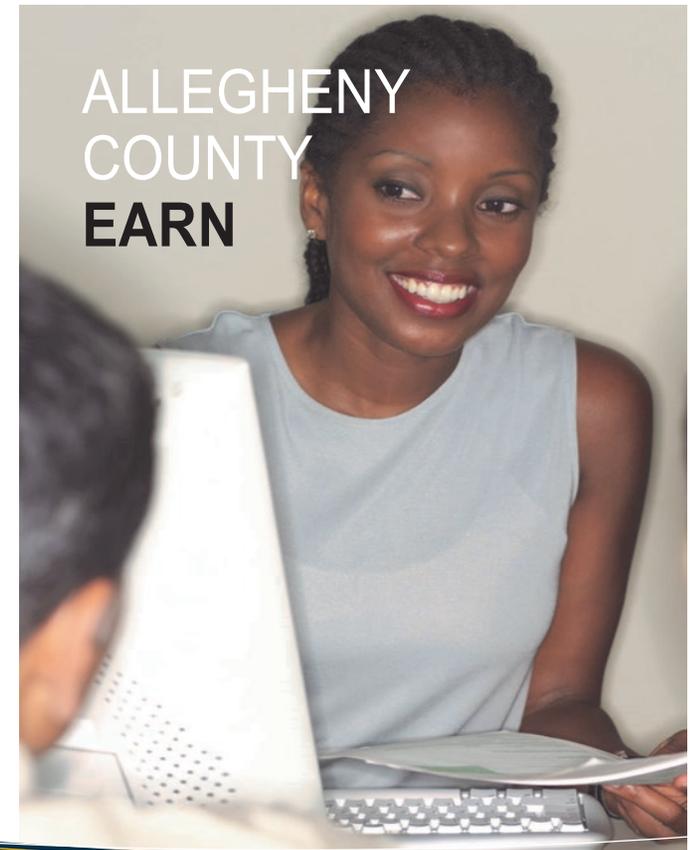
Department of
Human Services

Office of
Community Services



One Smithfield Street
2nd Floor
Pittsburgh, PA 15222

Phone: 412-350-2440



ALLEGHENY
COUNTY
EARN

How would you like...

>\$150 per month?

>a FREE bus pass or
gas card?

**SEE INSIDE &
FIND OUT HOW!**

Rich Fitzgerald
Allegheny County Executive
Marc Cherna
DHS Director
Patricia L. Valentine
DHS Executive Deputy Director of
Integrated Program Services
Reginald Young
DHS Deputy Director,
Office of Community Services

The Allegheny County Department of Human Services provides services to eligible individuals without regard to race, color, sex, gender identity or expression, sexual orientation, age, religion, national origin, political affiliation, disability, familial status, military service, or religious, community or social affiliations.



**EARN
YOUR WAY
TO WHAT
YOU WANT**

WELCOME TO... EARN

We are happy to hear that you have been referred to the Allegheny County EARN Program. We will help you find employment, increase your household income, and support you on your new career path! There are a few things you need to know before you start...

YOUR APPOINTMENT IS:

DATE:

TIME:

PLACE:

flexible solutions for your career needs

YOUR FIRST WEEK

During your first week of **EARN**, you must attend every day (Monday-Friday). Program begins at 8:30 and ends at 3:30 every day. Job Seekers who are required to attend 20 hours per week may leave at 12:30pm, but we encourage you to participate in afternoon activities as well. The additional time will add to your personal and professional portfolio.

PLEASE REMEMBER

Business casual is acceptable dress. Please be sure to bring a valid photo ID and a copy of your most recent resume. Children and other guests are not allowed. If you have any questions, need additional directions, or cannot keep this appointment—please call the phone number to the left. We look forward to meeting you!

***IF YOU ARE UNABLE TO ATTEND,**

YOU MUST CONTACT US AT:

BEFORE YOUR APPOINTMENT DATE.



YOU'RE GOING PLACES!

IT'S TIME TO BEGIN YOUR CAREER, AND WE'RE HERE TO HELP MAKE IT HAPPEN!



INCENTIVES

When you find your job, we'd like to say Congratulations! Incentives are one way we can reward your hard work and help you transition into your new career.



GIFT CARDS

- \$150 for achieving PLACEMENT
- \$50 for PAY STUBS showing 2 weeks of work; 20-24 hours per week.
- \$75 for PAY STUBS showing 2 weeks of work; 25+ hours per week.



BUS PASSES or GAS CARDS

Receive a free Zone 1 or 2 bus pass or gas card while maintaining your employment, through the end of Retention.

*Please see your Service Coordinator for all eligibility requirements.





YOUR CAREER IS WAITING!

There is a job with your name on it . . . let us help you find it!!

And we'll be there to help you transition into your new career. The entire **ALLEGHENY COUNTY EARN TEAM** is eager to provide all the support and resources you need!

Department of
Human Services

Office of
Community Services



One Smithfield Street
2nd Floor
Pittsburgh, PA 15222

Phone: 412-350-2440



How would you like . . .

➤ **\$150 per month?**

➤ **a FREE bus pass or gas card?**

**SEE INSIDE &
FIND OUT HOW!**

Rich Fitzgerald
Allegheny County Executive
Marc Cherna
DHS Director
Patricia L. Valentine
DHS Executive Deputy Director of
Integrated Program Services
Reginald Young
DHS Deputy Director,
Office of Community Services

The Allegheny County Department of Human Services provides services to eligible individuals without regard to race, color, sex, gender identity or expression, sexual orientation, age, religion, national origin, political affiliation, disability, familial status, military service, or religious, community or social affiliations.



EARN
YOUR WAY
TO WHAT
YOU WANT

JOIN THE TEAM AT ALLEGHENY COUNTY EARN

We're excited that you may be joining the **ALLEGHENY COUNTY EARN** Program. We will help you find employment, increase your household income, and support you on your new career path! Here are a few things you may want to know . . .

EARN CENTERS:

MCKEESPORT (412-673-5300)

345 FIFTH AVENUE
MCKEESPORT, PA 15132

RTC (412-765-1280)

333 FORBES AVENUE, 2ND FLOOR
PITTSBURGH, PA 15222

WILKINSBURG (412-350-3435)

807 WALLACE AVENUE
WILKINSBURG, PA 15221

the mission Allegheny
County believes in

WE ARE PART OF YOUR TEAM!

You will be in the driver's seat, and we'll help you get where you want to go. From the job developers to the Service Coordinators, the **ALLEGHENY COUNTY EARN** staff will come together to support you on your journey. We can help you discover job skills and interests, but ultimately we want to support your decisions to the best of our abilities.

SUCCESS WILL COME

to anyone who works at it! There may be a few hurdles, but you will see success if you stick with it. We will never stop working with you if you choose to keep going...and you will accomplish your goals. The sooner we begin, the sooner you can start your new career! Ask your DPW Case Worker to refer you to **ALLEGHENY COUNTY EARN!**



INCENTIVES

When you find your job, we'd like to say Congratulations! Incentives are one way we can reward your hard work and help you transition into your new career.



GIFT CARDS

- \$150 BONUS for achieving PLACEMENT
- \$50 for PAY STUBS showing 2 weeks of work; 20-24 hours per week
- \$75 for PAY STUBS showing 2 weeks of work; 25+ hours per week



BUS PASSES or GAS CARDS

Receive a free Zone 1 or 2 bus pass or gas card while maintaining your employment, through the end of Retention.

*Please see your Service Coordinator for all eligibility requirements.



YOU'RE GOING PLACES!
IT'S TIME TO BEGIN YOUR CAREER, AND WE'RE HERE TO HELP MAKE IT HAPPEN!



YOUR FUTURE IS WAITING!

Everyone has different goals - let us help you realize yours! **WORK READY** will provide you with individualized support, so you can follow your own path to success!

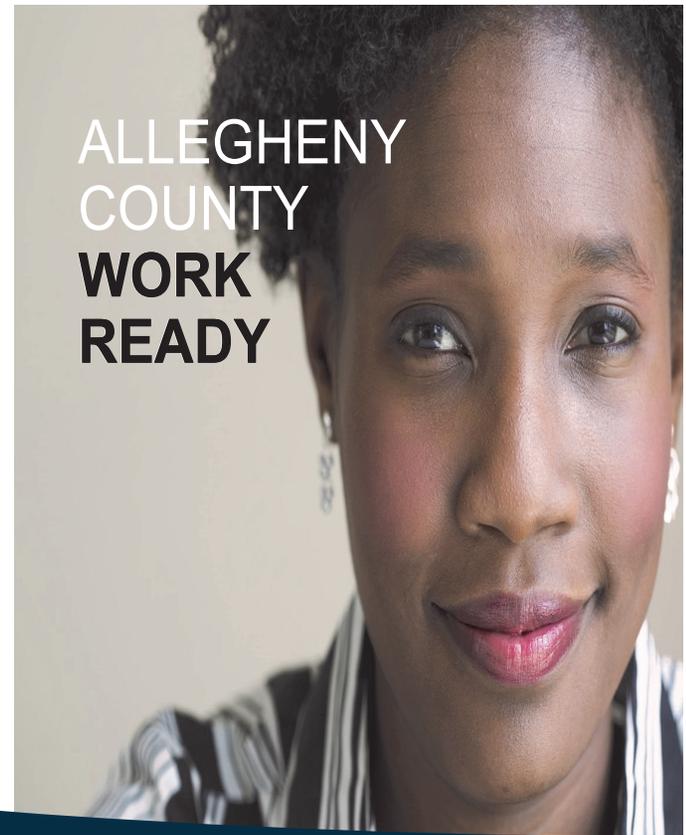
Department of
Human Services

Office of
Community Services



One Smithfield Street
2nd Floor
Pittsburgh, PA 15222

Phone: 412-350-2440



ALLEGHENY COUNTY WORK READY

How would you like...

> a \$ 25 GIFT CARD?

How about...

> \$250 IN GIFT CARDS?

READ INSIDE & FIND OUT HOW!

Rich Fitzgerald
Allegheny County Executive
Marc Cherna
DHS Director
Patricia L. Valentine
DHS Executive Deputy Director of
Integrated Program Services
Reginald Young
DHS Deputy Director,
Office of Community Services

The Allegheny County Department of Human Services provides services to eligible individuals without regard to race, color, sex, gender identity or expression, sexual orientation, age, religion, national origin, political affiliation, disability, familial status, military service, or religious, community or social affiliations.



READY TO BEGIN YOUR PATH TO SUCCESS!

WELCOME TO...

WORK READY

We are happy to hear that you have been referred to the Allegheny County **WORK READY** Program. We're excited to work with you and provide all the resources and support you need! There are a few things you need to know before you start...

flexible solutions for your career needs

YOUR FIRST WEEK

During your first week of **WORK READY**, you must attend every day (Monday-Friday). Program begins at 10:00 and ends at 4:30 every day. Participants who are required to attend 20 hours per week may leave at 2:00pm, but we encourage you to participate in afternoon activities as well. The additional time will add to your personal and professional portfolio.

PLEASE REMEMBER

Business casual is acceptable dress. Please be sure to bring a valid photo ID and a copy of your most recent resume. Children and other guests are not allowed. If you have any questions, need additional directions, or cannot keep this appointment—please call the phone number to the left. We look forward to meeting you!

YOUR APPOINTMENT IS:

DATE:

TIME:

PLACE:

*IF YOU ARE UNABLE TO ATTEND,

YOU MUST CONTACT US AT:

BEFORE YOUR APPOINTMENT DATE.



YOU'RE GOING PLACES!
IT'S TIME TO BEGIN, AND WE'RE HERE TO HELP MAKE IT HAPPEN!



INCENTIVES

When you successfully complete the **WORK READY** Program, we would like to say Congratulations! Incentives are one way we can reward your hard work!



ATTENDANCE LOTTERY

- Your name will be entered into a lottery EACH week you have perfect attendance.
- The winner gets a \$25 Gift Card. You can win as many times as your name is drawn!



BONUS

- Receive \$100 in Gift Cards if you complete the **WORK READY** Program!
- Receive \$250 in Gift Cards if you complete the **WORK READY** Program with a job!

*Please see your Service Coordinator for all eligibility requirements.



ALLEGHENY COUNTY WORK READY PROGRAM



...GETTING "READY FOR WORK"

LIFE'S WORK OF WESTERN PENNSYLVANIA
1323 Forbes Avenue, Pittsburgh, PA 15219
PHONE: 412-471-2600

INTRODUCTION



Welcome to the Allegheny County Work Ready Program, funded & directed by the Pennsylvania Department of Public Welfare.

Finding a job isn't the hardest part; it's keeping it. Each job requires certain skills & education, but that just gets you in the door. To stay there or move up, employers need you to do the following:

- ✓ **RELIABLE ATTENDANCE**
- ✓ **GET ALONG WITH OTHERS**
- ✓ **FOLLOW DIRECTIONS**
- ✓ **COMPLETE TASKS CORRECTLY & ON TIME**
- ✓ **SHOW INITIATIVE**

That's it...the magic formula to a successful career. And these are some of the services we provide to help you get there:

- ❖ **SERVICE COORDINATION**
- ❖ **GOAL PLANNING**
- ❖ **RESOURCES & REFERRALS**
- ❖ **ACADEMIC & VOCATIONAL ASSESSMENTS**
- ❖ **REFERRALS TO APPROPRIATE ACADEMIC & VOCATIONAL PROGRAMS**
- ❖ **IDENTIFYING CAREERS THAT BEST SUIT YOUR SKILLS & INTERESTS**
- ❖ **WORK ACTIVITIES TO INCREASE JOB SKILLS & EXPERIENCE**
- ❖ **JOB COACHING & MENTORING**
- ❖ **JOB READINESS & LIFE SKILLS WORKSHOPS**

BEFORE YOU START

Child Care

If a CAO Case Worker determined you were eligible to receive child care funding, you were referred to CCIS (**Child Care Information Services**) to get a listing of child care providers **and** to schedule a face-to-face interview. You should have already contacted CCIS to ensure that child care was in place when you started Work Ready. If not, please contact them immediately.

The CCIS Agency can provide funds for children **under** 13. Alternate funding may be available for children with special needs under the age of 19.

CCIS can help you choose child care that is appropriate for your child(ren). You may select a private individual or a child care center, but **you must have a back-up provider** for times when the primary provider is not available.

When you become employed, you may be eligible for continued assistance through CCIS. Talk with your Work Ready Service Coordinator and CCIS Eligibility Specialist to discuss your options. **Please see below for CCIS contact information:**



CCIS CITY OFFICE	CCIS NORTH/SOUTH OFFICE
<p>YWCA of Greater Pittsburgh 305 Wood Street, 3rd Floor Pittsburgh, PA 15222</p> <p>Phone: 412-261-CARE or: 1-800-392-3131</p> <p>Hours: Monday - Friday, 8am - 5pm Extended: Tuesdays until 7pm</p>	<p>YWCA of Greater Pittsburgh 305 Wood Street, 2nd Floor Pittsburgh, PA 15222</p> <p>Phone: 412-261-CARE or: 1-800-392-3131</p> <p>Hours: Monday - Friday, 8am - 5pm Extended: Tuesdays until 7pm</p>

*Compass Website: <https://www.humanservices.state.pa.us/Compass.Web/CMHOM.aspx>
 (to apply for any state services/benefits online)

Other possible resources for child care and/or pre-school:

- **Keystone Stars (rates quality of child care providers):** 412-255-1175 or 1-877-349-4850
- **Allegheny County Head Start, Early Head Start, Pre-K Counts:** 1-866-214-KIDS
- **Child's Way (child care for children with special medical needs):** 412-365-6065

BEFORE YOU START (continued)

Transportation

To help you attend Work Ready activities, the CAO may approve transportation assistance for you. A CAO Case Worker will determine your eligibility every month. If eligible, you will pick up your bus pass (or gas card) at Travelers Aid. There are annual limits to transportation funds - see your CAO Case Worker for details.

Transportation Resources:



Travelers Aid of Pittsburgh - contracts with Allegheny County CAO to provide bus passes and gas cards to eligible clients.

Phone: 412-281-5474

Address: 343 Boulevard of the Allies, Pittsburgh, PA 15222

www.travelersaidpgh.org

Port Authority of Allegheny County - provides public transportation services within Allegheny County. Contact Port Authority for bus and trolley routes and/or schedules.

Phone: 412-442-2000

www.portauthority.org

**If traditional public transportation (Port Authority) is not available to you, you may be able to access these other community resources.

- **CommuteInfo Program** - established by The **Southwestern Pennsylvania Commission on Transportation**. It was designed to increase the number of people who have access to public transportation, carpooling, vanpooling and biking.
Phone: 1-888-819-6110
www.CommuteInfo.org
- **Worklink** - free scheduled van service for residents of upper Mon Valley Region. Provides access to training, child care, work, and other work-related activities.
Phone: 412-351-2200
www.heritagecommunityinitiatives.org/transportation.php

PROGRAM DESIGN

Generally, participants move through program in the following manner:

ELIGIBILITY

To be eligible for the Work Ready Program, you must:

- 1) Receive TANF (cash assistance)
- 2) Not be enrolled in another employment and training activity (with CAO or a contractor)

ALLEGHENY COUNTY ASSISTANCE OFFICES			
CAO Headquarters Piatt Place 301 5 th Avenue, Suite 470 Pittsburgh, PA 15222 Phone: 412-565-2146 Fax: 412-565-3660	LIHEAP Office The Warner Center 332 5 th Avenue, 2 nd Floor Pittsburgh, PA 15222 Phone: 412-562-0330 Fax: 412-565-0107	Alle-Kiski District 909 Industrial Boulevard New Kensington, PA 15068 Phone: 724-339-6800 Toll Free: 1-800-622-3527 Fax: 724-339-6850	Liberty District The Warner Center 332 Fifth Avenue, 2 nd Floor Pittsburgh, PA 15222 Phone: 412-565-2652 Fax: 412-565-5088
Three Rivers District The Warner Center 332 Fifth Avenue, 2 nd Floor Pittsburgh, PA 15222 Phone: 412-565-7755 Fax: 412-565-5198 or 5075	Southeast District 220 Sixth Street McKeesport, PA 15132 Phone: 412-664-6800 or 6801 Fax: 412-664-5218	Southern District The Warner Center 332 Fifth Avenue, 2 nd Floor Pittsburgh, PA 15222 Phone: 412-565-2232 Fax: 412-565-5179	Greater Pittsburgh East 5947 Penn Avenue Pittsburgh, PA 15206 Phone: 412-645-7400 or 7401 Fax: 412-365-2821

REFERRAL FROM ALLEGHENY COUNTY ASSISTANCE OFFICE

A CAO Case Worker refers you to the Work Ready Program and sends relevant paperwork, including the following:

Agreement of Mutual Responsibility (AMR)

An Agreement of Mutual Responsibility (AMR) is developed between you and a CAO Case Worker at your District Office. Your AMR determines the level of participation required for you to receive benefits. It will show how many hours you need to do each week and the activities you may use to complete those hours. If your plan changes, your AMR **must** be updated by you and your CAO caseworker.

Medical Assessment Form (MAF)

If you have any medical limitations, the Medical Assessment Form (MAF) outlines what they are (fewer hours, type of work you can perform, etc.). This assessment applies to all work activities (including the Work Ready Program). The MAF also shows the doctor's recommended treatment plan for fully resolving any issues.

PROGRAM DESIGN (continued)

ORIENTATION & INITIAL ACTIVITY

Orientation takes place first thing Monday. We will review the services Work Ready offers, what is expected of you, and what your schedule will be.

For most of you, your **Initial Activity** will be *Community Service*. We offer a variety of on-site *Community Service* activities - such as housekeeping, maintenance, food service, clerical, job coaching, and retail. Being located on site gives you easy access to staff and services. We can consider off-site *Community Service* when appropriate. Please discuss this with your *Service Coordinator* if interested.



OTHER ACTIVITIES

The state allows us to provide other activities (see list below), but only in certain situations and only if the participant is eligible. Please discuss your options with your *Service Coordinator*.

CORE PROGRAM ACTIVITIES	NON-CORE PROGRAM ACTIVITIES
COMMUNITY SERVICE	GED/HS PREP (CORE IF UNDER 22)
PAID WORK EXPERIENCE	EDUCATION DIRECTLY RELATED TO EMPLOYMENT FOR A CLIENT WITHOUT A GED/HS DIPLOMA
VOCATIONAL EDUCATIONAL TRAINING	EDUCATION DIRECTLY RELATED TO EMPLOYMENT FOR A CLIENT WITH A GED/HS DIPLOMA
SUBSIDIZED EMPLOYMENT	SKILLS TRAINING DIRECTLY RELATED TO EMPLOYMENT
UNSUBSIDIZED EMPLOYMENT	BARRIER REMEDIATION/REMOVAL

PROGRAM DESIGN (continued)

HOW TO SUCCESSFULLY COMPLETE PROGRAM

Work Ready is limited to no more than 12 months per enrollment and consists of two phases:

- ✓ **PHASE 1:** Attend at least your required hours each week (using any combination of core and non-core activities as scheduled). After completing four consecutive weeks (with no excused absence time), you will be moved to Phase 2. If you do not achieve this standard within 6 months of enrollment, you will automatically be moved to Phase 2.
- ✓ **PHASE 2:** Attend at least your required hours each week (using core and non-core activities as prescribed by federal and state policy for your TANF category). **After completing four consecutive weeks (with no excused absence time), you will successfully complete the Work Ready Program.** If you do not achieve this standard within 12 months of enrollment, it will result in a negative termination from the Work Ready Program.

Note: You can successfully complete the Work Ready Program directly out of Phase 1 if you choose to use core and non-core hours as prescribed by federal and state policies for your TANF category.



ATTENDANCE

Life's Work is open Monday - Friday. You must participate for at least your required hours each week. If you fall short at the end of the week, you will need to make up the time as soon as you can. If possible, time must be made up by the end of that **month**. To calculate your "monthly" attendance, the state uses the **Federal Welfare Calendar**.

THE FEDERAL WELFARE CALENDAR

It always ends on the last **Saturday** of the month. For example: the last day of October 2014 will be Saturday (10/25/14), and the 1st day of November 2014 will be Sunday (11/26/14).

OCTOBER 2014						
Sun	Mon	Tues	Wed	Thur	Fri	Sat
SEP 28	SEP 29	SEP 30	1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	
OCTOBER 2014 FEDERAL WELFARE MONTH						
THESE DAYS GO TO NOVEMBER 2014						

ATTENDANCE (continued)

EXCUSED ABSENCE POLICY

Some absences can be excused (if they meet the following criteria), but please remember that using any excused absence time restarts your 4 consecutive weeks. **You should only do this if it is absolutely not possible to make up the time by the end of the week.**

- Participants must give advance notice and provide appropriate documentation.
- Excused absences are limited to 80 hours in a 12-month period.
- The 12-month period rolls from day to day, looking back at the **previous** 12 months.
- No more than 16 hours can be used in 1 month.
- Excused absences can only be used for **UNPAID** activities.



TYPES OF EXCUSABLE ABSENCES	
Illness of you or your dependent	Job interview
Medical appointment for you or your dependent	Housing appointment
CAO/WIC appointment	Obtaining transportation
Child support appointment	Jury Duty
Legal appointment	Subpoena
School appointment/event	Other required court proceedings
Counseling appointment	Obtaining child care
Obtaining documents needed for employment or program eligibility	Other appointments deemed necessary to maintain participation in the program

ATTENDANCE (continued)

UNEXCUSED ABSENCES

Unexcused absence refers to any missed time that is not "excused." There are several reasons an absence may be unexcused - such as you did not provide documentation, you did not give proper notice, you were out of excused absence time, the reason for the absence was not considered excusable, or you were able to bank or make up the time instead of using excused absence hours.

BANKED TIME & MAKE-UP TIME

As a reminder - to successfully complete program, you need to achieve 4 consecutive weeks of perfect attendance (without using any excused absence time). **So you need to find a way to meet your weekly required hours even when you miss time.**

For example - if you know that you will be missing time on a specific day, you should bank extra time earlier that week or make up the time later that week. If your missed time was unplanned, you will need to make up the time before the end of that week.

HOLIDAY TIME

For the following Holidays, you will receive credit for **your normally scheduled hours that day.** You will not need to use excused absence time.

HOLIDAYS

NEW YEAR'S DAY
MARTIN LUTHER KING DAY
PRESIDENT'S DAY
MEMORIAL DAY
4TH OF JULY
LABOR DAY
COLUMBUS DAY
VETERAN'S DAY
THANKSGIVING DAY
CHRISTMAS DAY



NOTES:

If you attend school or another off-site activity, and that site is closed on days not listed above - you must report to Life's Work for those additional days.

If Life's Work is also closed on days not listed above - you can bank hours earlier that week, use excused absence time, or make up the time.

For Paid Work Experience (PWE) - you must choose in advance to either receive the Holiday time (no pay) **OR** to work the hours by banking or making them up (for pay).



INCENTIVES

We enjoy rewarding hard work! One way we can do this is to offer incentives for certain program achievements. Here's how you can earn Work Ready Incentives:

You did it!
Congratulations

ACHIEVEMENT	INCENTIVE
<u>PERFECT WEEK OF ATTENDANCE</u> (MEET NORMAL CAO REQUIRED HOURS FOR THE WEEK WITHOUT USING ANY EXCUSED ABSENCE TIME)	➤ ENTERED INTO DRAWING FOR \$25 GIFT CARD
<u>COMPLETE WORK READY PROGRAM</u> (4 CONSECUTIVE WEEKS OF PERFECT ATTENDANCE WITHOUT USING ANY EXCUSED ABSENCE TIME)	➤ \$100 GIFT CARD
<u>COMPLETE WORK READY PROGRAM WITH EMPLOYMENT</u> (SAME AS ABOVE, BUT ALL REQUIRED CORE HOURS WERE MET THROUGH EMPLOYMENT FOR AT LEAST THE LAST OF THE 4 CONSECUTIVE WEEKS)	➤ \$250 GIFT CARD

*Incentives are always subject to availability, and the incentive policy may change at any time.

SUPPORT SERVICES

WORK READY SUPPORT SERVICE FUNDS

You may request funds from Work Ready for eye glasses or hearing aids. The item must be necessary for you to meet the goals on your Work Ready Service Plan, and you must be participating in an approved activity.

CAO SPECIAL ALLOWANCE FUNDS

You may also request funds from CAO to assist with certain items or services - such as child care, transportation, books, tools/equipment, clothing, fees, moving expenses, union dues, and vehicle repair/purchase. The item or service must be necessary to participate in work or a work-related activity. A CAO Case Worker will determine your eligibility for Support Service Funds. We will help you collect the documentation needed for the request.



CONDUCT POLICIES

Work Ready has conduct policies to help create a productive and professional environment. Each person involved with Work Ready is responsible for her/his own actions. These guidelines and policies are similar to those you will be required to follow in the workplace.

DRESS APPROPRIATELY

Just like many employers & schools have standards for personal appearance, so does the Work Ready Program. These policies are in place to promote a positive working & learning environment.

The basic rules are:

- **Clean pants that provide appropriate coverage for your body**
- **Clean shirts that provide appropriate coverage for your body**
- **Clean dresses/skirts no shorter than 2 inches above the knee**
- **No inappropriate pictures or wording**

INTERPERSONAL BEHAVIOR

Work Ready requires that all participants be respectful of each other. If you are experiencing a problem with another participant or a staff person, your Service Coordinator can help you find the best way to resolve the problem. **Any verbal outbursts and/or threats to other participants or staff may result in termination from the program.**

Learning how to appropriately handle conflict is essential to being job-ready. Remember, to keep or advance your employment, your employer will expect you to get along with others.



DRUG-FREE ENVIRONMENT

You may not use, sell, possess, or help others obtain alcohol, narcotics, or legally restricted drugs while at Work Ready. Substance abuse is an illness and major health issue. If you are abusing drugs and/or alcohol, you will be counseled about treatment options. You will be sent home if it appears you are under the influence of alcohol and/or drugs. Most employers have similar policies.

SMOKING

Smoking policies at each center will follow the building's codes and local laws. Be aware of the smoking policy at your facility.

ELECTRONIC DEVICES

All cell phones, pagers, and audio/video devices must be turned off or set to vibrate.

PLEASE NOTE: Paid Work and Community Service sites may prohibit electronic devices completely due to the nature of the work being done. These policies must be followed.

CONDUCT POLICIES (continued)

TELEPHONE USAGE

If possible, all personal calls must be made during breaks or lunch time. If it is an emergency, please excuse yourself from the classroom. If we receive an **urgent** message for you during class time, it will promptly be given to you - though confidentiality prevents us from discussing your information with the caller. Each Center may have further details about their specific policies.

VISITORS

For reasons of privacy and safety, we do not allow visitors (including children) at our Centers. If meeting someone, you should arrange to do so in the lobby or at an off-site location.

WEAPONS

Weapons are not permitted at the program Center, work activity site, or education/training site. **"Weapon"** - means any device, material, or object which is used, or threatened to be used, in a harmful manner. **"Weapon"** - also means anything that is inherently dangerous (such as guns and knives), regardless of intent to harm. **Any incident of this nature must be reported to the police and the EARN and Welfare Program Managers. It will result in removal from program.**

COMPUTER USAGE

Inappropriate usage of Work Ready computers may result in loss of computer privileges.

Here are the basic rules for the Computer Labs:

- **No games, social media, entertainment, music, videos, or otherwise inappropriate sites.**
- **You may not use or install your own games or CDs on the computers.**
- **No outside storage devices (disks, CDs, flash drives).**
- **No eating or drinking in the computer labs.**

PROGRESSIVE DISCIPLINE

Depending on type and severity, **violations of the Conduct Policy could result in immediate termination from the Work Ready Program.** Otherwise, Work Ready will typically use the following **Progressive Disciplinary Procedure:**

1. Verbal Warning
2. Written Warning
3. Conciliation Meeting with Work Ready and CAO staff
4. Termination from Program

We will do our best (through job coaching, mentoring, and resources) to help you modify behavior that may result in disciplinary action, but how you conduct yourself is ultimately your choice. To prepare you for employment, Work Ready's Conduct Policy is very similar to those you will find with most employers.

YOUR RIGHTS

The next 5 pages outline your rights as a Work Ready Program participant. Please be aware of what they are and what to do if you feel they have been violated.

GRIEVANCE PROCEDURE

You may use the *Grievance* process at any point during your participation in Work Ready. This can include, but is not limited to, refusal of entry into program activities, denial of Support Service Funds, and specific complaints regarding staff and/or program services. This procedure was established by the Allegheny County Department of Human Services. It works, and we encourage you to use it.

STEP ONE: Try to resolve the problem informally with the other person(s), your Service Coordinator, and/or the Program Coordinator. They will help you work through the issue.

STEP TWO: If STEP ONE does not resolve the issue, you may request a *GRIEVANCE FORM*. A Work Ready staff person (with whom you feel comfortable) can help you complete it. The Grievance Form must be submitted to the Work Ready Manager within 2 business days of the participant receiving the Form. The LMC Grievance Committee (the Work Ready Manager and the DPW Employment & Training Manager) have 3 business days to try and resolve the issue with you.

STEP THREE: If you are not satisfied with the proposed Resolution in STEP TWO, the Grievance Form will be forwarded to the Local Management Committee (LMC) within 4 business days. The committee will review the problem and record its efforts and decisions. You will receive a written decision within 10 business days.

STEP FOUR: If you remain unsatisfied with the LMC's decision, you may make a formal appeal through the Department of Welfare's Hearings and Appeals process.

OR

If you are satisfied with the Resolution, you will need to submit written notification to the Work Ready Program Coordinator that you are withdrawing the Grievance. A copy will be forwarded to the LMC and to the Work Ready & DPW Employment & Training Managers.

CONFIDENTIALITY

You have the right to complete confidentiality, which means your private information will not be shared with persons or agencies unrelated to Work Ready. Before we can obtain or share your private information, we need you to sign an "Authorization for Release of Information" form. Otherwise, the following are those who may have access to your records:

- **Those entitled by law**
- **Service Coordinators and other program staff**
- **Department of Public Welfare staff**
- **The Allegheny County Department of Human Services (who have a rightful need)**

YOUR RIGHTS (continued)

ALLEGHENY COUNTY WORK READY SEXUAL HARASSMENT POLICY

As an Allegheny County Work Ready participant, it is important that you are aware of your legal rights pertaining to the issue of Sexual Harassment under Title VII of the Civil Rights Act of 1964 and the Pennsylvania Human Relations Act.

What is Sexual Harassment?

Sexual Harassment is defined as any unwelcome sexual advance, requests for sexual favors, and other verbal or physical conduct of a sexual nature which is made an implicit or explicit condition of employment, or which affects employment decisions, creates an intimidating hostile or offensive work environment, or interferes with work performance or program participation. Most victims are women, but such harassment can happen to any employee or program participant regardless of gender.

What should you do if you believe you have been sexually harassed?

1. Record the Facts

If Sexual Harassment occurs - make sure to record the names of any witnesses as well as the "who, what, when, and where" of the situation.

2. Talk to your Work Ready Service Coordinator, Program Coordinator, or EO/Sexual Harassment Prevention Officer immediately:

Mr. Earl Smithson, Sexual Harassment Prevention Officer
One Smithfield St., 5th Floor
Pittsburgh, PA 15222
412-350-2795

Additionally, complaints may be filed with any of the agencies listed below:

Within 180 Days of the Incident	Within 300 Days of the Incident	Additional Resource
PA Human Relations Commission 301 Chestnut Street, Suite 300 Harrisburg, PA 17105-3145 Phone: 717-787-4410 Fax: 717-214-0584 TDD: 717-787-7279	Equal Employment Opportunity Commission Bourse Building, Suite 400 21 South 5 th Street Philadelphia, PA 19105-2515 Phone: 215-440-2600 Fax: 215-440-2604	Bureau of Equal Opportunity Department of Public Welfare Room 223 Health & Welfare Building Harrisburg, PA 17120 Phone: 717-787-1127

YOUR RIGHTS (continued)

EQUAL OPPORTUNITY IS THE LAW CIVIL RIGHTS STATEMENT

-----It is against the law for this recipient of Federal financial assistance to discriminate on the following basis:

Against any individual in the United States on the basis of race, color, religion, sex, national origin, age, disability, political affiliation or belief; and against any beneficiary of programs financially assisted under Title I of the Workforce Investment Act of 1998 (WIA) on the basis of the beneficiary's citizenship status as a lawfully admitted immigrant authorized to work in the United States, or his or her participation in any WIA Title I-financially assisted program or activity. The recipient must not discriminate in any of the following areas: Deciding who will be admitted, or have access, to any WIA Title I-financially assisted program or activity; Providing opportunities in, or treating any person with regard to, such a program or activity; or Making employment decisions in the administration of, or in connection with, such a program or activity.

WHAT TO DO IF YOU BELIEVE YOU HAVE EXPERIENCED DISCRIMINATION

If you think that you have been subjected to discrimination under a WIA Title I-financially assisted program or activity, you may file a complaint within 180 days from the date of the alleged violation with the Director, Civil Rights Center (CRC), U.S. Department of labor 200 Constitution Avenue, N.W., Room N-4 123, Washington, DC 20210.

If you file your complaint with the recipient, you must wait either until the recipient issues a written Notice of Final Action, or until 90 days have passed (whichever is sooner), before filing with the Civil Rights Center (see address above). If the recipient does not give you a written Notice of Final Action within 90 days of the day you filed your complaint, you *do not* have to wait for the recipient to issue that Notice before filing a complaint with CRC. However, you must file your CRC complaint within 30 days of the 90-day deadline (in other words, within 120 days after the day on which you filed your complaint with the recipient). If the recipient does give you a written Notice of Final Action on your complaint, but you are dissatisfied with the decision or resolution, you may file a complaint with CRC. You must file your CRC complaint within 30 days of the date on which you received the Notice of Final Action.

FOR INFORMATION OR TO FILE A COMPLAINT CONTACT:

Autro Heath Jr (aheath@state.pa.us)
DEPARTMENT OF LABOR AND INDUSTRY
OFFICE OF EQUAL OPPORTUNITY
ROOM 514 LABOR AND INDUSTRY BUILDING
SEVENTH AND FORSTER STREETS
HARRISBURG, PENNSYLVANIA 17120

(717)787-1182
1-800-622-5422

TDD/TTY: 1-800-654-5984
FAX: (717) 772-2321

Auxiliary aids and services are available upon request to individuals with disabilities
An Equal opportunity Employer

WIA 18 REV 7-02

YOUR RIGHTS (continued)

IGUALDAD DE OPORTUNIDAD ES LA LEY DECLARACION DE DERECHOS CIVILES

Es contra la ley que este destinatario de asistencia financiera federal discrimine por las siguientes razones: en contra de cualquier individuo en los Estados Unidos por razón de, raza, color, religión, sexo, edad, incapacidad, origen nacional, afiliación política o credo; y en contra de cualquier beneficiario de programas asistidos financieramente bajo el Título I de "Workforce Investment Act" del 1998 (WIA), por razón del estatus de ciudadanía siendo un inmigrante legalmente autorizado para trabajar en los Estados Unidos o de su participación en cualquiera de los programas o actividades financieramente asistidas por WIA Título I. El destinatario no discriminará en ninguna de las siguientes áreas: Decidiendo quien será admitido o tendrá acceso a cualquiera de los programas o actividades de WIA asistidos financieramente por el Título I; Proveyendo oportunidades en o el tratamiento de cualquier persona con relación a semejante programa o actividad; o en la toma de decisiones de empleo en la administración de o en conexión con semejante programa o actividad.

¿Qué hacer si usted cree que ha experimentado discriminación?

Si usted cree que ha estado sujeto a discriminación bajo cualquiera de los programas o actividades de WIA asistidos financieramente por el Título I, usted puede presentar una querella dentro de los primeros 180 días después de la alegada violación al Director del Centro de Derechos Civiles [Civil Rights Center (CRC)], U.S. Department of Labor, 200 Constitution Avenue, N.W., Room N-4 123, Washington, DC 20210.

Si usted presenta una querella al destinatario, deberá esperar hasta que el destinatario expida una Notificación de Acción Final por escrito o hasta que pasen 90 días (lo primero que suceda), antes de presentar la querella al Centro de Derechos Civiles (Civil Rights Center) (vea la dirección arriba). Si el destinatario no le provee una Notificación de Acción Final por escrito dentro de 90 días de la fecha que usted presentó su querella, usted no tiene que esperar a que el destinatario expida la notificación antes de presentar su querella al CRC. Sin embargo, deberá presentar su querella dentro de los 30 días después del límite de 90 días (en otras palabras, 120 días después de haber presentado la querella al destinatario). Si el destinatario le expide una Notificación de Acción Final por escrito respondiendo a su querella pero usted no está satisfecho con la decisión o resolución, usted puede presentar su querella a CRC. Su querella deberá ser presentada al CRC dentro de 30 días de la fecha en que usted reciba su Notificación de Acción Final.

PARA INFORMACION O PARA REGISTRAR UNA QUERELLA, COMUNIQUESE CON:

**Autro Heath Jr. (aheath@state.pa.us)
DEPARTMENT OF LABOR AND INDUSTRY
OFFICE OF EQUAL OPPORTUNITY
ROOM 514 LABOR AND INDUSTRY BUILDING
SEVENTH AND FORSTER STREETS
HARRISBURG, PENNSYLVANIA 17120**

**(717) 787-1182
1-800-622-5422**

**TDD/TTY: 1-800-654-5984
FAX: 717-772-2321**

**Ayudantes auxiliares y servicios están disponibles para individuos con incapacidades si así lo requieren
Programa de oportunidades de igualdad del empleo**

W1A-18 s REV 7-02

YOUR RIGHTS (continued)

Know-Your-Rights to FBI Employment Criminal Background Checks

Nine million workers seeking employment or employment-related licenses each year are now required to pass a background check using the FBI criminal records database. If there is any conviction, arrest or detention in the FBI database for that worker, a “rap sheet” will be produced. To protect their rights, workers should be aware of common problems in the FBI database and how to correct errors and incomplete information listed on their FBI rap sheet.

Common problems you should look out for when subjected to an FBI background check because they can lead to difficulty getting jobs:

- ✓ **The FBI rap sheet shows an arrest, but doesn’t list the result or outcome of the arrest.** Up to 50% of FBI records are incomplete because they have not been updated by the state or local courts to show the final outcome of the case. Arrests typically get transmitted to the FBI when fingerprints are taken, creating an FBI record, but the result is often not sent to the FBI. This means the FBI record shows an open charge pending even though the case may have been dismissed, the person found not guilty, or the arrest resulted in a conviction or possibly a lesser conviction than what was charged.
- ✓ **Convictions have been pardoned, overturned on appeal, or expunged but this information is not listed on the FBI record.** Again, the FBI database is often incomplete and it may not be updated by the state or local courts with this type of information.
- ✓ **Erroneous charges are often listed arising from a temporary border detention or the start of a prison term.** Again, because any fingerprinting may be sent to the FBI, entries frequently appear on the rap sheet when individuals are temporarily detained at border crossings (but no charges were brought) or on the first day of they enter custody for a prison term.
- ✓ **Convictions listed without the level of the offense.** FBI rap sheets frequently list a conviction without showing whether it was a felony, misdemeanor, summary offense, or other lesser offense that is not as serious as a felony.
- ✓ **Missing information on length of incarceration.** The FBI rap sheet will often show the sentence ordered by the criminal court but it will not show the date of discharge from prison. The discharge date, relevant for various employment inquiries, is often less than the time sentenced.
- ✓ **Mistakes in how a state record shows up on an FBI record.** In the reporting of criminal history record information from the states to the FBI, mistakes can be made when that data is converted to an FBI record.

It’s important to correct your FBI record, just as you would a credit report that had the wrong information.

Some of the problems described above can be resolved by correcting your FBI record, and others will need to be explained to an employer by the worker. To get the FBI to list the result of an arrest, a conviction overturned on appeal, an expungement, or a correction based on what the actual state record is, you should: (1) contact the state or local court, state criminal records repository, or law enforcement agency that submitted the incorrect information to the FBI; and (2) request that the agency that submitted the correct or updated information to the FBI so that the FBI may correct your FBI record. To obtain a copy of your FBI record, send a written request along with a certified check or money order for \$18 payable to the Treasury of the United States, your name, date and place of birth, and a set of fingerprints on fingerprint cards to: FBI CJIS Division – Record Request, 1000 Custer Hollow Road, Clarksburg, WV 26306. For additional information on FBI record requests and challenges, see <http://www.fbi.gov/hq/cjisd/fprequest.htm>.

HIPAA SECURITY TRAINING

HIPAA was designed to reform the way health care information was shared by providers.

Vocabulary:

PHI - Protected Health Information

HIPAA - Health Insurance Portability and Accountability Act of 1996

Who is covered?

- Health Care Providers
- Health Care Clearinghouses (Billing Companies)
- Health Care Plans
- DPW

What does HIPAA cover?

- Treatment codes, forms, and processes used by providers
- Identifier codes or numbers for providers, health plans, and employers
- Privacy addresses who has access to PHI in any form (oral, written, electronic)
- Security addresses how PHI is protected, both in storage and in transmission

What are we securing?

- Data that identifies or includes information that could identify an individual
- Data that relates to the past, present, or future
- The physical or mental health, provision of health care to the individual
- Payment for health care to an individual

What is HIPAA security?

- The technical controls to ensure that: Only the right people see the data, data is what it's supposed to be, it has not been changed or corrupted, and the data is available when it is needed. The data is protected from threats or hazards - fire, flood, theft, storm, disclosures not permitted by policy, accidental or deliberate access or unauthorized person.

Who cares?

- Commonwealth of PA: Misuse or unauthorized disclosure of this data could lead to TERMINATION OR OTHER DISCIPLINARY ACTION, POSSIBLE CRIMINAL CHARGES, AND/OR CIVIL PENALTIES.
- Federal Government: Misuse or unauthorized disclosure can result in CRIMINAL PENALTIES INCLUDING IMPRISONMENT OF UP TO 10 YEARS AND FINES OF UP TO \$250,000. Additional penalties may be applied as a result of civil action.

General DPW Practices:

- Abide by user ID and password policies
- Lock work stations
- Don't install software from home or from the internet onto your work station
- Limit internet use to work-related activities
- Don't open unsolicited email
- Immediately report unusual work station behavior to your supervisor
- Immediately report possible theft or misuse of your user ID and/or password to your supervisor

IMPORTANT CONTACT INFORMATION:

Work Ready Program Coordinator

Phone Number

Service Coordinator

Phone Number

Administrative Assistant

Phone Number

CAO Caseworker

Phone Number

CCIS Eligibility Specialist

Phone Number

Child Care Provider

Phone Number

Other:

Phone Number

DISCLAIMER:

Please note that the information contained in this handbook is based on the most current policies available at the time. Changes or clarifications from the federal, state, or local level are often issued between handbook revisions. Your Work Ready staff will keep you updated accordingly.

"EARN" Your Way to What You Want!!



***Allegheny County EARN
PROGRAM HANDBOOK***

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DISCLAIMER:

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INTRODUCTION

Welcome to EARN!!

We are here to help you find employment and EARN more money!! For your convenience, Allegheny County EARN has **3 locations**:

McKeesport EARN Center (8am - 4pm) 345 Fifth Avenue McKeesport, PA 15132 412-673-5300 (Phone)	RTC Downtown EARN Center (8am - 4:30pm) 333 Forbes Avenue 2 nd Floor Pittsburgh, PA 15222 412-765-1280 (Phone)	Wilkesburg EARN Center (8am - 5pm) 807 Wallace Avenue 4 th Floor Wilkesburg, PA 15221 412-473-6245 (Phone)
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What are the primary goals of EARN?

- 1) Identify what (if anything) has been preventing you from finding meaningful employment?
This could be anything from establishing reliable child care to working on your interviewing skills.
- 2) Help you resolve these issues.
Our staff will provide all the resources, assistance, and training you need. You just need to use what we offer.
- 3) Assist you with finding employment.
We will guide you in choosing a career that matches your skills and finding a job in that field.
- 4) Support your efforts to maintain and advance your career.
We will help you understand what your employer expects of you, resolve issues that may come up, and look for ways to advance with your current employer and/or to find better employment.

BEFORE YOU START

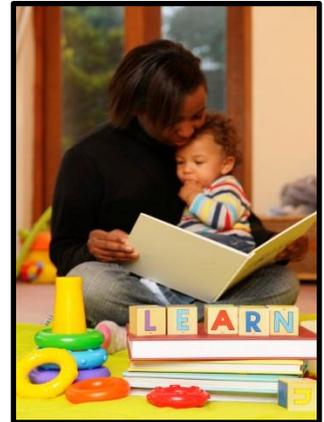
Child Care

If a CAO Case Worker determined you were eligible to receive child care funding, you were referred to CCIS (**Child Care Information Services**) to get a listing of child care providers **and** to schedule an interview. You should have contacted CCIS to ensure child care was in place when you started EARN. If not, please contact them immediately.

The CCIS Agency can provide funds for children **under** 13. Alternate funding may be available for children with special needs under the age of 19.

CCIS can help you choose child care that is appropriate for your child(ren). You may choose a private individual or a child care center, but **you must have a back-up provider** for times when the primary provider is not available.

When you become employed, you may be eligible for continued assistance through CCIS. Talk with your EARN Service Coordinator and CCIS Eligibility Specialist to discuss your options. **Please see below for CCIS contact information:**



CCIS CITY OFFICE	CCIS NORTH/SOUTH OFFICE
<p>YWCA of Greater Pittsburgh 305 Wood Street, 3rd Floor Pittsburgh, PA 15222</p> <p>Phone: 412-261-CARE or: 1-800-392-3131</p> <p>Hours: Monday - Friday, 8am - 5pm Extended: Tuesdays until 7pm</p>	<p>YWCA of Greater Pittsburgh 305 Wood Street, 2nd Floor Pittsburgh, PA 15222</p> <p>Phone: 412-261-CARE or: 1-800-392-3131</p> <p>Hours: Monday - Friday, 8am - 5pm Extended: Tuesdays until 7pm</p>

*Compass Website: <https://www.humanservices.state.pa.us/Compass.Web/CMHOM.aspx>
 (to apply for any state services/benefits online)

Other possible resources for child care and/or pre-school:

- **Keystone Stars (rates quality of child care providers):** 412-255-1175 or 1-877-349-4850
- **Allegheny County Head Start, Early Head Start, Pre-K Counts:** 1-866-214-KIDS
- **Child's Way (child care for children with special medical needs):** 412-365-6065

BEFORE YOU START (continued)

Transportation

To help you attend EARN activities, the CAO may approve transportation assistance for you. A CAO Case Worker will determine your eligibility every month. If eligible, you will pick up your bus pass (or gas card) at Travelers Aid. There are annual limits to transportation funds - see your CAO Case Worker for details.

Transportation Resources:



Travelers Aid of Pittsburgh - contracts with Allegheny County CAO to provide bus passes and gas cards to eligible Job Seekers.

Phone: 412-281-5474

Address: 343 Boulevard of the Allies, Pittsburgh, PA 15222

www.travelersaidpgh.org

Port Authority of Allegheny County - provides public transportation services within Allegheny County. Contact Port Authority for bus and trolley routes and schedules.

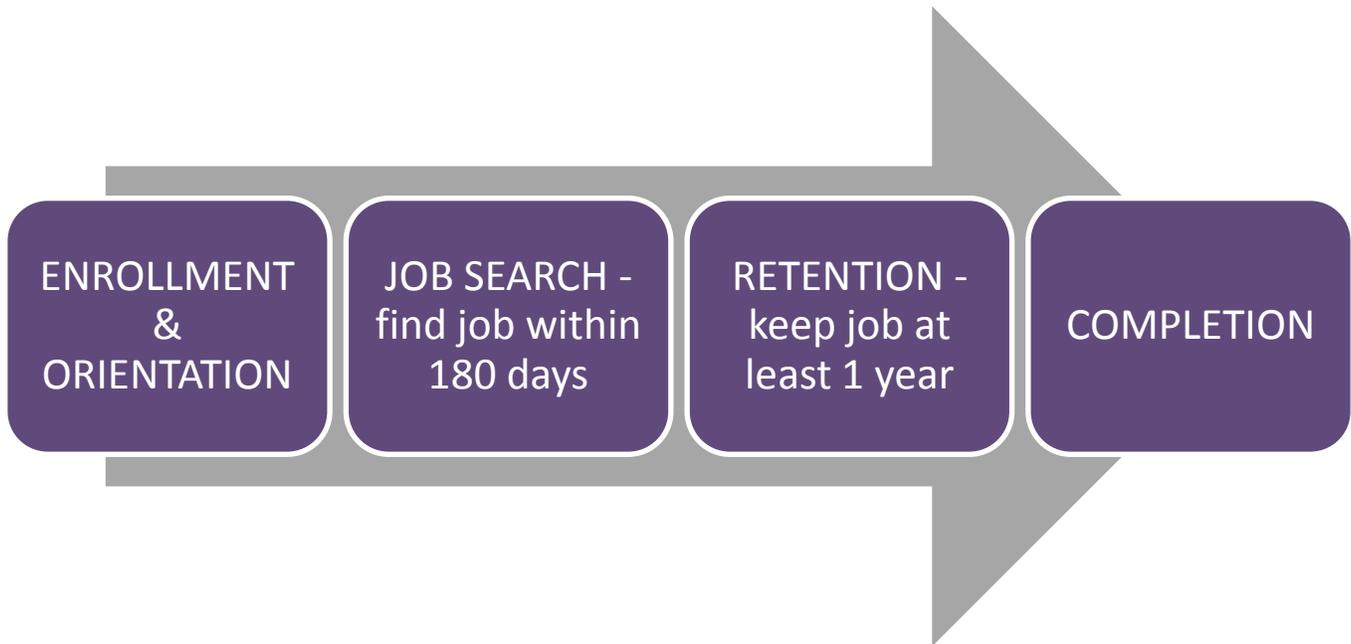
Phone: 412-442-2000

www.portauthority.org

**If traditional public transportation (Port Authority) is not available to you, you may be able to access these other community resources.

- **CommuteInfo Program** - established by The **Southwestern Pennsylvania Commission on Transportation**. It was designed to increase the number of people who have access to public transportation, carpooling, vanpooling and biking.
Phone: 1-888-819-6110
www.CommuteInfo.org
- **Worklink** - free scheduled van service for residents of upper Mon Valley Region. Provides access to training, child care, work, and other work-related activities.
Phone: 412-351-2200
www.heritagecommunityinitiatives.org/transportation.php

PROGRAM DESIGN



Enrollment & Orientation

Program Orientation occurs within the first few days. We will review policies and familiarize you with the program. After completing Orientation, you will officially be enrolled into EARN.

Job Search

While developing your Service Plan - the Job Developer, Service Coordinator, and you will decide the best time to begin EARN Job Search. The PA Department of Public Welfare wants Job Seekers to start employment within 180 days of enrollment.

Retention

The PA Department of Public Welfare policy states that a Job Seeker should (at a minimum) keep employment for 12 months. Beyond this, our goal is to help you establish a lifelong career.

Completion

Once you achieve the employment goals in Retention, you will complete the EARN Program.

WORK ACTIVITIES

Work Activities

Participation in a work activity will provide exposure to new workplace environments and add new job skills to your resume. Approved work activities are listed below:

- **Unsubsidized Employment** - A job where all wages and benefits are paid by the employer.
- **Subsidized Employment** - A job where the EARN Program pays a portion of your salary during the initial period of employment. This job is considered permanent employment from day one.
- **On-the-Job Training (OJT)** - Similar to Subsidized Employment (above), but focuses on positions that provide on-the-job training during your initial period of employment.
- **Paid Work Experience (PWE)** - Temporary employment at an EARN Paid Work Site. You will be earning a paycheck, and this income will affect your welfare benefits. Generally, PWE is used in limited situations for limited periods of time.
- **Vocation-Specific Work Experience (VWE)** - Much like PWE, but this temporary work experience is for Job Seekers enrolled in a Vocational Education Training Program. The work must be directly related to the individual's field of study - to provide students the opportunity to use their classroom skills in a vocation-specific work environment. You can participate in VWE as long as you are enrolled in an approved Vocational Education Plan.
- **Community Service (CS)** - Also like PWE, this option provides you with a temporary work experience at an EARN Community Service Site. The number of hours you can work per week will depend on the amount of benefits you receive from welfare. You will not receive a paycheck for your work, so there is no reduction of your benefits. While in the EARN Program, there is no limit to how many weeks you can participate in this activity.
- **Centralized Work Activity (CWA)** - Any work activity that is centrally located on or near your EARN Center. CWA offers a variety of work-related activities designed to enhance job skills and behaviors - making you more competitive in the job market.



ATTENDANCE

Agreement of Mutual Responsibility (AMR)

An Agreement of Mutual Responsibility (AMR) was developed between you and a CAO Case Worker at your District Office. Your AMR outlines your rights (what will be provided to you) and your responsibilities (what will be required of you). This includes the minimum hours you need to do per week and the activities in which you may do these hours. Your AMR must be updated and signed by you and the EARN CAO Case Worker as your plan changes.

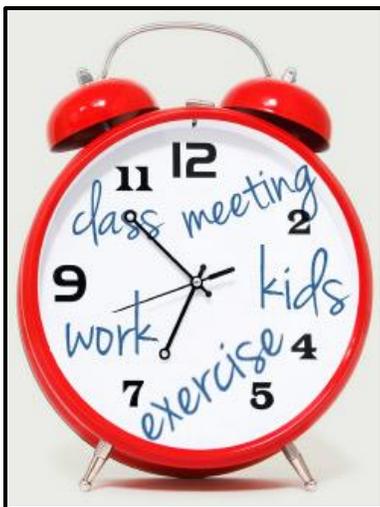
How much time will you be spending in EARN?

That depends on a few things:

- Number of Days on TANF
- Age of Children/Dependents
- Number of Parents in the Household
- What the Second Parent is Doing
- Any Special Circumstances for the Parents or Dependents
- If you are attending School or Working



The hours and activities listed on your AMR were calculated based on a combination of the above items. If you have any questions about your AMR, please speak with the CAO Case Worker located at your EARN Center. Please keep in mind that your required hours and your allowable activities may change throughout your participation in program if there are changes to the above-listed information. This is one reason it is very important to inform us of all changes as soon as possible.



EARN Attendance Policy

The EARN Attendance Policy is based on State and Federal Regulations - designed to prepare Job Seekers for what employers will expect. **You must do 100% of your required hours each week.** If this is not possible, there are some options (listed on the following pages) available to you. These options are limited though, as they will be with your employer, so use them sparingly.

If you are not compliant with your required hours by the end of the month, you will most likely be terminated from the EARN program per State and Federal Policy. To calculate this "monthly" attendance, we must use the **Federal Welfare Calendar.**

ATTENDANCE (continued)

The Federal Welfare Calendar

It always ends on the **last Saturday of the month**. For example: The last day of October 2014 is Saturday (10/25/14), and the 1st day of November 2014 is Sunday (11/26/14).

OCTOBER 2014						
Sun	Mon	Tues	Wed	Thur	Fri	Sat
Sept 29	Sept 30	Sept 31	1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

OCTOBER 2014
FEDERAL WELFARE
MONTH

THESE DAYS GO TO
NOVEMBER 2014

Excused Absences

Some absences can be excused **if they meet the following criteria:**

- Job Seekers must give advance notice and provide appropriate documentation.
- Excused absences are limited to 80 hours in a 12-month period.
- The 12-month period rolls from day to day, looking back at the **previous** 12 months.
- No more than 16 hours can be used in 1 month.
- Excused absences can only be used for **UNPAID** activities.



TYPES OF EXCUSABLE ABSENCES	
Illness of you or dependent	Job interview
Medical appointment for you or dependent	Housing appointment
CAO/WIC appointment	Obtaining transportation
Child support appointment	Jury Duty
Legal appointment	Subpoena
School appointment/event	Other required court proceedings
Counseling appointment	Obtaining child care
Obtaining documents needed for employment or program eligibility	Other appointments deemed necessary to maintain participation in the program

*You should only use excused absence time if you are unable to bank or make up the time (see next page).

ATTENDANCE (continued)

To avoid exhausting all of your Excused Absence hours, we recommend:

Banking Hours

If you know that you will need to miss time on a specific day, the best approach is to bank extra time to cover those hours. "**Banked**" hours need to be used within the same Welfare Calendar Month that the absence occurs. Please discuss this with your Service Coordinator ahead of time, so you can develop a plan together.

Make-up Hours

If you miss time that was not planned, you need to make up those hours. If possible, this should be done in the same week the time was missed. If you cannot do this, you and your Service Coordinator will develop a plan for you to quickly make up the time.

Unexcused Absences

There are several reasons why missed time may be unexcused - you do not provide documentation, you do not give proper notice, you do not have excused absence hours available, the reason for the absence is not excusable. If you have 3 unexcused absences in a row, you will most likely be terminated from the EARN Program per State and Federal Policy.

Holiday Time

On the following Holidays, you will receive credit for your normally scheduled hours that day. You will not need to use excused absence time.



HOLIDAYS

NEW YEAR'S DAY
MARTIN LUTHER KING DAY
PRESIDENT'S DAY
MEMORIAL DAY
4TH OF JULY
LABOR DAY
COLUMBUS DAY
VETERAN'S DAY
THANKSGIVING DAY
CHRISTMAS DAY



NOTES:

If you attend school or any off-site activity, and that site is closed on days not listed above - you must report to your EARN Center for those days.

If your EARN Center is also closed for days not listed above - you can either bank hours, make up the hours, or use excused absence time.

For Paid Work Activity (PWE) - you must choose in advance to either receive the Holiday time (no pay) **OR** to work the hours by banking or making them up (for pay).

ATTENDANCE (continued)

Time and Attendance Forms

Completing Attendance Forms is very similar to doing timecards for work - they are formal documents, and there are a few things you should remember:

- You must enter the time you start and end each activity on a daily basis.
- The time you enter must be accurate.
- You must sign & date the Attendance Form where indicated.
- Your signature on the Attendance Form indicates that you affirm the information is accurate.
- Your Attendance Form will not be valid if any of the above information is missing or inaccurate.
- Invalid Attendance Forms or missing Attendance Forms will cause problems with your participation in program (including PWE and VWE paychecks).
- If you have OJT, subsidized employment, or unsubsidized employment - we will use a paystub (or some other documentation from the employer) to track your hours.
- If your Center has an electronic attendance system, you must use it as instructed and in a manner that accurately reflects the time you participate in each activity.



I GOT THE JOB!



INCENTIVE POLICY

We know the transition from welfare to work can be difficult, especially when raising a family. The Allegheny County EARN Incentive Policy was designed to help you through this transition...and to reward you for your success. **PLEASE REMEMBER YOU MUST BE COMPLIANT WITH ALL REQUIRED HOURS TO RECEIVE ANY INCENTIVES.**

ACHIEVED PLACEMENT	\$150	STARTED 4 CONSECUTIVE WEEKS OF WORK (TOTALING AT LEAST 80 HRS) BEFORE 180 DAYS
PAYSTUBS (FOR 2 WEEKS OF WORK) WITH 20-24 HOURS PER WEEK	\$50	IF SUBMITTED ON TIME
PAYSTUBS (FOR 2 WEEKS OF WORK) WITH 25+ HOURS PER WEEK	\$75	IF SUBMITTED ON TIME
ACHIEVEMENT	\$50	OBTAIN DRIVER'S LICENSE, GED/HS DIPLOMA, OR VOC/ED DEGREE/CERTIFICATE
BUS PASS OR GAS CARD	MAY BE ELIGIBLE FOR MONTHLY BUS PASS OR GAS CARD WHILE WORKING. MUST MAINTAIN QUALIFYING HOURS OF EMPLOYMENT.	

- ♦ Incentives issued in the form of gift cards, bus passes/gas cards, or (in certain circumstances) 3rd party checks.
- ♦ Please check with EARN Center about specific days & times Incentives can be issued.
- ♦ Check with your EARN SC for more eligibility details (for example: what "on time" means).
- ♦ Incentive Policy can change at any time.

SUPPORT SERVICES

EARN Support Service Funds

You may request funds from EARN for eye glasses or hearing aids. The item must be necessary for you to meet the goals on your EARN Service Plan, and you must be participating in an approved activity. The request must be for the least costly and most efficient or practical method of obtaining the necessary item.

CAO Special Allowance Funds

You may also request funds from CAO to assist with certain items or services - such as child care, transportation, books, tools/equipment, clothing, fees, moving expenses, union dues, and vehicle purchase. The item or service must be necessary to participate in work or a work-related activity. A CAO Case Worker will determine your eligibility for Support Service Funds. We will help you collect the documentation needed for the request.

PLEASE NOTE: SNAP Job Seekers cannot request certain types of Special Allowance Funds. See your Service Coordinator and/or EARN CAO Worker for more information.

CONDUCT POLICIES



EARN has developed conduct policies to help create a productive and professional environment. Each person involved with EARN is responsible for her/his own actions. These guidelines and policies are similar to those you will find in the workplace.

Interpersonal Behavior

EARN encourages all Job Seekers to be respectful of each other. If you feel frustrated or uncomfortable about any situation, your Service Coordinator can guide you in resolving the problem. **Please remember that verbal outbursts and/or any type of threat to Staff or other Job Seekers may result in termination from the program.** Learning how to appropriately handle conflict is an important part of being job-ready.

Dress Appropriately

Just as many employers have standards for personal appearance, so does the EARN Program. These policies are in place to promote a positive working & learning environment.

The basic rules are:

- **Clean pants that provide appropriate coverage for your body**
- **Clean shirts that provide appropriate coverage for your body**
- **Clean dresses and skirts - no shorter than 2 inches above the knee**
- **No inappropriate pictures or wording**

Drug-Free Environment

You may not use, sell, possess, or help others obtain alcohol, narcotics, or legally restricted drugs while at EARN. Substance abuse is an illness and a major health problem. If you are found abusing drugs and/or alcohol, you will be counseled about treatment options. You will be sent home if it appears you are under the influence of alcohol and/or drugs. Most employers have similar policies.

Smoking

Smoking policies at each center will follow the building codes and local laws. Be aware of the smoking policy at your facility.

Electronic Devices

All cell phones, pagers, and audio/video devices must be turned off or set to vibrate.

PLEASE NOTE: Paid Work and Community Service sites may prohibit electronic devices completely due to the nature of the work being done. These policies must be followed.

CONDUCT POLICIES (continued)

Telephone Policy

If possible, all personal calls must be made during breaks or lunch time. If it is an emergency, please excuse yourself from the classroom. If we receive an **urgent** message for you during class time, it will promptly be given to you - though confidentiality prevents us from discussing your information with the caller. Each Center may have further details about their specific policies.

Visitors

For reasons of privacy and safety, we do not allow visitors (including children) at our Centers. If meeting someone, you should arrange to do so in the lobby or at an off-site location.

Weapons

Weapons are not permitted at your EARN Center, work activity site, or education/training site. **"Weapon"** means any device, material, or object which is used, or threatened to be used, in a harmful manner. **"Weapon"** also means anything that is inherently dangerous (such as guns and knives), regardless of intent to harm. **Any incident of this nature must be reported to the police and the EARN and Welfare Program Managers. It will result in removal from program.**

Computer Usage

Inappropriate usage of EARN computers may result in the loss of computer privileges.

Here are the basic rules for the Computer Labs:

- **No games, social media, inappropriate sites, entertainment, music, video, file sharing, etc.**
- **You may not use or install your own games or CDs.**
- **No outside storage devices (disks, CDs, flash drives, etc.).**
- **No eating or drinking in the computer labs.**

Progressive Discipline

Depending on type and severity, **violations of the Conduct Policy could result in immediate termination from the EARN Program.** Otherwise, EARN will typically use the following **Progressive Disciplinary Procedure:**

1. Verbal Warning
2. Written Warning
3. Conciliation Meeting with EARN and CAO staff
4. Termination from Program

We will do our best (through job coaching, mentoring, and resources) to help you modify behavior that may result in disciplinary action, but how you conduct yourself is ultimately your choice. To prepare you for employment, EARN's Conduct Policy is very similar to those you will find with most employers.

YOUR RIGHTS

Every Job Seeker has rights. Please be aware of what they are and what to do if you feel they have been violated.

Grievance Procedure

You may use the *Grievance* process at any point during your EARN participation. This can include, but is not limited to - refusal of entry into program activities, denial of Support Service Funds, and specific complaints regarding staff and/or program services. This procedure was established by the Allegheny County Department of Human Services. It works, and we encourage you to use it.

STEP ONE: Try to resolve the problem informally with the other person(s), your Service Coordinator, and/or the Site Administrator. They will help you work through the issue.

STEP TWO: If STEP ONE does not resolve the issue, you may request a GRIEVANCE FORM. An EARN staff person (with whom you feel comfortable) can help you complete it. The Grievance Form must be submitted to the EARN Program Manager within 2 business days of the Job Seeker receiving the form. The LMC Grievance Committee (the EARN Manager and the DPW Employment & Training Manager) has 3 business days to try and resolve the issue with you.

STEP THREE: If you are not satisfied with the proposed Resolution in STEP TWO, the Grievance Form will be forwarded to the Local Management Committee (LMC) within 4 business days. The committee will review the problem and record its efforts and decisions. You will receive a written decision within 10 business days.

STEP FOUR: If you remain unsatisfied with the LMC's decision, you may make a formal appeal through the Department of Welfare's Hearings and Appeals process.

OR

If you are satisfied with the Resolution, you will need to submit written notification to the EARN Site Administrator that you are withdrawing the Grievance. A copy will be forwarded to the LMC and to the EARN & DPW Employment & Training Managers.

Confidentiality

You have the right to complete confidentiality, which means your private information will not be shared with anyone not associated with the EARN Program. Before we can obtain or share your private information, we need you to sign an "Authorization for Release of Information" Form. Otherwise, the following are those who may have access to your records:

- Those entitled by law
- Service Coordinators and other program staff
- Department of Public Welfare staff
- The Allegheny County Department of Human Services (who have a rightful need)

YOUR RIGHTS (CONTINUED)

Allegheny County EARN Sexual Harassment Policy

As an Allegheny County EARN Job Seeker, it is important that you are aware of your legal rights pertaining to the issue of Sexual Harassment under Title VII of the Civil Rights Act of 1964 and the Pennsylvania Human Relations Act.

What is Sexual Harassment?

Sexual Harassment is defined as any unwelcome sexual advance, requests for sexual favors, and other verbal or physical conduct of a sexual nature which is made an implicit or explicit condition of employment, or which affects employment decisions, creates an intimidating hostile or offensive work environment, or interferes with work performance or program participation. Most victims are women, but such harassment can happen to any employee or program Job Seeker regardless of gender.

What should you do if you believe you have been sexually harassed?

1. Record the Facts

If Sexual Harassment occurs - make sure to record the names of any witnesses as well as the "who, what, when, and where" of the situation.

2. Talk to your EARN Service Coordinator, Site Administrator, or EO/Sexual Harassment Prevention Officer immediately:

Mr. Earl Smithson, Sexual Harassment Prevention Officer
One Smithfield St., 5th Floor
Pittsburgh, PA 15222
412-350-2795

Additionally, complaints may be filed with any of the agencies listed below:

WITHIN 180 DAYS OF INCIDENT	WITHIN 300 DAYS OF INCIDENT	ADDITIONAL RESOURCE
PA Human Relations Commission 301 Chestnut Street, Suite 300 Harrisburg, PA 17105-3145 Phone: 717-787-4410 Fax: 717-214-0584 TDD: 717-787-7279	Equal Employment Opportunity Commission Bourse Building, Suite 400 21 South 5 th Street Philadelphia, PA 19105-2515 Phone: 215-440-2600 Fax: 215-440-2604	Bureau of Equal Opportunity Department of Public Welfare Room 223 Health & Welfare Building Harrisburg, PA 17120 Phone: 717-787-1127

YOUR RIGHTS (CONTINUED)

EQUAL OPPORTUNITY IS THE LAW CIVIL RIGHTS STATEMENT

-----It is against the law for this recipient of Federal financial assistance to discriminate on the following basis:

Against any individual in the United States, on the basis of race, color, religion, sex, national origin, age, disability, political affiliation or belief; and against any beneficiary of programs financially assisted under Title I of the Workforce Investment Act of 1998 (WIA), on the basis of the beneficiary's citizenship/status as a lawfully admitted immigrant authorized to work in the United States, or his or her participation in any WIA Title I-financially assisted program or activity. The recipient must not discriminate in any of the following areas: Deciding who will be admitted or have access to any WIA Title I-financially assisted program or activity; Providing opportunities in, or treating any person with regard to, such a program or activity; or Making employment decisions in the administration of, or in connection with, such a program or activity.

WHAT TO DO IF YOU BELIEVE YOU HAVE EXPERIENCED DISCRIMINATION

If you think that you have been subjected to discrimination under a WIA Title I-financially assisted program or activity, you may file a complaint within 180 days from the date of the alleged violation with the Director, Civil Rights Center (CRC), U.S. Department of labor ~00 Constitution Avenue, N.W., Room N-4 123, Washington DC 20210.

If you file your complaint with the recipient, you must wait either until the recipient issues a written Notice of Final Action or until 90 days have passed (whichever is sooner) before filing with the Civil Rights Center (see address above). If the recipient does not give you a written Notice of Final Action within 90 days of the day on which you filed your complaint, you *do not* have to wait for the recipient to issue that Notice before filing a complaint with CRC. However, you must file your CRC complaint within 30 days of the 90-day deadline (in other words, within 120 days after the day on which you filed your complaint with the recipient). If the recipient does give you a written Notice of Final Action on your complaint, but you are dissatisfied with the decision or resolution, you may file a complaint with CRC. You must file your CRC complaint within 30 days of the date on which you received the Notice of Final Action.

FOR INFORMATION OR TO FILE A COMPLAINT, CONTACT:

**Autro Heath, Jr. (aheath@state.pa.us)
DEPARTMENT OF LABOR AND INDUSTRY
OFFICE OF EQUAL OPPORTUNITY
ROOM 514 LABOR AND INDUSTRY BUILDING
SEVENTH AND FORSTER STREETS
HARRISBURG, PENNSYLVANIA 17120**

**(717)787-1182
1-800-622-5422**

**TDD/TTY: 1-800-654-5984
FAX: (717) 772-2321**

**Auxiliary aids and services are available upon request to individuals with disabilities
An Equal opportunity Employer**

**IGUALDAD DE OPORTUNIDAD ES LA LEY
DECLARACION DE DERECHOS CIVILES**

Es contra la ley que este destinatario de asistencia financiera federal discrimine por las siguientes razones: en contra de cualquier individuo en los Estados Unidos por razón de, raza, color, religion, sexo, edad, incapacidad, origen nacional, afiliación política o credo; y en contra de cualquier beneficiario de programas asistidos financieramente bajo el Título I de "Workforce Investment Act" del 1998 (WIA), por razón del estatus de ciudadanía siendo un inmigrante legalmente autorizado para trabajar en los Estados Unidos o de su participación en cualquiera de los programas o actividades financieramente asistidas por WIA Título I. El destinatario no discriminará en ninguna de las siguientes áreas: Decidiendo quien será admitido o tendrá acceso a cualquiera de los programas o actividades de WIA asistidos financieramente por el Título I; Proveyendo oportunidades en el tratamiento de cualquier persona con relación a semejante programa o actividad; o en la toma de decisiones de empleo en la administración de o en conexión con semejante programa o actividad.

**j. Que hacer si usted cree
que ha experimentado discriminación?**

Si usted cree que ha estado sujeto a discriminación bajo cualquiera de los programas o actividades de WIA asistidos financieramente por el Título I, usted puede presentar una querrela dentro de los primeros 180 días después de la alegada violación al Director del Centro de Derechos Civiles (Civil Rights Center (CRC)), U.S. Department of Labor, 200 Constitution Avenue NW, Room N-4 123, Washington, DC 20210.

Si usted presenta una querrela al destinatario, deberá esperar hasta que el destinatario expida una Notificación de Acción Final por escrito o hasta que pasen 90 días (lo primero que suceda), antes de presentar la querrela al Centro de Derechos Civiles (Civil Rights Center) (vea la dirección arriba). Si el destinatario no le provee una Notificación de Acción Final por escrito dentro de 90 días de la fecha cuando usted presentó su querrela, usted no tiene que esperar que el destinatario expida la notificación antes de presentar su querrela al CRC. Sin embargo, deberá presentar su querrela dentro de 30 días después del límite de 90 días (en otras palabras, 120 días después de haber presentado la querrela al destinatario). Si el destinatario le expide una Notificación de Acción Final por escrito respondiendo a su querrela pero usted no está satisfecho con la decisión o resolución, usted puede presentar su querrela al CRC. Su querrela deberá ser presentada al CRC dentro de 30 días de la fecha en que usted reciba su Notificación de Acción Final.

PARA INFORMACION O PARA REGISTRAR UNA QUERRELA, COMUNIQUESE CON:

**Autro Heath, Jr. (aheath@state.pa.us)
DEPARTMENT OF LABOR AND INDUSTRY
OFFICE OF EQUAL OPPORTUNITY
ROOM 514 LABOR AND INDUSTRY BUILDING
SEVENTH AND FORSTER STREETS
HARRISBURG, PENNSYLVANIA 17120**

**(717) 787-1182
1-800-622-5422**

**TDD/TTY: 1-800-654-5984
FAX: 717-772-2321**

**Programa de oportunidades de igualdad del empleo
Ayudantes auxiliares y servicios están disponibles para individuos con incapacidades si así lo requieren.**

YOUR RIGHTS (CONTINUED)

Know-Your-Rights to FBI Employment Criminal Background Checks

Nine million workers seeking employment or employment-related licenses each year are now required to pass a background check using the FBI criminal records database. If there is any conviction, arrest or detention in the FBI database for that worker, a “rap sheet” will be produced. To protect their rights, workers should be aware of common problems in the FBI database and how to correct errors and incomplete information listed on their FBI rap sheet.

Common problems you should look out for when subjected to an FBI background check because they can lead to difficulty getting jobs:

- ✓ **The FBI rap sheet shows an arrest, but doesn’t list the result or outcome of the arrest.** Up to 50% of FBI records are incomplete because they have not been updated by the state or local courts to show the final outcome of the case. Arrests typically get transmitted to the FBI when fingerprints are taken, creating an FBI record, but the result is often not sent to the FBI. This means the FBI record shows an open charge pending even though the case may have been dismissed, the person found not guilty, or the arrest resulted in a conviction or possibly a lesser conviction than what was charged.
- ✓ **Convictions have been pardoned, overturned on appeal, or expunged but this information is not listed on the FBI record.** Again, the FBI database is often incomplete and it may not be updated by the state or local courts with this type of information.
- ✓ **Erroneous charges are often listed arising from a temporary border detention or the start of a prison term.** Again, because any fingerprinting may be sent to the FBI, entries frequently appear on the rap sheet when individuals are temporarily detained at border crossings (but no charges were brought) or on the first day of they enter custody for a prison term.
- ✓ **Convictions listed without the level of the offense.** FBI rap sheets frequently list a conviction without showing whether it was a felony, misdemeanor, summary offense, or other lesser offense that is not as serious as a felony.
- ✓ **Missing information on length of incarceration.** The FBI rap sheet will often show the sentence ordered by the criminal court but it will not show the date of discharge from prison. The discharge date, relevant for various employment inquiries, is often less than the time sentenced.
- ✓ **Mistakes in how a state record shows up on an FBI record.** In the reporting of criminal history record information from the states to the FBI, mistakes can be made when that data is converted to an FBI record.

It’s important to correct your FBI record, just as you would a credit report that had the wrong information.

Some of the problems described above can be resolved by correcting your FBI record, and others will need to be explained to an employer by the worker. To get the FBI to list the result of an arrest, a conviction overturned on appeal, an expungement, or a correction based on what the actual state record is, you should: (1) contact the state or local court, state criminal records repository, or law enforcement agency that submitted the incorrect information to the FBI; and (2) request that the agency that submitted the correct or updated information to the FBI so that the FBI may correct your FBI record. To obtain a copy of your FBI record, send a written request along with a certified check or money order for \$18 payable to the Treasury of the United States, your name, date and place of birth, and a set of fingerprints on fingerprint cards to: FBI CJIS Division – Record Request, 1000 Custer Hollow Road, Clarksburg, WV 26306. For additional information on FBI record requests and challenges, see <http://www.fbi.gov/hq/cjisd/fprequest.htm>.

HIPAA SECURITY TRAINING

HIPAA was designed to reform the way health care information was shared by providers.

Vocabulary:

PHI - Protected Health Information

HIPAA - Health Insurance Portability and Accountability Act of 1996

Who is covered?

- Health Care Providers
- Health Care Clearinghouses (Billing Companies)
- Health Care Plans
- DPW

What does HIPAA cover?

- Treatment codes, forms, and processes used by providers
- Identifier codes or numbers for providers, health plans, and employers
- Privacy addresses who has access to PHI in any form (oral, written, electronic)
- Security addresses how PHI is protected, both in storage and in transmission

What are we securing?

- Data that identifies or includes information that could identify an individual
- Data that relates to the past, present, or future
- The physical or mental health, provision of health care to the individual
- Payment for health care to an individual

What is HIPAA security?

- The technical controls to ensure that: Only the right people see the data, data is what it's supposed to be, it has not been changed or corrupted, and the data is available when it is needed. The data is protected from threats or hazards - fire, flood, theft, storm, disclosures not permitted by policy, accidental or deliberate access or unauthorized person.

Who cares?

- Commonwealth of PA: Misuse or unauthorized disclosure of this data could lead to **TERMINATION OR OTHER DISCIPLINARY ACTION, POSSIBLE CRIMINAL CHARGES, AND/OR CIVIL PENALTIES.**
- Federal Government: Misuse or unauthorized disclosure can result in **CRIMINAL PENALTIES, INCLUDING IMPRISONMENT UP TO 10 YEARS AND FINES UP TO \$250,000.** Additional penalties may be applied as a result of civil action.

General DPW Practices:

- Abide by user ID and password policies
- Lock work stations
- Don't install software from home or from the internet onto your work station
- Limit internet use to work-related activities
- Don't open unsolicited email
- Immediately report unusual work station behavior to your supervisor
- Immediately report possible theft or misuse of your user ID and/or password to your supervisor

YOUR DIRECT SERVICE TEAM



Please take the time to know who is on your team. We are here to support you!

<p><u>SITE ADMINISTRATOR</u> The SITE ADMINISTRATOR is in charge of your EARN Center and will help ensure that you receive quality service.</p>	<p>Name:</p> <p>Phone:</p> <p>Office Hours:</p>
<p><u>SERVICE COORDINATOR</u> Your SERVICE COORDINATOR is your main contact person and will help you with goal planning, resources, and service coordination.</p>	<p>Name:</p> <p>Phone:</p> <p>Office Hours:</p>
<p><u>EARN CAO CASE WORKER</u> The EARN CAO CASE WORKER will help determine your eligibility for welfare benefits and EARN. They will monitor compliance and can address welfare issues.</p>	<p>Name:</p> <p>Phone:</p> <p>Office Hours:</p>
<p><u>JOB DEVELOPER</u> Your JOB DEVELOPER will help you with career exploration, job readiness, job search, and job placement activities.</p>	<p>Name:</p> <p>Phone:</p> <p>Office Hours:</p>
<p><u>RETENTION SPECIALIST</u> The RETENTION SPECIALIST will assist you in your efforts to retain and advance your employment. At some EARN Centers, your SC will take care of this.</p>	<p>Name:</p> <p>Phone:</p> <p>Office Hours:</p>
<p><u>OFF-SITE WORK ACTIVITY SUPERVISOR</u> Your WORK ACTIVITY SUPERVISOR will provide supervision and job skills training, including appropriate workplace behaviors.</p>	<p>Name:</p> <p>Phone:</p> <p>Office Hours:</p>
<p><u>CENTRALIZED WORK ACTIVITY MANAGER</u> Your CENTRALIZED WORK ACTIVITY MANAGER will provide job coaching, mentoring, and other activities designed to build work-related skills.</p>	<p>Name:</p> <p>Phone:</p> <p>Office Hours:</p>

MY MAKE-UP PLAN & AGREEMENT

JOB SEEKER'S NAME: _____ **ID #:** _____ **DATE:** _____

I understand that I'm required to complete _____ hours of work activity each week. As of _____, I am _____ (total) hours short of this requirement. I understand that I must make up this time by _____, or I may be terminated from the program. I agree to do the following **additional** hours to comply with my requirement. I understand that termination without good cause may result in sanctioning of my TANF benefits.

SUNDAY		MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY	
Date:		Date:		Date:		Date:		Date:		Date:		Date:	
Code	Make-up Schedule	Code	Make-up Schedule	Code	Make-up Schedule	Code	Make-up Schedule	Code	Make-up Schedule	Code	Make-up Schedule	Code	Make-up Schedule
SUNDAY		MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY	
Date:		Date:		Date:		Date:		Date:		Date:		Date:	
Code	Make-up Schedule	Code	Make-up Schedule	Code	Make-up Schedule	Code	Make-up Schedule	Code	Make-up Schedule	Code	Make-up Schedule	Code	Make-up Schedule

**All make-up schedules must be worked around your regular schedule. All make-up time is in ADDITION to your regularly scheduled time.*

_____ (Job Seeker Signature/Date)

Comments: _____

_____ (Staff Signature/Date)

NAME: ALLEGHENY COUNTY EARN INCENTIVE TRACKING FORM

RETENTION N WEEKS	RETENTION WEEK END DATE	DATES COVERED ON PAY	PAY DATE	DATE DUE TO EARN	DATE SUBMITTED TO EARN	HRS FOR WEEK	INCENTIVE AMOUNT	INCENTIVE TYPE*	DATE RECEIVED	RECEIVED BY (SIGNATURE)	ISSUED BY (SIGNATURE)
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											

NAME: ALLEGHENY COUNTY EARN INCENTIVE TRACKING FORM

RETENTION N WEEKS	RETENTION WEEK END DATE	DATES COVERED ON PAY	PAY DATE	DATE DUE TO EARN	DATE SUBMITTED TO EARN	HRS FOR WEEK	INCENTIVE AMOUNT	INCENTIVE TYPE*	DATE RECEIVED	RECEIVED BY (SIGNATURE)	ISSUED BY (SIGNATURE)
17											
18											
19											
20											
21											
22											
23											
24											
25											
26											
27											
28											
29											
30											
31											
32											

NAME: ALLEGHENY COUNTY EARN INCENTIVE TRACKING FORM

RETENTION N WEEKS	RETENTION WEEK END DATE	DATES COVERED ON PAY	PAY DATE	DATE DUE TO EARN	DATE SUBMITTED TO EARN	HRS FOR WEEK	INCENTIVE AMOUNT	INCENTIVE TYPE*	DATE RECEIVED	RECEIVED BY (SIGNATURE)	ISSUED BY (SIGNATURE)
33											
34											
35											
36											
37											
38											
39											
40											
41											
42											
43											
44											
45											
46											
47											
48											

NAME: ALLEGHENY COUNTY EARN INCENTIVE TRACKING FORM

RETENTION WEEK END DATE	DATES COVERED ON PAY	PAY DATE	DATE DUE TO EARN	DATE SUBMITTED TO EARN	HRS FOR WEEK	INCENTIVE AMOUNT	INCENTIVE TYPE*	DATE RECEIVED	RECEIVED BY (SIGNATURE)	ISSUED BY (SIGNATURE)
49										
50										
51										
52										

ACHIEVEMENT INCENTIVES							INCENTIVE TYPE	DATE RECEIVED	RECEIVED BY (SIGNATURE)	ISSUED BY (SIGNATURE)
ACHIEVEMENT: CIRCLE ONE...GED/HS DRIVER'S LICENSE COMPLETED VOC/ED (ATTACH DOCUMENTATION)										
ACHIEVEMENT: CIRCLE ONE...GED/HS DRIVER'S LICENSE COMPLETED VOC/ED (ATTACH DOCUMENTATION)										
ACHIEVEMENT: CIRCLE ONE...GED/HS DRIVER'S LICENSE COMPLETED VOC/ED (ATTACH DOCUMENTATION)										

***3RD PARTY CHECKS**
 IF RECEIVING A 3RD PARTY CHECK - INDICATE THE FOLLOWING INFORMATION, AND ATTACH A COPY OF THE CHECK TO THIS TRACKING FORM.

	PAYABLE TO (NAME & ADDRESS)	AMOUNT	RECEIVED BY (SIGN & DATE)	ISSUED BY (SIGN & DATE)
1				
2				
3				

NAME: **ALLEGHENY COUNTY EARN INCENTIVE TRACKING FORM**

RETENTION N WEEKS	RETENTION WEEK END DATE	DATES COVERED ON PAY	PAY DATE	DATE DUE TO EARN	DATE SUBMITTED TO EARN	HRS FOR WEEK	INCENTIVE AMOUNT	INCENTIVE TYPE*	DATE RECEIVED	RECEIVED BY (SIGNATURE)	ISSUED BY (SIGNATURE)
4											
5											