

# Prevention, Retention & Contingency Plan



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## **Prevention, Retention & Contingency (PRC) Plan**

### **I. Purpose of Program**

The Scioto County Department of Job and Family Services (SCDJFS) PRC Program is designed to assist low to moderate income families who may or may not currently be receiving or desire to receive Ohio Works First (OWF) cash assistance. It is a tool for our community to develop strategies and programs to encourage families to obtain and retain employment, prevent dependency, promote the stability of families and enhance economic self-sufficiency. It is also designed to reduce or eliminate a specific emergent need or needs that threaten the health and/or safety of a family and to stabilize their situation.

### **II. Purposes of PRC Services**

- Services that have no direct monetary value to an individual family and do not involve implicit or explicit income support.
- One-time, short-term assistance which is limited to the amount actually required to meet the non-deferrable need, up to \$500.00 per 12 consecutive month period of eligibility.
  - The eligibility period begins October 1<sup>st</sup> and ends September 30<sup>th</sup> of each year.
  - Any number of individual payments can be made during the eligibility period, as long as they are distinctive, non-recurring situations and do not exceed \$500.00 for the PRC assistance group during the 12-month eligibility period.
- Services that support one or more of the four Temporary Aid for Needy Families (TANF) purposes which are as follows:
  - Assisting needy families so that children can be cared for in their own homes;
  - Reducing the dependency of needy parents by promoting job preparation, work and marriage;
  - Preventing out-of-wedlock pregnancies; and,
  - Encouraging the formation and maintenance of two-parent families.

### **III. Funding**

The PRC Program is funded entirely by PRC and designated TANF funds received from the Ohio Department of Job and Family Services (ODJFS). The PRC Program Plan establishes the operational parameters for the use of those funds.

#### **IV. Eligibility**

Eligibility for PRC Benefits and Services is dependent upon an eligible Assistance Group's (AG) demonstration and verification of their families presenting emergent or non-emergent need and whether SCDJFS determines that providing PRC benefits and services will substantially satisfy their presenting need.

PRC assistance is only available to AGs that have not received PRC assistance beyond the monetary cap during the 12-month PRC eligibility period (October 1<sup>st</sup> through September 30<sup>th</sup> of the following year). Families receiving assistance under OWF, Disability Assistance or other federal means tested programs are not precluded from receiving PRC funding if found otherwise eligible.

Under the PRC Program, an AG that meets the program's eligibility requirements may receive customized assistance, goods or services, as determined by the Scioto CDJFS. This program is designed to help people overcome immediate barriers to achieving or maintaining self-sufficiency and personal responsibility, thereby, preventing the need for ongoing public assistance.

For the PRC AG to be found eligible, the AG must satisfy ALL of the following:

- Be at or below 200% of the Federal Poverty Guidelines (FPG) in effect for the household size
- Be determined by Scioto CDJFS to be in immediate need
- The requested PRC service must either
  - Help a PRC AG member gain or retain employment; or
  - Help a PRC AG meet a non-deferrable (contingent) need caused by a situation beyond the participant's control such as: fire, natural disaster, illness, loss of employment, reduction of work hours, or documented family emergency.
- Be able to fund any additional costs over the \$500.00 monetary cap associated with the need
- Meet at least one of the four TANF Purposes in Section II of this plan
- Be able to function without additional agency help

It is the county's goal to approve or deny an application for PRC within five business days. The county will attempt to contact the AG by phone if verifications are needed to determine eligibility. If phone contact is attempted but the AG cannot be reached, the county will mail a request for verifications and allow the AG 10 days to return the required verifications. The PRC eligibility determination process consists of additional elements which are defined and described in the follow sections of this plan.

## **V. Failure to Prevent the Occurrence of the Emergency Need – Denial of Request**

Denial of the request for assistance may be appropriate in situations where no attempt by the AG has been made to prevent the occurrence of the emergency need and the AG cannot present evidence that they have experienced any extraordinary circumstances or expenses; such as, loss of employment income or loss of unearned income. Situations in which no attempt to prevent the occurrence of the emergency may include: a pattern of making no payment toward a financial obligation with the knowledge that making a minimal payment would prevent the occurrence of the emergency, quitting a job, or any other situation where the AG caused their own hardship.

A denial of PRC benefits or services under this section is not intended to be made routinely or without careful consideration of the AG's past-history as documented in the journal. A denial under this section requires supervisor approval. The PRC program is intended to assist families meet infrequent emergencies of a legitimate nature that could not have been avoided by the means available to the AG.

## **VI. Exploration of and Referral to Other Benefits or Services**

Anyone applying for PRC benefits or services will receive appropriate information (and referrals when warranted) for: Medicaid, Supplemental Nutrition Assistance Program (SNAP), Child Care and other SCDJFS administered programs which provide benefits and services that could assist the family to successfully transition to economic self-sufficiency.

## **VII. Community Resources**

Every effort must be made to explore the availability of resources within the local community prior to authorization of PRC. For the purposes of PRC, "community" could be defined to include areas beyond the county's boundaries. The PRC AG is required to apply for and utilize any program, benefit or support system that is readily and unconditionally available which may substantially satisfy or eliminate the emergent or presenting need.

Special consideration shall be given to timeliness and accessibility of community resources when dealing with an emergent need that threatens the health or safety of a family.

SDJFS personnel determining eligibility for PRC must remain aware of community resources that may be utilized to help meet the applicant's needs.

### VIII. Service Providers

Applicants applying for services to help with vehicle repair or purchase of tires must agree to utilize a vendor with which the SCDJFS has a signed "PRC Provider Agreement" to provide PRC services. A list of these vendors will be readily available to the PRC AG.

Service providers must agree to the payment processing conditions and procedures established by Scioto County.

### IX. Assistance Group

Except for the Kinship Caregiver Program (KCP), for the purposes of the SCDJFS PRC Program an eligible AG is defined as a household unit consisting of a **minor child** who lives with a custodial parent, legal guardian (ORC 2151); **or** legal custodian (ORC 2111); **or** specified relative (ORC 5107.01). No household unit is eligible unless they have a qualifying minor child or meet one of the following exceptions:

- A pregnant adult individual
- A noncustodial parent if ALL the requirements are met in Paragraph D below

#### A. **Minor Child** is defined as:

- An individual who has not attained the age of 18; or
- An individual who has not attained the age of 19, and is a full-time student in a secondary school or in the equivalent level of vocational/technical or home school (ORC 5108.01); or
- The unborn child of an expectant mother

#### B. **Specified Relative** are the following individuals who are the age of 18 or older:

1. Related by blood or adoption:
  - a. Grandparents, including grandparents with the prefix "great", "great-great" or "great-great-great"
  - b. Siblings
  - c. Aunts, uncles, nephews and nieces, including such relatives with the "great", "great-great", "grand" or "great-grand"
  - d. First cousins and first cousins once removed
2. Stepparents and step siblings
3. Spouses and former spouses of individuals name in (A) or (B) above

C. It may be determined that TANF funds cannot be used for children residing with non-related individuals. Children residing with legal custodians or legal guardians may be eligible for PRC.

**NOTE:** The PRC definition of “household unit” shall be used to determine AG size; however, SCDJFS may exclude anyone other than the mother, father, stepmother and stepfather of a minor child and the minor child’s minor siblings, including the stepbrother, stepsister, half-brother and half-sister, in order to qualify the family for PRC. **Additionally, others residing in the household unit may be added to the eligible AG headcount to qualify the family for benefits or services.**

D. A **non-custodial parent** who does not have their minor child currently residing in their household unit may meet the minor child requirements if:

- Their minor child who resides outside of their home lives in Ohio; **and**
- They have a current child support order

Additionally, the non-custodial parent must meet the following conditions:

- Reside in Scioto County
- Be otherwise eligible
- Limited to only those PRC benefits and services identified in the attached PRC Grid

**NOTE:** The non-custodian’s minor child, residing outside of the non-custodian’s household, may be counted concurrently in the AG size for both the non-custodian’s and custodian’s household units for PRC.

**X. Ineligible Assistance Groups and Individuals by Federal or State statute:**

- No benefits or services to an individual who is not a citizen of the United States or a qualified alien. (Section 5506(d) of Public Law 105-33)
- No benefits or services to an AG with a member who fraudulently received assistance under PRC or TANF/OWF until **full** repayment has been made. This also includes PRC or TANF/OWF Intention Program Violations (IPVs). (ORC 5101.83). A person to have fraudulently misrepresented residence in order to obtain assistance in two or more states is ineligible for 10 years.

**XI. Assistance Groups Ineligible per SCDJFS policy:**

- No benefits shall be issued by SCDJFS for an AG with a current member servicing an OWF, LEAP or SNAP sanction until the date the AG has taken the action(s) required to lift or otherwise cure the sanction or the sanction period has ended, whichever occurs first. The minimum sanction period does not have to be served to comply for SNAP. For this purpose, the date of ineligibility begins the date the sanction notice is mailed. A request for a State Hearing or County Conference shall have no effect. A sanction

imposed while a PRC application is pending shall have no effect on the current PRC application and benefit requested.

- No benefits shall be issued by SCDJFS to an AG with a current member who as a provider or as a consumer was determined to have fraudulently received benefits administered through SCDJFS until a plan for repayment has been established and then only if the AG remains in good standing with their repayment plan. Good standing and fraud shall be determined by the Benefit Recovery unit.
- No benefits shall be issued by SCDJFS to an unmarried parent under 18 not living in an adult supervised setting.
- PRC AGs who have utilized PRC funds in another county within the PRC Eligibility period as defined in Section IV of this plan will have that amount counted toward the current Scioto County maximum.

## **XII. Temporary Absence/Foster Care/Adoption Assistance/Court Placement**

A minor child who is temporarily absent from the physical household unit of their custodial parent, legal custodian, legal guardian or specified relative may be eligible and qualify the household from which they are absent for PRC; but only if the conditions in rule 5101:1-13-04 of the Ohio Administrative Code are met (ORC 5107.10). Additionally, if placed in the custody of the Public Children Services Agency/Child Protective Services there must be a current family reunification plan. They are neither an eligible member of the household unit in which they temporarily reside nor can their circumstances be used to make the household in which they temporarily reside categorically eligible.

A minor child placed in foster care is only eligible for TANF Purpose 1 and 2 if all conditions in the above paragraph are met and they are determined to be temporarily absent. The minor foster child is neither considered an eligible member of the foster family nor can their circumstances be used to make the foster care household in which they temporarily reside categorically eligible.

**A minor child placed in foster care in foster care is eligible for TANF purpose 3 and 4.**

A minor child receiving adoption assistance can neither be considered temporarily absent from the home they are absent from nor be considered an eligible member of the household receiving adoption assistance. Their circumstances cannot be used to make the family receiving adoption assistance categorically eligible. A minor child adjudicated and placed out of their home by the courts cannot be considered temporarily absent.

## **XIII. Shared Parenting/Shared Custody**

A minor child in a shared parenting or shared custody situation will be considered a member of the household unit in which the minor child spends more than 50% of their time.

When contested, the shared parenting information in OAC 5101:1-3-041 shall be used as a guide to arrive at a prudent decision.

#### **XIV. Financial Eligibility**

A. To be eligible for PRC, the AG must be under the 200% Federal Poverty Guideline (FPG). All gross income received by any member of the PRC AG during the 30 days preceding, up to and including, the date of application is considered when determining financial eligibility. Applicants are required to state the specific source of income on the PRC application.

SCDJFS will exclude all income that is normally exempt as reference in 5101:1-24-20 when determining eligibility for OWF, SSI and SNAP.

B. The total countable gross income, both earned and unearned, received by all adult members of the AG shall not exceed the FPG monetary cap for the eligible AG size (updated yearly) for the PRC benefit or service for which they are applying. There are no deductions or exclusions allowed from any type of countable income. The agency reserves the right to contact employers to verify questionable income.

C. Income which has terminated will not be considered. All income, both earned and unearned, received by a minor in the AG is NOT counted. Unearned income from a means-tested program which qualifies the AGA as categorically eligible, such as SSI or OWF is NOT counted. Employment incentives/allowances paid via TANF, OWF and PRC are NOT counted.

D. Written or verbal verification of income will be obtained. For any verification of income that is obtained verbally, by phone, through fax, etc., there must be a release of information signed and dated by the individual with the income. There must be clear documentation on the release and in the AG record concerning the name and position of the supplier of the information, the date the verification was obtained, the source, amount and frequency of receipt and the name of the SCDJFS individual who obtained the verification.

E. Special conditions exist for counting a minor in the AG size for purposes of the federal poverty test in the following situations: temporary absence, shared custody, shared parenting and noncustodial parents. Please see the respective topic for details.

F. If following are examples of unearned income which must be counted. These are examples only and are not meant to be an all-inclusive list:

- RSDI Benefits
- Alimony and child support (unless paid directly to minor)
- Veteran Administration benefits
- Workers' Compensation benefits
- Lump-sum payments received during the income budget period (including tax refunds)
- Unemployment benefits
- Pension and retirement benefits
- Strike benefits
- Investment income received on a regular schedule (dividends, interests)
- Rental income

H. Earned income is income in which the AG member must perform some type of labor or service to receive. The following are examples of earned income. This is not intended to be an all-inclusive list:

- Earnings from work as an employee
- Earnings from self-employment
- Strike benefits (if striker is required to perform services in order to receive them)

**NOTE:** When questionable, the Ohio Food Assistance Certification Handbook shall be used to define earned income.

## **XV. Categorically Eligibility**

Any PRC applicant already in receipt of OWF, SNAP or Covered Family and Children Medicaid is deemed to have met the enumeration requirements to qualify for PRC benefits or services.

## **XVI. General Rules**

### **A. Application**

1. Applicants must apply for PRC using a Scioto County PRC Application
2. Any applicant at the time of application must supply the agency with the following verifications for everyone in the AG:
  - a. Proof of age of the applicant
  - b. Social Security card of the applicant and the Social Security Number (SSN) must be provided for all members of the AG. The SSN shall be used for the purposes designated under Ohio Law and authorized under Section 1137 (a) of the Social Security Act.
  - c. Earned income
  - d. Verification of all unearned income
  - e. Statement from an employer if starting new employment
  - f. Verification of good cause if PRC AG member quit a job
  - g. Self-declaration of income applies to designated programs

### **B. Residency**

1. To receive PRC benefits or services, the recipient must be a resident of Scioto County. Residence is established by living in Scioto County voluntarily with the intent to remain permanently or for an indefinite period. Residence is also established by an applicant who is not receiving assistance from another county and entered Scioto County with a job commitment or seeking employment, whether or not currently employed.
2. AGs must have an independent living arrangement and must not be residents in a county home, city infirmary, jail or other public institution.

### **C. Estimates for Services**

1. All requests for car repair require two written estimates by recognized providers who are on the county's list of qualified PRC vehicle services vendors. \*\*If the vehicle is not drivable, one estimate is acceptable. Estimates for care repair must include a 30 day warranty.
2. Requests for rent, deposit and help to avoid utility disconnect must be accompanied by a court ordered eviction hearing notice or disconnect notice.
3. Requests for uniforms or other items necessary to retain employment must be accompanied by one written estimate for requested items.
4. Help with home repair must be accompanied by two written estimates.

### **D. Standard of Promptness**

1. When a PRC application is received, the processing individual shall promptly make an objective investigation (and record) of the AG's circumstances in order to ascertain the facts surrounding the emergent or non-emergent presenting need and to request such other information as may be required.
2. The PRC application is valid for 30 days from the date of receipt, unless otherwise indicated. An AG with an emergent need shall be given a minimum of five business days to provide any requested information. This period can be extended due to extenuating circumstances or may have to be less depending on the specific requirements to satisfy the emergent need; such as a shut-off notice deadline. To the extent feasible, eligibility or ineligibility for emergency benefits or services shall be determined as soon as possible after all required information is provided.
3. An AG with a non-emergent need shall be given a minimum of ten business days to provide any requested information. To the extent feasible, eligibility or ineligibility for non-emergency benefits or services shall be determined within ten business days after all required information is provided.

### **E. Notices**

1. All applicants shall be notified of their approval, enrollment and/or denial for benefits or services through the appropriate ODJFS approval and denial forms, unless written authorization is received from SCDJFS/ODJFS in a substitute format.
2. If it is determined that an application for PRC is approved, the ODJFS 404, "Notice of Approval for your Application for Assistance" shall be mailed or otherwise delivered. If it is determined that an application for PRC is denied, the ODJFS 7334, "Notice of Denial of Your Application for Assistance" shall be mailed or otherwise delivered.

### **F. Authorization of Payment**

1. Once eligibility for PRC is established and the provider of the services is willing to accept and has agreed to the methodology of payment, the SCDJFS director or designee will authorize and generate payment for the assistance, benefits and/or services. Authorization may occur at any time during a period beginning on the date that PRC is

approved and extending for 30 calendar days from that date. If authorization has not occurred by that time, the agency may require the G to reapply for assistance. As long as payment is authorized within the appropriate period, actual payment may be made to vendors according to the procedures in place at SCDJFS. All PRC payments are made by SCDJFS to the vendor.

2. In no situation will PRC be knowingly issued directly to a blood relative, including those of half-blood:
  - a. Parent, grandparent and other direct ancestors through great-great-great grandparent
  - b. Aunt or uncle
  - c. Nephew or niece
  - d. Brother or sister
  - e. First cousin
  - f. Current in-laws of those listed above
  - g. Spouse
  - h. Biological parent of an adopted child; or
  - i. Stepfather, stepmother, stepbrother or stepsister

#### **G. Fraudulent Receipt of PRC Benefits or Services**

The SCDJFS shall recover fraudulently obtained PRC benefits and services as overpayments as defined by SCDJFS Fraud Plan. The overpayment cannot exceed:

1. In the case of unreported resources, the amount total resources exceed the applicable resource caps; and
2. In the case of unreported income, the amount the total income exceeds the applicable Federal Poverty Guideline; and
3. In the case of an unreported eligibility element that renders the AG ineligible, all benefits and services issued **solely** to the ineligible individual during their period of ineligibility or the individual's portion if the benefit or service was for the assistance group.

#### **H. Hold Harmless**

It is understood that the ODJFS and their agents, the SCDJFS and their agents and the Board of County Commissioners and their agents shall be held harmless against any and all liability, loss, damage and/or related expenses incurred through the provision of the PRC program.

#### **I. Tracking Benefits and Services**

1. Data collection and tracking is required for SCDJFS and/or any service providers using PRC funds. The data to be collected and tracked is determined by Federal Guidelines, ODJFS Guidelines and by the limits imposed by SCDJFS.
2. Benefits and services for the PRC program are tracked either the PRC Reporting Took and/or CFIS.

#### **J. State Hearing/Administrative Appeal**

When a state hearing or administrative appeal under ORC Section 5101.35 is held regarding the PRC program, the hearing officer, the Director of ODJFS or the Director's designee shall base the decision in the hearing or appeal on the policies for the specific program, written statement of policies adopted under section 5108.08 of the revised code and any amendments adopted to the statement. (ORC 5108.09).

#### **K. Civil Rights**

The PRC program shall be operated in accordance with the Age Discrimination Act of 1975, the Americans with Disabilities Act of 1990, Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973 and any subsequent amendments. There shall be no discrimination against any person(s) because of race, color, sex, family status, religion, age, disability or national origin and the right to and method of appeal will be made available to all persons served under PRC.

#### **L. Confidentiality**

PRC applicants, recipients and their records are confidential and shall be afforded the appropriate protections under the Ohio Revised Code and the applicable federal laws.

#### **M. Voter Registration**

In accordance with the National Voter Registration Act (NVRA) of 1993, the Voter Registration application and Voter Declination – Notice of Rights document shall be made available to persons who are applying for, receiving assistance from or participating in the PRC program.

#### **Restrictions on Medical or Other Services**

No benefit or service can be provided under the PRC program if it is a Medicaid covered service regardless of an individual's eligibility or non-eligibility for Medicaid. PRC cannot be used for the following:

1. Dental services
2. The purchase of health insurance
3. Eyeglasses
4. The payment for pre-employment physicals
5. The payment for pre-employment drug screenings
6. The payment for pre-employment background checks

**NOTE:** This list is not all inclusive. Additional benefits or services are continuously added or removed by State and Federal policies.

#### **O. Restrictions on Child Care Services**

PRC funds may not be used for the provision of childcare services. The Kinship Caregiver Program is the only exception to this section. Ohio has a statewide childcare program with income and eligibility requirements established in state law and Ohio Administrative Code rules. ODJFS reserves the right to hold the TANF funds dedicated to childcare services at the state level to maximize every opportunity to expand services.

**NOTE:** This list is not all inclusive. Additional benefits or services are continuously added or removed by State and Federal policies.

#### **P. IV-D, IV-E and Foster Care Restrictions**

Although counties have considerable flexibility to expend PRC funds consistent with the purposes of TANF, 41 U.S.C. 602 requires that the state certify that it will continue to operate the child support enforcement, foster care and adoption assistance programs under Titles IV-D and IV-E of the Social Security Act.

- Additional restrictions exist for child welfare services that are available under FACSIS.
- PRC use for PCSA services has additional specific limitations which are currently identified in OWF/PRC Guidance Letter 25.
- PRC cannot be used for CSEA IV-D activities. Some activities with the noncustodial parent are permitted, such as job readiness, etc.

**NOTE:** This list is not all inclusive. Additional benefits or services are continuously added or removed by State and Federal policies.

#### **Q. Educational Restrictions**

Basic Education – TANF dollars, including PRC funds of any kind, cannot be used for basic educational functions that are the responsibility of the Department of Education, such as, but not limited to, hiring a teacher, etc.

**NOTE:** This list is not all inclusive. Additional benefits or services are continuously added or removed by State or Federal policies.

### **XVII. Scope of Covered Services**

**Direct Services** (also known as “hard” services) are any benefits and/or services that have a direct cash value to the PRC applicant. Such benefits must be designed to deal with a specific crisis situation or episode of need. Direct Services are not intended to meet recurrent or ongoing needs and must not extend beyond four months.

**Indirect Services** (also known as “soft” services) are any benefits and/or services that DO NOT have a direct cash value to the PRC applicant. Indirect Services may be provided on an ongoing basis.

#### **A. Work Related Expenses/Work Support Services (Direct Service)**

Incidental expenses necessary for a participant to participate in a work activity. Examples: (not inclusive) uniforms, shoes, safety equipment, car seats, one month car insurance, one month car payment if payment will forestall repossession and other items necessary to accept or retain employment. Limit of three work outfits or uniforms. Included in the \$500.00 yearly cap.

#### **B. PRC Vehicle and/or Maintenance (Direct Service)**

1. Eligibility for vehicle and/or maintenance through the SCDJFS shall meet all criteria established and, additionally, not exceed those stipulations as provided within the SCDJFS PRC Plan. Maximum cost of vehicle repair is limited to \$500.00.
2. To be eligible for PRC vehicle repair assistance:
  - a. The applicant must provide evidence of liability insurance.
  - b. The applicant must provide evidence of ownership, a valid drivers' license and valid auto insurance.
  - c. If the AG owns more than one vehicle, repair authorization will not be approved unless the other vehicle is being used by other household members for employment or education purposes.
  - d. Total cost of repair cannot exceed \$500.00 and not exceed the value of the vehicle.
  - e. Applicant must be employed at least 24 hours per week, participating in WEP or receiving unemployment compensation.
  - f. Applicants must obtain two estimates for repairs unless the vehicle is not drivable. In this situation, one estimate is acceptable.
  - g. Repairs must be made by a qualified service center that has signed a provider agreement with the SCDJFS.
3. Items covered in vehicle maintenance repair:
  - a. Battery may be replaced if it is determined that the battery is no longer functional.
  - b. Tires may be replaced if it is determined the tires currently on the vehicle pose a serious risk to the driver.
  - c. Broken fan belts, alternator, etc.
  - d. Items which are essential to the safe operation of a vehicle or required by law.
  - e. Headlights, brakes and/or windshield wiper arms.
  - f. Transmission and/or fuel pump.
  - g. Muffler and/or tailpipe
  - h. Engine or drive train.
  - i. Electric or electronic controls needed for essential operation of the vehicle.
  - j. Essential items as they relate to safety issues.
4. Items not covered in vehicle repair:
  - a. Elective or non-essential items such as: radios, speakers, upholstery, paint, body and/or rust repair, etc.
  - b. Routine maintenance items such as air filters, motor oil, transmission fluid, coolant (replacement of items are acceptable if a result of transmission repair/replacement or major engine repair).
  - c. Gasoline
  - d. Air conditioning system.
5. Repairs shall only be made for "same value replacement" and such repairs shall not serve as an enhancement to the vehicle's original equipment.

**C. Work Preparedness and Benefits (Direct Service)**

Testing for state licenses, board certifications, commercial driver's license and work readiness training. There is a \$500.00 limit which is included in the cap.

**D. Job Retention Bonus (Direct Service)**

Minimum of 35 hours weekly, continuous employment is required. Bonus will be in the form of cash for clients no longer receiving OWF. The bonus is awarded to applicants who were receiving OWF at the time of their employment. Eligibility is restricted to once in a three-year period:

- 1 month        \$100
- 3 months      \$200
- 6 months      \$300
- 12 months     \$500

**E. Relocation Assistance (Direct Service)**

Moving expenses, utility and rent deposits for employed individuals. Applicants must have gained full time employment located in another county. Employment and services requested must be verified. Payments will be issued to service providers not directly to applicants.

**F. Transportation (Direct Service)**

Provide up to \$100.00 of gasoline for newly employed individuals included in the \$500.00 cap. Provide \$20.00 of gasoline for eligible individuals with a job interview out of town.

**G. Shelter Expense (Direct Service)**

1. Rent/Deposit

- a. Applicant must have experienced a significant loss of income in the last 30 days which directly caused the emergent need. The loss of income must be equal to or greater than the need.
- b. Eviction – A copy of a court ordered eviction notice/schedule is to be retained in the PRC packet. The PRC payment must be an amount sufficient to prevent the eviction. The landlord must agree to accept the payment and the applicant must be able to remain in the property. Once per year payment up to \$500.00 included in the \$500.00 cap. In addition, the PRC AG must be able to verify how the AG will continue to meet rental payments. PRC requests for rent/deposit will be denied if the PRC AG cannot meet its monthly obligations.
- c. Uninhabitable Conditions – A once per year payment of up to \$500.00 can be approved if their home is uninhabitable due to natural or chemical disaster or inhabitable conditions as certified by city, county, township or state agency that has the authority to declare a residence condemned. The verification must be retained in the case record. In addition, the PRC AG must be able to verify how the AG will meet the rental payments. PRC requests for rent/deposit will be denied if the PRC AG cannot meet its monthly rent obligations. Landlords must

sign a repayment agreement to refund any unused deposit payments. The \$500.00 payment is included in the \$500.00 cap.

- d. Other situations – May include:
  - i. A move to subsidized housing
  - ii. Moving from a homeless shelter to permanent housing
  - iii. Other situations as approved by the director
- e. All rent/deposit payments are limited to a once per year payment up to \$500.00 which is included in the \$500.00 cap.

## 2. Mortgage Payments

PRC funds can be authorized to families, who have had a significant loss of income, for delinquent payments owed on the home mortgage. The AG member making the application must be the adult responsible for the purchase of the home and must be living in the home at the time of application. PRC funds must forestall foreclosure on the home. The PRC packet must contain written documentation that the payment will forestall foreclosure. Payments may be authorized up to \$500.00 and is included in the yearly \$500.00 cap. No PRC payments toward delinquent or current property taxes are permitted. No court costs or late payment charges are permitted.

## 3. Utilities

PRC payments can be made to avoid a disconnection or to connect service to a residence occupied by the applicant. The applicant must have incurred a significant loss of income that directly caused the emergent need. The applicant must also have a disconnect notice. The PRC payment must be sufficient to forestall the disconnection. The applicant must be able to verify how the AG will continue to meet their utility payments. The PRC application will be denied if the AG cannot verify how they will continue to meet the payments. The loss of income must be equal to or greater than the emergent need. The applicant must enroll in PIP before the PRC can be approved. Heating bills will NOT be paid during HEAP season which is November 1 through March 31 of each year.

- Basic phone services can be paid if the phone is needed for employment such as someone working on call. Long distance charges and cell phone bills are not covered.
- The maximum yearly total payment shall not exceed \$500.00. This payment is included in the \$500.00 cap.

## 4. Home Repair or Major Purchase

Owner occupied property only is eligible. Mobile home repair will be considered if located on property owned by the applicant. Water, gas and/or sewer tap, gas and/or water lines, repair to basic structure (plumbing, roof and or walls), and purchase and/or repair of furnace and/or water heater.

## **I. Disaster Assistance (Direct Service)**

Benefits to assist with damage or loss sustained as the result of natural disaster upon declaration by the Governor of Ohio or the President of the United States. Eligibility for Disaster Assistance is contingent upon funding specifically made available to counties in which disasters are declared.

There are two categories of individuals served under Disaster Assistance. TANF-PRC Funds for Families and Adult Non-TANF Funds for Elderly and Disabled. The criteria for each group is listed below:

### **TANF-PRC Funds for Families**

1. Under 200% of FPL
2. Resident of Scioto County
3. Minor child or pregnant woman in home
4. Household cannot receive both Adult and PRC benefits.
5. Maximum payment of \$750.00 for combination of services.

### **Adult Non-TANF Funds for Elderly and Disabled**

1. Under 200% of FPL
2. Resident of Scioto County
3. Must be 55 years old or older OR must be childless and in receipt of disability payments such as SSI, VA Disability, PERS Disability, Railroad Disability, Black Lung, etc.
4. Adversely affected by the emergency
5. Maximum payment of \$750.00 for combination of services.

## **J. TANF Summer Youth Employment Program (Direct Service)**

**The program will operate from May 1 through September 30 each year that funding is available.**

**TANF Purpose** – The TANF Summer Youth Employment Program meets the first two purposes of TANF:

To give assistance for needy families so that the child(ren) may be cared for in their homes or the home of relatives.

To end dependence of needy parents on governmental benefits by promoting job preparation, work and marriage.

1. Wage subsidies paid for the purpose of enabling low income TANF-eligible Ohio youth to gain valuable work experience while earning a paycheck to help meet their basic needs. Summer employment programs offer the opportunity for youth to develop a work history and have a current reference from an employer. The Summer Youth Employment Program shall serve persons from TANF-eligible families which are:
  - Youth ages 14 – 18, enrolled in secondary school and the youth is a minor child in a needy family
2. The youth served may be living with non-custodial parents/caregivers if the household has income below the 200% federal poverty level **and** has a minor child.
3. All applicants must complete the TANF Summer Youth Employment Program Application. Self-attestation shall be accepted for income and family relationship for the Summer Youth Program. The application can be found in the addendum of this plan.
4. SCDJS will pay a third-party (subrecipient) to operate the program. Each applicant will complete TANF Summer Youth PRC application that will be forwarded to SCDJFS for PRC eligibility screening and approval or denial.
5. The third party will be responsible for recruitment of youth for this employment program, serving eligible persons from a TANF-eligible family and promote job preparation and work experience.
6. The subrecipient will submit a monthly invoice for reimbursement of actual allowable costs related to employment of the summer youth participant.
7. The youth or household member who is under a penalty for non-compliance with the terms of their TANF assistance are not eligible for the Summer Youth Program.

#### **K. Child Welfare Services and Benefits (Direct Services)**

PRC payments are limited to the exact amount that is required to meet the presenting need up to the amounts listed below for each type of assistance received within the timeframes described. Verifications of amounts owed must be original bills or invoices. Scioto County Child Protective Services will utilize the TANF Child Welfare Kinship Navigator Self-Declaration Application to determine eligibility for all Kinship and Child Welfare Services for PRC purposes.

1. **Kinship Navigator Services** are designed to provide information, referral and supportive services to relatives, legal guardians or caregivers of minor children who are not able to be cared for by their biological parents or stepparents. Kinship services can be provided to those who are responsible for the day-to-day care and well-being of a child or children on a long-term basis.

Kinship Navigator Services meet TANF purposes number 1.

**AG definition of Kinship Navigator** – A child under age eighteen (18) or age eighteen and still attending high school or its equivalent and immediate household members which include the relative, legal guardian or caregiver, spouses of the relative, legal guardian or caregiver and all children for whom the caregiver is responsible for and living in the household. Other adult household members and children for who the relative, legal guardian and caregiver is not responsible will not be consider part of the assistance group.

**Eligibility:** The AG must be at or below the 200% federal poverty level. Eligibility is based on a Self-Declaration Application found in the Addendum section of this plan.

**Disqualifiers:** Any one of the following assistance group circumstances will deem the applicant ineligible for services:

- The applicant is not a citizen or legal alien of the United States. (Ineligible aliens may apply on behalf of their eligible children.
- Any members of the assistance group who are fugitive felons or probation/parole violators.

## 2. TANF Child Welfare

**AG definition for TANF Child Welfare** – A child under the age of eighteen (18) or age eighteen and still attending high school or its equivalent and immediate family members in the household. Immediate family members include biological parents and stepparents, designated guardians or caregivers, biological and step siblings living in the household. Other adult household members will not be considered part of the assistance group.

TANF Child Welfare services meet TANF purpose number 1.

**Eligibility:** The AG must be at or below the 200% federal poverty level. Child welfare service activities must meet a documented and specified purpose for the well-being of a child or children within the assistance group or result in the return of the child or children to the household. Eligibility is based on the Self-Declaration Application found in the Addendum of this plan.

**Disqualifiers:** Any one of the following assistance group circumstances will deem the applicant ineligible for services:

- The applicant in not a citizen or legal alien of the United States. (Ineligible aliens may apply on behalf of their eligible children.)
- Any members of the assistance group who are fugitive felons or probation/parole violators.

**Eligible TANF Child Welfare Services** – Eligible services for TANF/PRC Child Welfare include preservation, reunification, respite and community outreach services. This includes costs associated with the following activities and services: assessing/screening; determining needs; providing information; making referrals;

arranging for, planning for, providing, supervising services; and assessing results. The services include, but are not limited to, case management and other supportive services and direct services. The following is a non-comprehensive list of services also allowable TANF Child Welfare services under the Scioto County PRC Plan:

**a. Emergency Housing**

Providing case management and supportive services as it relates to emergency housing needs may include the following: making referrals, arranging and planning for emergency housing needs and services.

**b. Children Services Case Management**

Case management services may include the following: making referrals and arranging for services, planning, supervising and assessing results of services provided to families and children.

**c. Domestic Violence Services**

Domestic violence services are defined as providing direct assistance to victims of domestic violence and their dependents for the purpose of preventing further violence. Services may include but are not limited to the following: meals, transportation, housing referral services, legal advocacy, counseling and support services. Other eligible services include providing case management or supportive services such as: making referrals; arranging and planning for care or services; planning, supervising and assessing results of care as it relates to domestic violence services.

**d. Home Based Services**

Home Based Services are those services provided to families in their own home or community which are intended to either preserve the family by reducing the risks or achieve successful reunification from out of home placements. Services can be provided to help meet basic human needs, examples include case management functions related to arranging or obtaining financial assistance, clothing, housing, household management or repairs, childcare and transportation services. Home Based Services also include direct education and counseling, referral and linkage to other community services and case management.

**e. Parent Education Services**

Parent education is a teaching process to assist a parent, guardian or custodian in developing the basic skills necessary to provide adequate care and support to a child in their own home. This also includes case management, making referrals to, arranging for services, planning, supervision and assessing results of Parent Education Services.

**f. Respite Care Services**

Respite Care Services are designed to provide temporary relief to child-caring functions which may include, but are not limited to, crisis nurseries, day treatment and volunteers or paid individuals who provide such services within the home. Eligible services include case management, making referrals, arranging for services, planning, supervising and assessing results of respite care activities and the provision of respite care. Respite Care Services may be provided to the custodial family. This service cannot be used for household which meet the definition of a specified relative who is the caretaker of the child. These households must apply for the Kinship Caregiver Program.

**g. Transportation Services**

Transportation Services include arranging for or providing transportation to and from needed services, resources and facilities. It may include the provision of escort assistance. Transportation provided to parents and/or children for visits are eligible as well as arranging, scheduling and monitoring visits.

**The following services are not PRC eligible for Child Welfare Services**

- Foster care and out of home maintenance payments
- Juvenile justice services
- Any costs associated with children who do not live with a custodial parent or other adult caretaker relative, legal guardian or legal custodian (except for the 180-day provision or Federal TANF purposes numbers 3 and 4.

- 3. Kinship and Child Welfare Conditional Services** – non-recurrent, short-term direct services designed to address a specific crisis or an episode of need for the purpose of family preservation, reunification, kinship, respite and community outreach. Examples include, but are not limited to rent, security deposits, utility deposits and payments, household items and transportation.

**AG Definition for Child Welfare Conditional Services:** A child under age eighteen (18) or age eighteen and still attending high school or its equivalent and immediate family members in the household. Immediate family members include biological parents and stepparents, kinship caregivers who have legal custody of a minor child, biological and stepsiblings in the household. Other adult household members will not be considered part of the assistance group. For pregnant women in their third trimester of pregnancy, each fetus is considered a separate family member.

Kinship and Child Welfare Conditional Services meet TANF purpose number 1.

**Eligibility:** The AG must be at or below the 200% federal poverty level. Eligibility is based on the Self-Declaration Application located in the Addendum section

of this plan. Families must work with Child Protective Services or meet the definition for kinship services and in need of services to reunite, maintain or care for children in their home.

**CAP:** Kinship and Child Welfare Conditional are not to exceed \$5,000.00 per family.

**Disqualifiers:** Any one of the following AG characteristics will deem the applicant ineligible for services:

- The applicant is not a U.S. citizen or legal alien (ineligible aliens may apply on behalf of their eligible children)
- Any member of the AG who are fugitive felons or probation/parole violators

#### **4. Kinship Caregiver Program**

Meets TANF Purpose One – Assisting needy families so that children may be cared for in their own homes or in the home of relatives.

##### **Program Description**

The Kinship Caregiver Program (KCP) is designed to support kinship caregivers by providing reasonable and necessary relief of child caring functions so that kinship caregivers can provide and maintain a home for a child in place of a child's parents.

Reasonable and necessary relief of child caring functions are:

- Providing respite care for the kinship caregiver
- Family Support services and activities that enable kinship caregivers to provide and maintain a home for a child placed in their care
- Costs and services related to employment, training, job search and readiness focused around childcare
- Any other kinship child caring costs and services. These services include, but are not limited to clothing, beds, bedding, school supplies, etc. for the child.

Kinship Caregivers caring for children in custody of Scioto County Child Protective Services are only eligible to apply for childcare or respite care services under KCP. Caregivers caring for children in custody of Scioto County Child Protective Services may receive additional services through Child Protective Services own programs.

If the Kinship Caregiver is seeking to apply for assistance with childcare, the caregiver must make application for Publicly Funded Childcare first. If ineligible for Publicly Funded Childcare, application may be accepted for services through the Kinship Caregiver Program.

## Eligibility

- a. The Kinship Caregiver must use a separate PRC Kinship Caregiver Application for each child in their care...only one child per application.

As stated in ORC 5107.02, the Kinship Caregiver must be eighteen years of age or older and is caring for a child in place of a child's parents AND on of the following:

- Grandparents, including grandparents with the prefix "great", great-great" or "great-great-great"
- Siblings
- Aunts, uncles, nephews and nieces, including such relatives with the prefix "great", "great-great", "grand" or "grand-great"
- First cousins and first cousins once removed
- Stepparents and stepsiblings of the child
- Spouses and former spouses of individuals named in the first and second division of this section

- b. TANF eligibility requirements for KCP are as follows:

- For the Stabilization Services, the assistance group shall include only the minor child residing with a kinship caregiver
- For the Caregiving Service, the assistance group shall include the minor child residing with a kinship caregiver and one adult kinship caregiver. If more than one adult kinship caregiver lives in the household, only one of the adults shall be including in the assistance group.
- Each member of the assistance group shall:
  1. Have applied for a social security number
  2. Be a citizen of the United States citizen or non-citizen national or qualified alien as those terms are defined in rule 5101:1-2-30 of the Ohio Administrative Code
  3. Not owe any of the cost of fraudulent TANF assistance paid to the individual; and
  4. Have been afforded the opportunity to register to vote (when applicable)

- c. **Two Types of Services under KCP**

- **Stabilization Services**

Stabilization services shall be designed to transition the child into and maintain the child in the home of the kinship caregiver. Examples of stabilization benefits include, but are not limited to, childcare services **not to exceed four months** (must apply for and be ineligible for publicly funded

childcare before childcare can be paid under KCP); or incidentals incurred when taking on the responsibility of caring for a child unexpectedly (i.e.: purchases for basic needs such as but not limited to cribs/beds, etc.)

Covering the costs of custody transfers to relative/kinship families will prevent the child(ren) involved from entering the foster care system. The total cost of legal fees associated with the transfer of custody cannot exceed \$1,000.00 per child per FFY. The \$1,000.00 will be included in the Kinship \$3,000.00 cap. **ALL** parties must agree to the custody transfer. Contested custody disputes are **NOT** eligible for this service.

- **Caregiving Services**

Childcare for more than four months is permissible under the Caregiving Services provided the kinship caregiver or other member of the AG is participating in one of the following approved activities:

1. Paid employment on a full-time or part-time basis
2. A training or education activity that prepares the caretaker for paid employment
3. Participating in one or more work activities as a condition of eligibility for either Ohio Works First (OWF) or the Supplemental Nutrition Assistance Program (SNAP)

The AG must apply for and be ineligible for publicly funded childcare before childcare can be paid for under KCP. The assistance group shall inform the county agency within ten days if no member of the assistance group is participating in an approved activity or if the child is no longer residing with the kinship caregiver.

- d. The total amount paid for all combined services for each child during the Federal Fiscal Year (FFY) cannot exceed \$3000.00. The FFY runs from October 1 through September 30 each year.
- e. If eligible, the application is certified for a maximum of 12 months or until the end of the FFY whichever occurs first. All AGs must reapply with each new FFY.

The Scioto County Department of Job and Family Services agrees to implement the Scioto County Prevention, Retention and Contingency Plan, with Addendums, as written.



Director, Scioto Co. JFS

Date

# **Addendum Section**

**Scioto County Department of Job & Family Services  
PREVENTION, RETENTION, AND CONTINGENCY  
APPLICATION**

Agency Use Only	
Case # _____	
Approved _____	
Denied _____	BSN

Name & Address of Applicant: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Phone Number: \_\_\_\_\_ Secondary Phone Number: \_\_\_\_\_

**VOTER REGISTRATION APPLICATION ATTACHED - ASSISTANCE AVAILABLE**

If you are not registered to vote where you live now, would you like to register to vote?  
 If you do not check either box, you will be considered to have decided not to register to vote at this time.

YES, I want to register to vote.                       NO, I do not want to register to vote

1. What PRC services are you applying for?

- |                                                                                                                                                                          |                                 |                                                                                                                                                                                                                                                                                                                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>_____ <b>Vehicle repair</b><br/>                 List all vehicles<br/>                 In household: _____<br/>                 _____<br/>                 _____</p> | <p>Mandatory Verifications:</p> | <p>1. Income for last 30 days or employer's statement for new employment<br/>                 2. Driver's license<br/>                 3. Vehicle title and proof of insurance<br/>                 4. Two estimates from approved vendors (see attached Vehicle Repair Vendor List)</p>                              |
| <p>_____ <b>Rent/Deposit</b></p>                                                                                                                                         | <p>Mandatory Verifications:</p> | <p>1. Income for last 30 days or employer's statement for new employment<br/>                 2. ID<br/>                 3. Landlord Statement/Eviction Notice</p>                                                                                                                                                    |
| <p>_____ <b>Utilities</b></p>                                                                                                                                            | <p>Mandatory Verifications:</p> | <p>1. Income for last 30 days or employer's statement for new employment<br/>                 2. ID<br/>                 3. Original Utility Bill</p>                                                                                                                                                                 |
| <p>_____ <b>Home Repair</b></p>                                                                                                                                          | <p>Mandatory Verifications:</p> | <p>1. Income for last 30 days or employer's statement for new employment<br/>                 2. ID<br/>                 3. Proof of your ownership of Property<br/>                 4. Statement from Home Owner's Insurance on coverage of home damage<br/>                 5. Two estimates for cost of repair</p> |
| <p>_____ <b>Uniforms or<br/>                 Employment<br/>                 Related Items</b></p>                                                                       | <p>Mandatory Verifications:</p> | <p>1. Income for last 30 days or employer's statement for new employment<br/>                 2. ID<br/>                 3. One estimate for cost of required items</p>                                                                                                                                               |
| <p>_____ <b>Other</b><br/>                 Please specify _____</p>                                                                                                      | <p>Mandatory Verifications:</p> | <p>1. Income for last 30 days or employer's statement<br/>                 2. ID</p>                                                                                                                                                                                                                                  |

2. I need help because (please check all that apply)

3. This payment will allow me to keep my job, go to work, or to participate in a mandatory work activity.  YES  NO

4. Someone in the household lost employment or had their hours cut within the last 30 days.  YES  NO

5. The need was caused by fire, flood, or natural disaster.  YES  NO

6. I am currently under a Work Activity Sanction for OWE or FA.  YES  NO

7. Complete the chart below for anyone living in your household, including yourself.

Name	Relationship to Applicant	SSN	Age	LIST ALL income received. (includes child support, SSI and Social Security or employer)	Gross Monthly Income Amount
	SELF				

8. Is anyone in your household pregnant?  YES  NO  
If yes who? \_\_\_\_\_

9. If the applicant has a minor child not living with you and the applicant is court ordered to pay child support, give child's name, address and social security number.  
\_\_\_\_\_  
\_\_\_\_\_

By signing this application, I give the Scioto County Department of Job and Family Services permission to verify and obtain any information necessary to determine my eligibility.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

Revised 5/2010

## Application for Work Retention Benefits

Name and Address of Applicant

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>OFFICE USE ONLY</b>
Date Received _____
SSN: _____
Case Number: _____
Approved <input type="checkbox"/> Denied <input type="checkbox"/>

**(You must be receiving OWF benefits in  
Order to be eligible for the retention  
Bonus money)**

Telephone numbers where you can be reached \_\_\_\_\_, \_\_\_\_\_.

<u>Name of household member</u>	<u>Relationship to applicant</u>	<u>Age</u>	<u>Source of income</u>
---------------------------------	----------------------------------	------------	-------------------------

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

What day and month did your employment begin? \_\_\_\_\_

Have you verified your first day of employment? Yes \_\_\_\_\_ No \_\_\_\_\_

For which bonus are you now applying:

- \_\_\_\_\_ 1 month
- \_\_\_\_\_ 3 month
- \_\_\_\_\_ 6 month
- \_\_\_\_\_ 1 year

Has this employment been continuous? \_\_Yes \_\_\_\_\_ No \_\_\_\_\_

You can only receive the employment retention bonus money/certificates as long as your employment has been continual. (i.e. No job quits).

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**PRC WORKSHEET**

**APPLICANT:** \_\_\_\_\_ **SSN:** \_\_\_\_\_ **AGE:** \_\_\_\_\_  
**CO-APPLICANT:** \_\_\_\_\_ **SSN:** \_\_\_\_\_ **AGE:** \_\_\_\_\_  
**Street Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**Case #:** \_\_\_\_\_ **Date of Application:** \_\_\_\_\_

**Filemaker - PRC amount available:** \$ \_\_\_\_\_ **30-day budget period:** \_\_\_\_\_ to \_\_\_\_\_

Source of Income	Amount Available in Budget Period	Verification
1. _____	\$ _____	_____
2. _____	\$ _____	_____
3. _____	\$ _____	_____
4. _____	\$ _____	_____

**AG Size:** \_\_\_\_\_ **Total Household Income:** \$ \_\_\_\_\_ **200% Standard:** \_\_\_\_\_

**PRC Approved**

Service	Date	Amount	Name and Address of Vendor

**PRC Denied (check one)**

- |                                                                                  |                                                                           |
|----------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| <input type="checkbox"/> 1 No Employment in HH                                   | <input type="checkbox"/> 10 Client caused own circumstance                |
| <input type="checkbox"/> 2 No Children in HH & No Child Support                  | <input type="checkbox"/> 11 Individual has sanction or Fraud CP           |
| <input type="checkbox"/> 3 Income Exceeds Standard                               | <input type="checkbox"/> 12 Repairs exceed value of car                   |
| <input type="checkbox"/> 4 More than one working auto in HH                      | <input type="checkbox"/> 13 No eviction notice                            |
| <input type="checkbox"/> 5 Not a covered service under PRC                       | <input type="checkbox"/> 14 AG cannot meet future payments                |
| <input type="checkbox"/> 6 Verification not received within 30 days              | <input type="checkbox"/> 15 No loss on HH Income in past 30 days          |
| <input type="checkbox"/> 7 Voluntary Withdrawal                                  | <input type="checkbox"/> 16 Amount of lost income is not = or > than need |
| <input type="checkbox"/> 8 Request exceeds PRC Annual Limit                      | <input type="checkbox"/> Other _____                                      |
| <input type="checkbox"/> 9 Request in excess of PRC & Payment will not meet need |                                                                           |

Signature of EW \_\_\_\_\_ Date \_\_\_\_\_ Signature of Supervisor \_\_\_\_\_ Date \_\_\_\_\_

### PRC Provider Agreement

As of July 1, 2012, \_\_\_\_\_ is entering into an agreement with the Scioto County Department of Job and Family Services (SCDJFS) to provide car repair services to eligible applicants for the Scioto County Prevention, Retention, and Contingency Program. This agreement shall be in effect for one year from the date specified above.

\_\_\_\_\_ agrees to the following terms of the agreement.

- 1. Estimate:** Provide a free estimate of the necessary repairs needed to insure the vehicle is in a safe, operational condition at the request of the owner. (See attached list of covered repairs.)
- 2. Guarantee:** Guarantee any repairs for 30 days. Guarantee must include parts and labor.
- 3. Invoice:** Submit detailed monthly invoices to the SCDJFS, identifying the client, work completed and the cost. A receipt signed by the owner of the vehicle must accompany the invoice.
- 4. Payment.** SCDJFS will make payment or provide a written denial within 30 days of receipt of the invoice. The provider shall release the vehicle to the owner upon completion of the work and is in receipt of an authorization for payment from SCDJFS.
- 5. Termination:**
  - (1) This agreement may be terminated upon thirty day written notice by either party.
  - (2) This agreement may be terminated immediately in the event there is a loss of funding, upon discovery of noncompliance with any federal or state law, rules, regulations or violation of any provisions of this agreement.
- 6. Allowable Cost:** SCDJFS will only remit for cost prior authorized by the agency.
- 7. Independent Contractor:** Providers and employees of the Provider will act in performance of this agreement in an independent capacity, and not as officers or employees or agents of the State of Ohio or the SCDJFS.
- 8. Duplicate Billing:** Provider warrants that claims made to SCDJFS for payment for services shall, be for actual services rendered to eligible individuals and do not duplicate claims made by Provider to other sources of public funds for the same project.
- 9. Financial Records:** The Provider shall maintain independent books, records, payroll, other supporting documents, income verifications, accounting procedures and practices which sufficiently and properly reflect all direct and indirect costs of any nature expended in the performance of this agreement. Such records shall be subject to all reasonable

time for inspection, review, or audit by duly authorized federal, state, SCDJFS personnel. Such records shall also be subjected to individual or entity selected for the audit required by Article 10 of this agreement.

**10. Responsibility for Audit Exceptions:** Provider agrees to accept responsibility for receiving, replying to, and/or complying with any audit exception by appropriate state or federal audit related to the provisions of this agreement.

**11. Liability Requirements (other than audit):** Provider agrees, to the extent permissible by law, to hold the SCDJFS harmless from liability, suits, losses, judgments, damages or other demands brought as a result of its actions or omissions in performance of this agreement.

**12. Breach and Default:** Upon breach or default of any of the provisions, obligations, or duties embodied in this agreement, the parties may exercise any administrative, contractual, equitable, or legal remedies available, without limitations. The waiver of any occurrence of breach or default is not a waiver of such occurrence, and the parties retain the right to exercise all remedies mentioned herein.

**13. Confidentiality:** The Provider agrees that they shall not use any information, systems or records made available to either party for any purpose other than to fulfill the obligations specified herein. The Provider shall be bound by the confidentiality regulations of the SCDJFS and all applicable state and federal confidentiality laws.

**14. Civil Rights:** SCDJFS and provider agree that in the performance of this agreement or in the hiring of any employees for the performance under this agreement, there shall be no discrimination against any client or any employee because of race, sex, religion, national origin, or any other factor as specified in Title VI of the civil Rights Act of 1964 and subsequent amendments. It is further agreed that the Provider will comply with all appropriate federal and state laws regarding such discrimination and the right to any method of appeal will be made available to all persons served under this agreement. Any Provider found to be out of compliance with this Article may be subject to investigation by the Office of Civil Rights of the Department of Health and Human Services and termination of this agreement.

**15. Indemnity and Insurance:**

**(A) Indemnity:** Provider agrees that it will, at all times during the existence of the agreement, indemnify and save harmless the SCDJFS, the Ohio Department of Job and Family Services, and the Scioto County Board of County Commissioners against any and all liability, loss, damage, and/or related expenses incurred through the provision of this agreement.

**(B) Insurance:** Provider agrees to contract for such insurance as is reasonably necessary to adequately secure the persons and estates of eligible individuals against reasonable foreseeable torts which involve injury or death.

**16. Accessibility to the Public:** SCDJFS and Provider agree to make all reasonable efforts to allow public access to the program by providing convenient hours for public contact, and adequate availability of staff for public inquirers.

**17. Accessibility to the Handicapped:** The provider agrees as a condition of the agreement to comply with Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), all requirements imposed by the applicable HHS regulations (45 CFR, Part 84) and all guidelines and interpretations issued pursuant thereto. Any Provider found to be out of compliance with this Article may be subject to investigation by the Office of Civil Rights of the Department of Health and Human Services and termination of this agreement.

**19. Amendment of Agreement:** This agreement may be modified or amended provided that any such modification or amendment is in writing and is signed by the principles of both parties. It is agreed, however, that any amendments to laws, rules, or regulations cited herein will result in the correlative modification of the agreement without the necessity for executing written amendment.

**20. Child Support Enforcement:** Provider agrees to cooperate with SCDJFS and any Ohio Child Support Enforcement Agency (CSEA) in ensuring employees of the Provider meet child support obligations established under state law. Further, by executing this agreement, the Provider certifies present and future compliance with any court order for the withholding of support which is issued pursuant to sections 3113.21 and 3113.217 of the Ohio Revised Code.

**21. Partial Invalidity:** A judicial or administrative finding, order or decision that any part of this agreement is illegal or invalid shall not invalidate the remainder of this agreement.

**22. Compliance with Federal and State Laws, Rules and Regulations:** The Provider and the SCDJFS agree to comply with all federal and state laws, rules, regulations, and auditing standards which are applicable to the performance of this agreement.

**23. Resolution of Disputes:** The provider and SCDJFS agree that their respective heads shall resolve any disputes between themselves concerning responsibilities under of performance of any of the terms of this agreement.

\_\_\_\_\_  
Authorized Provider Representative

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone number

**PRC RENTAL AGREEMENT**

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

\_\_\_\_\_ agrees to rent the property located at:  
(Landlord's Printed Name)

Address: \_\_\_\_\_  
\_\_\_\_\_

to: \_\_\_\_\_  
(Rentor's Printed Name)

The monthly rent amount is \$ \_\_\_\_\_.

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

Landlord's Address: \_\_\_\_\_  
\_\_\_\_\_

Landlord Phone #: \_\_\_\_\_

Rentor's Signature: \_\_\_\_\_

**PRC Rental Deposit Agreement**

The Scioto County Department of Job and Family Services agrees to pay:

Name of Landlord: \_\_\_\_\_

the amount of \$ \_\_\_\_\_ for deposit on property

located at: \_\_\_\_\_

\_\_\_\_\_

The deposit is being paid on behalf of \_\_\_\_\_  
(Name of Renter)

The landlord agrees to return the deposit to Scioto County Department of Job and Family Services in the event the renter listed above vacates the property. Detailed documentation must be provided by the landlord stating the costs of repairs, if any, withheld from the deposit.

\_\_\_\_\_ Date \_\_\_\_\_  
**Agency Representative**

\_\_\_\_\_ Date \_\_\_\_\_  
**Landlord**

\_\_\_\_\_ Date \_\_\_\_\_  
**Client**

**\*\*This agreement is not valid for payment unless all three signatures have been obtained for the parties listed above and this original form is returned to Scioto County Department of Job & Family Services.**

**Scioto County Prevention, Retention, and Contingency  
TANF Child Welfare/Kinship Navigator Self-Declaration Application**

Name:	<b>For Agency Use Only</b>
Social Security Number	Subgrantee: Scioto County Children Services
Present Address	Worker:
Telephone/Contact Number	Date Received:

**Voter Registration Notification:**

Would you like to register to vote? If you do not check either box, you will be considered to have decided not to register to vote at this time.  
 \_ YES, I want to register to vote.      L NO, I do not want to register to vote.

**1. List EVERYONE living in your household, including yourself.**  
(If you are a non-custodial parent, list your children residing in Ohio.)

Name	Relationship to Applicant	Age	Source of Income
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

**2. Circle your family size:**

Family Size	Monthly Gross Income at 200% of the Federal Poverty Level
1	\$2265
2	\$3052
3	\$3839
4	\$4625
5	\$5412
6	\$6199
7	\$6985
8	\$7772

**3. Check one:**

- I declare that my family's gross monthly income is **at or below** the standard listed on the chart to the left.  
 I declare that my family's gross monthly income is **above** the standard listed on the chart to the left.

**4. Please read this statement carefully and respond below:**

I reside in Scioto County and have a child younger than 19 years old living in Ohio. All members of my household are citizens or qualified aliens. I am not in debt to Scioto CDJFS for a fraudulent OWF or PRC overpayment. I am not an unmarried parent under 18 who is not attending school and I live in an adult supervised living arrangement. No one in my household has been found to have fraudulently misrepresented their residence in order to obtain benefits in two or more states.

- YES, I agree with the statement above (it is correct/true for me).  
 NO, I disagree with the statement above (it is not correct/true for me).

**5. Sign this application.**

*By signing this application, I affirm that to the best of my knowledge and belief these answers are complete and correct including self-declaration of income.*

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

FOR AGENCY USE ONLY			
Eligible	Decision Letter Given (retain copy)	Not Eligible	Decision Letter Given (retain copy)
Signature of Worker:		Date:	

**Scioto County PRC  
Kinship Caregiver Program Application  
for Stabilization Services** Revised 04/01/2022



**Return this application to:**  
**Scioto County Children Services**  
 710 Court St., Portsmouth OH 45662  
 or FAX to 740-456-6728

This application may be used to help purchase basic needs for the child in your care or short-term child care for respite.

Caregiver Name:	For SCDJFS Agency Use Only
Social Security Number	Worker:
Present Address:	Date Received:
Telephone/Contact Number	Date of Denial for Publicly Funded Child Care:

**Voter Registration Notification:**

Would you like to register to vote? If you do not check either box, you will be considered to have decided not to register to vote at this time.  
 YES, I want to register to vote.      NO, I do not want to register to vote.

**1. List the name of the Child you for which you are requesting help.**

<b>Child's Name</b>	<b>Your Relationship to This Child</b>
<b>Child's SSN</b>	<b>Child's Date of Birth</b>

**2. I need help with:** Paying Legal Fees \_\_\_\_\_ Purchasing Items to care for the child \_\_\_\_\_  
 (If applying for child care, a denial notice for publicly funded daycare from Scioto County CDJFS must be submitted with this application.)

**3. If you indicated you need help purchasing items to care for the child, please describe what items you need to purchase for the child in your care:**

Assistance Group Size	Monthly Gross Income at 200% of the Federal Poverty Level
1	\$2430

**4. Check one:**

- I declare that the child's income is **at or below** the standard listed on the chart to the left.  
 I declare that the child's income is **above** the standard listed on the chart to the left.

**5. Sign this application.**

*By signing this application, I affirm that to the best of my knowledge and belief these answers are complete and correct including self-declaration of income. I further declare that I do not owe any cost to fraudulently receiving TANF assistance.*

Signature of Caregiver Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

<b>FOR AGENCY USE ONLY</b>			
Eligible	Decision Letter Given (retain copy)	Not Eligible	Decision Letter Given (retain copy)
Signature of Worker:		Date:	



**Scioto County PRC  
Kinship Caregiver Program Application  
for Caregiving Services** Revised 03/18/2013

A denial notice for publicly funded daycare from Scioto County CDJFS must be submitted with this application.

**Return this application to:**  
Scioto County Children Services  
710 Court St., Portsmouth, OH 45662  
or FAX to 740-456-6728

Carer Name:	For SCDJFS Agency Use Only
Social Security Number	Worker:
Present Address	Date Received:
Telephone/Contact Number	Date of Denial for Publicly Funded Child Care:

**Voter Registration Notification:**

Would you like to register to vote? If you do not check either box, you will be considered to have decided not to register to vote at this time.  
 YES, I want to register to vote. | NO, I do not want to register to vote.

**1. List the name of the Child you for which you are requesting help.**

Child's Name	Your Relationship to This Child
Child's SSN	Child's Date of Birth

**2. I need help with childcare and certify that either I participate in one of the following activities:**

- \_\_\_ Paid employment on a full-time or part-time basis
- \_\_\_ A training or education activity that prepares the caretaker for paid employment
- \_\_\_ An OWF or SNAP work activity

**3. Check one:**

Assistance Group Size	Monthly Gross Income at 200% of the Federal Poverty Level
2	\$3287

- I declare that my income combined with the child's income is **at or below** the amount listed on the chart to the left.
- I declare that my income combined with the child's income is **above** the amount listed on the chart to the left.

**4. Sign this application.**

*By signing this application, I affirm that to the best of my knowledge and belief, these answers are complete and correct, including self-declaration of income. I further declare that I do not owe any cost to fraudulently receiving TANF assistance.*

Signature of Caregiver Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

FOR AGENCY USE ONLY			
Eligible	Decision Letter Given (retain copy)	Not Eligible	Decision Letter Given (retain copy)
Signature of Worker:		Date:	

