



Penalty Resolution Determination

Elements needed for documenting a decision to impose a 75% or 100% penalty reduction in assistance

Considerations	Notes
<p>PR VISIT:</p> <p>If a home visit was made, list date and time of visit, who made the visit (including staff from other agencies), and observations made:</p> <ul style="list-style-type: none"> • household members present • housing situation • living conditions inside home • behavior and interactions of household members. 	
<p>IF HOME VISIT WAS NOT MADE, LIST ATTEMPTS MADE TO ARRANGE HOME VISIT:</p> <p>List attempts made to arrange PR visit (this is a summary of individual CLNOs entered as each attempt was made.)</p> <p>Include a list of attempts to contact family:</p> <ul style="list-style-type: none"> • the dates of the attempts; • the methods used, such as phone call to home or message phone, notice or letter, in person contact; • the results of the attempts – was the family contacted, what was the response? • Note any event in which the family did not allow the visit to proceed. 	

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<p>COMPLIANCE WITH REQUIREMENT:</p> <p>Does the client understand why their cash assistance is reduced?</p> <p>What reasons do they give for not complying with the requirement?</p> <p>What does the recipient think they can do or that they need to comply with the required activity?</p> <p>If individual will be complying with requirements stop here and update the FSSP with the existing activities with new dates. Does there appear to be any indication of problems or challenges that are keeping the recipient from complying? If so, should the recipient be exempt or does good cause from completing the required activity exist?</p> <p>Document the exemption or good cause criteria.</p> <p>If the client cannot do the existing activities revise or develop a new FSSP.</p>	
<p>BASIC LIVING EXPENSES:</p> <p>Describe expenses for housing, utilities such as water, heat and electricity, and basic phone service, food, clothing, transportation, child support obligations that must be met and any other expenses considered essential for the family's support.</p> <p>Include status of housing – is it stable, is the family receiving a subsidy, can they receive or retain a subsidy if assistance is reduced further.</p>	
<p>MANAGEMENT OF EXPENSES:</p> <p>Describe how the client says they are covering basic living expenses while receiving a reduced benefits.</p> <p>How does the client say they will manage on a smaller benefit amount if the penalty progresses?</p>	

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<p>FAMILY INCOME AND RESOURCES:</p> <p>Describe the earned and unearned income, TA benefit amount, Food Stamp allotment, and resources that the family will have to cover basic living expenses if the assistance amount is reduced further.</p>	
<p>SUPPORTS FROM OTHER HOUSEHOLD MEMBERS, FAMILY, OR FRIENDS:</p> <p>Describe contributions for basic living expenses that will be received from other family members or individuals who live in the household. Will those contributions provide for the family's basic living expenses?</p>	
<p>COMMUNITY RESOURCES:</p> <p>Describe services available in the community that fit the family's basic needs. Document referrals made for community resources.</p>	
<p>DECISION ON PENALTY PROGRESSION:</p> <p>Explain if the family's income, resources, supports from other household members, family or friends, and available community services will provide for the family's basic living expenses.</p> <p>If basic living expenses will be covered, explain if there is any reason that an increased penalty amount will result in conditions that threaten the children's health or safety.</p> <p>State the conclusion including the reason that the penalty will or will not progress to the next level.</p>	
<p>ACTION:</p> <p>Document in CLNO/CANO the decision to progress or end the penalty. Follow eligibility communication according to Addendum 18 of the HowWe Guide.</p>	