

PROGRAM DESCRIPTIONS

FY 2013

Michigan Department of Human Services

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Prepared by:
DHS Budget Division

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Department:
Human Services

Program:
Child Development and Care

PROGRAM DESCRIPTION

The Michigan Department of Education's Child Development and Care (CDC) program provides child care assistance to qualified families when the parent(s) or substitute parent(s) is unavailable to provide care because of high school completion, employment, participation in an approved treatment program for a physical, mental or emotional condition (family preservation), or approved employment-related activities.

A Memorandum of Understanding between the Department of Education and the Department of Human Services (DHS) was established to identify services that will be provided by DHS during a transitional period.

The following services continue to be provided by DHS:

- Eligibility Determination through the DHS local offices.
- Child Care Licensing through the Bureau of Children and Adult Licensing.
- Fraud investigations and data matches through the Office of Inspector General.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Child Support Enforcement	Program: Child Support

PROGRAM STATEMENT

The Office of Child Support (OCS) is the state agency authorized to administer the federal Title IV-D child support program in Michigan. The OCS provides case initiation services to customers, operates the State Disbursement Unit, provides some centralized enforcement services and is responsible for policy development and training. OCS, in conjunction with the Department of Technology, Management and Budget (DTMB), operates and maintains the statewide child support enforcement system (MiCSES). The OCS also contracts with Friends of the Court and county prosecuting attorneys to provide Title IV-D child support services to county residents. Contracted services include locating parents, establishing paternity, and establishing and enforcing support orders. A child support case is automatically a IV-D case if the payee is receiving public assistance; however, anyone can request IV-D services. More than 95 percent of cases in Michigan are IV-D cases. The goal of the Child Support program is to help Michigan's citizens obtain the child support to which they are entitled under federal and state law. This contributes to the agency mission of self-sufficiency, fosters responsible behavior towards children, and ensures that children have the financial and emotional support of both parents.

SOURCES OF FINANCING

- Title IV-D (Child Support)
- Federal OCSE incentives
- State and county funding

LEGAL BASIS

- Federal Social Security Act (42 USC 651-669B), Title IV-D
- DHS FY 2012 Appropriations Act, 63 of 2011, Article X

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS

The federal Office of Child Support Enforcement (OCSE) provides the state with 66 percent federal financial participation for IV-D child support services. OCSE also provides states with incentive payments based on five child support performance factors. Michigan receives approximately \$26.5 million in performance incentives from the federal government each fiscal year, of which \$14.5 million is paid to counties and \$12.0 million is returned to the Department. The state and county government also contribute to program funding. Through child support collections, the IV-D program provides cost recovery funding for the TANF and Medicaid programs, helping to offset expenditures in these programs. In FY 2011, an estimated \$81.6 million was recovered for public assistance programs, with an estimated \$19 million recovered for the Medicaid program. In FY 2011, the federal share of Michigan IV-D expenditures is estimated to be \$150 million.

Michigan State Disbursement Unit (MiSDU) –The MiSDU is responsible for the receipt and disbursement of child support collections. Federal law requires distribution of receipts within two days. The MiSDU disburses more than 90 percent of money received within 24 hours of receipt. The rest is held as required by law or for research to identify the proper recipient and/or address.

Michigan Statewide Child Support Enforcement System (MiCSES) – MiCSES is the statewide child support computer system. The OCS provides funding to Department of Technology, Management & Budget (DTMB) to maintain the system, and DTMB contracts for its operation.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Child Support Enforcement	Program: Child Support	

MiCSES tracks all support case activities, including collection, distribution, establishment, and enforcement. In FY 2011, MiCSES processed \$1.49 billion in child support payments. This is an average of \$28.7 million weekly.

Partnership - OCS initiated a Program Leadership Group (PLG), allowing representatives from all entities operating the child support program (OCS, DTMB, the State Court Administrative Office, the Friend of the Court Association, and the Prosecuting Attorneys Association of Michigan) to make decisions regarding the program. This philosophy of teamwork guides the program and is responsible for its success.

Figures on the following graph show that overall IV-D child support collections substantially increased from FY 2000 through FY 2008. Collections significantly dropped from FY 2009 through FY 2011, which reflects the economic recession taking place during this time period.

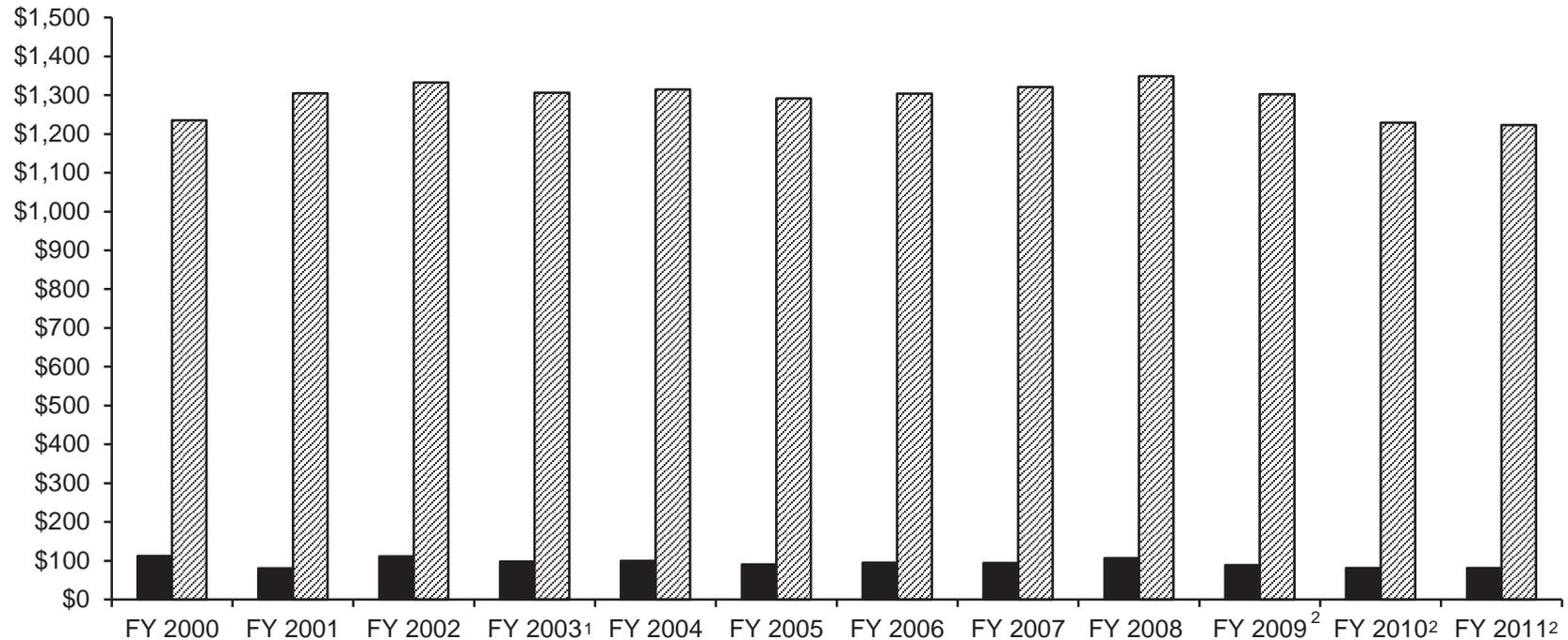
Office of Child Support FY 2011 Statistics Summary:

- At the end of FY 2011, there were 772,945 IV-D cases open with child support orders established.
- There were 983,549 children in the IV-D child support program in FY 2011.
- The statewide Paternity Establishment Rate for FY 2011 was 90.4 percent.
- Total IV-D collections distributed in FY 2011: \$1.33 billion.
- Michigan ranked seventh nationally in FY 2010 in IV-D collections distributed.

DEPARTMENT OF HUMAN SERVICES OFFICE OF CHILD SUPPORT - NET CHILD SUPPORT COLLECTIONS

FIP and Non-FIP Case-Related Michigan Collections FY 2000 - FY 2011

Collections in
Millions of Dollars



■ FIP	\$112.4	\$80.5	\$111.3	\$97.9	\$99.8	\$90.2	\$95.4	\$94.7	\$106.6	\$89.2	\$81.6	\$81.6
▨ Non-FIP	\$1,235.0	\$1,304.7	\$1,332.4	\$1,305.9	\$1,314.6	\$1,291.3	\$1,304.2	\$1,321.0	\$1,349.1	\$1,302.7	\$1,229.0	\$1,223.1
Total	\$1,347.4	\$1,385.2	\$1,443.7	\$1,403.8	\$1,414.4	\$1,381.5	\$1,399.6	\$1,415.7	\$1,455.7	\$1,391.9	\$1,310.6	\$1,304.7

Note: Totals are final, year-end adjusted amounts.

¹ The FY 2003 decrease in FIP-related collections was due to a FIP caseload decrease and a change in TANF regulations limiting the amount of Child Support Arrearages that can be assigned to the state.

² There were recession impacts on collections in 2009-2011.

Department:
Human Services

Appropriation Unit:
Disability Determination Services

Program:
Disability Determination Services

PROGRAM STATEMENT

The Michigan Disability Determination Service (DDS) determines initial and continuing eligibility for disability benefits for Social Security Disability Insurance (SSDI), Supplemental Security Income (SSI), Medicaid Assistance (MA), State Disability Assistance (SDA), and the Office of Retirement Services (ORS) disability retirement program. SSDI, MA and SDA programs have the same medical/vocational eligibility criteria. DDS develops evidence and makes recommendations to the ORS retirement board, which subsequently makes decisions on claims. The ORS workload serves State of Michigan employees, including state police and judges, and public school employees who are covered by employee retirement programs.

- Social Security Disability Insurance (SSDI) benefits are paid to eligible individuals who cannot work for at least a year because of a serious physical or mental disability. To qualify, an applicant must have worked in a job where both the individual and the employer paid Social Security taxes for an adequate number of fiscal quarters before the onset of the disability. Disability benefits are paid to insured individuals who become unable to work because of illness or injury that is expected to last at least 12 continuous months or is expected to result in death. The definition of disability is one that only the severely disabled can meet. There are no income or asset requirements for SSDI.
- Supplemental Security Income (SSI) is a needs-based program that provides coverage for people whose income and assets are below a certain level. There is no requirement for prior employment. SSI disability criteria are the same as the SSDI criteria described above. SSI recipients receive Medicaid.

Eligibility Factors:

- Medical Criteria - The Social Security law contains a Listing of Impairments and a description of the evidence needed to evaluate the disability. Benefits are allowed when the applicant's impairments meet or equal the listed criteria.
- Vocational Criteria - The Social Security law also contains vocational criteria which is considered in cases where the impairment fails to meet or equal the medical criteria, but the physical or mental capacity to perform basic work-related activities is limited. The remaining or equal capacity to perform work is assessed along with age, education and past work experiences to determine eligibility for disability benefits.

SOURCES OF FINANCING

- SSDI benefits are 100% federally funded.
- SSDI benefits are not reflected in the DHS budget.

LEGAL BASIS

- SSDI: Federal Title II funds; SSI: Federal Title XVI funds
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

Department:
Human Services

Appropriation Unit:
Disability Determination Services

Program:
Disability Determination Services

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS

**DISABILITY DETERMINATION SERVICE WORKLOAD
Social Security Administration**

Fiscal Year	Budgeted Dispositions ¹	New Applications ²	Actual Case Dispositions ³	Fiscal Year	Budgeted Dispositions	New Applications	Actual Case Dispositions
1994	149,850	153,106	159,000	2003	124,673	126,043	127,440
1995	153,968	134,125	143,155	2004	127,756	129,057	128,133
1996	132,328	139,327	127,349	2005	132,211	130,707	133,437
1997	142,912	140,377	141,000	2006	121,211	105,639	127,083
1998	148,633	141,935	141,000	2007	117,677	107,028	120,391
1999	135,104	133,440	135,081	2008	124,898	103,659	123,252
2000	112,912	122,879	111,401	2009	123,153	115,664	126,332
2001	123,607	119,732	116,222	2010	138,599	115,711	136,036
2002	121,842	129,701	125,981	2011	147,339	148,423	148,008

Fiscal Year	Pending Cases ⁴	Fiscal Year	Pending Cases
1994	32,671	2003	34,210
1995	23,602	2004	34,986
1996	35,834	2005	28,594
1997	34,488	2006	25,154
1998	26,495	2007	33,150
1999	25,240	2008	26,971
2000	34,200	2009	37,011
2001	32,038	2010	35,210
2002	34,728	2011	35,151

¹ **Budgeted Dispositions:** Federally funded workload per year only (does not include Non-SSI Medicaid Disabled, SDA or ORS workload).

² **New Applications:** Number of new disability applications received per year (does not include Non-SSI Medicaid Disabled, SDA or ORS workload).

³ **Actual Case Dispositions:** Number of eligibility determinations completed per year (does not include Non-SSI Medicaid Disabled, SDA or ORS workload).

⁴ **Pending Cases:** Number of eligibility determinations in process and carried over from one year to the next. Pending cases are the number of cases being processed at the end of the fiscal year (does not include Non-SSI Medicaid Disabled, SDA or ORS workload).

Department:
Human Services

Appropriation Unit:
Disability Determination Services

Program:
Disability Determination Services

DISABILITY DETERMINATION SERVICE WORKLOAD
Medicaid / SDA

Fiscal Year	Budgeted Dispositions ⁵	New Applications ⁶	Actual Case Dispositions ⁷	Fiscal Year	Budgeted Dispositions	New Applications	Actual Case Dispositions
2002	\$1,591,323	42,764	42,998	2007	\$1,874,886	54,777	54,963
2003	\$1,587,087	44,047	43,751	2008	\$2,075,509	55,690	56,297
2004	\$1,681,267	47,259	47,065	2009	\$2,672,200	45,598	45,706
2005	\$1,774,726	52,153	52,209	2010	\$2,901,100	46,929	46,557
2006	\$1,909,244	55,576	55,214	2011	\$3,038,900	50,833	54,657

Fiscal Year	Pending Cases ⁸	Fiscal Year	Pending Cases
2002	923	2007	1,672
2003	1,410	2008	817
2004	1,735	2009	403
2005	1,482	2010	655
2006	2,010	2011	5,500

⁵ **Budgeted Dispositions:** Total funded workload per year (Non-SSI Medicaid Disabled and SDA workloads are handled concurrently).

⁶ **New Applications:** Number of new disability applications received per year.

⁷ **Actual Case Dispositions:** Number of eligibility determinations completed per year.

⁸ **Pending Cases:** Number of eligibility determinations in process and carried over from one year to the next. Pending cases are the number of cases being processed at the end of the fiscal year (Non-SSI Medicaid Disabled and SDA workloads are counted concurrently).

Department:
Human Services

Appropriation Unit:
Disability Determination Services

Program:
Disability Determination Services

DISABILITY DETERMINATION SERVICE WORKLOAD
Office of Retirement Services

Fiscal Year	Budgeted Dispositions ⁹	New Applications ¹⁰	Actual Case Dispositions ¹¹	Fiscal Year	Budgeted Dispositions	New Applications	Actual Case Dispositions
2002	N/A	1,105	1,084	2007	1,000	748	748
2003	1000	N/A	N/A	2008	1,000	590	678
2004	1,000	863	948	2009	1,000	694	699
2005	1,000	752	890	2010	1,000	797	801
2006	1,000	835	862	2011	1,000	724	753

Fiscal Year	Pending Cases ¹²	Fiscal Year	Pending Cases
2002	165	2007	N/A
2003	N/A	2008	N/A
2004	137	2009	111
2005	N/A	2010	87
2006	107	2011	94

⁹ **Budgeted Dispositions:** ORS-funded workload per year.

¹⁰ **New Applications:** Number of new disability applications received per year.

¹¹ **Actual Case Dispositions:** Number of eligibility determinations completed per year.

¹² **Pending Cases:** Number of eligibility determinations in process and carried over from one year to the next. Pending cases are the number of cases being processed at the end of the fiscal year.

Department:
Human ServicesAppropriation Unit:
Disability Determination ServicesProgram:
Disability Determination Services**DISABILITY DETERMINATION SERVICE***All workloads*

DISABILITY DETERMINATION SERVICE BUDGET (OPERATIONS) (In Millions of Dollars)			
FY 1995	\$54.0	FY 2004	\$68.9
FY 1996	\$53.4	FY 2005	\$75.6
FY 1997	\$60.8	FY 2006	\$80.1
FY 1998	\$56.7	FY 2007	\$81.3
FY 1999	\$61.1	FY 2008	\$76.1
FY 2000	\$61.8	FY 2009	\$83.0
FY 2001	\$60.1	FY 2010	\$95.9
FY 2002	\$66.4	FY 2011	\$111.4
FY 2003	\$68.2	FY 2012	\$118.8

Department:
Human Services

Appropriation Unit:
Public Assistance

Program:
Family Independence Program (FIP)

PROGRAM STATEMENT

The goal of the Family Independence Program (FIP) is to help families achieve self-support and independence, to reduce dependence on public assistance and increase self-sufficiency. FIP provides a monthly cash assistance grant for both one- and two- parent families. Cash assistance assists in covering personal needs costs (clothing, household items, etc.), housing, heat, utilities and food, in conjunction with Food Assistance Program benefits. Jobs, Education, and Training (JET) is Michigan's ongoing programming approach within FIP to provide employment and training services.

Population Description - October 2011

- Average case size: 2.6 people (one adult and one to two children).
- Ninety-one percent of grantees are female.
- Average grantee age: 29 years.
- 46 percent of grantees are white, 52 percent are black, and 2 percent are other (including Hispanic & American Indian).

Eligibility Factors - FIP eligibility is based on financial and non-financial factors.

- **Financial Eligibility Factors**: To be eligible for FIP, a family must meet income and asset requirements. The family's income (minus earned income disregards) plus certifiable child support income is deducted from the payment standard to determine whether or not the family is eligible to receive assistance. The asset limit is \$3,000 for cash assets (which includes cash on hand or in savings and checking accounts, investments, retirement plans and trusts). The property asset limit is \$500,000.
- **Non-Financial Eligibility Factors**: Major non-financial eligibility factors include, but are not limited to: the time on assistance, age of children, cooperation with employment and training (including development of a Family Self-Sufficiency Plan), school attendance and child support requirements. FIP recipients are required to participate up to 40 hours per week in employment and/or employment-related activities.

Minor Parents

Minor parents (under age 18) must live in an adult-supervised living arrangement as a condition of eligibility. A minor parent who has not completed high school must attend school full-time as a condition of eligibility. Minor parents who have completed high school must cooperate with employment and training activities.

Department:
Human Services

Appropriation Unit:
Public Assistance

Program:
Family Independence Program (FIP)

Services Provided To FIP Recipients

- **Financial Assistance:** Financial Assistance is the basic service provided to FIP clients. The amount of the FIP payment is based on the size and eligibility status of the group. The following table shows the monthly FIP grant for a family of three for each eligibility group.

FY 2012 GRANT AND FOOD ASSISTANCE LEVELS			
	Grant	Food Assistance	Grant + FAP
Eligible Adult and Two Children	\$492	\$526 ¹	\$1,018
	Grant	Food Assistance	Grant + FAP + SSI (\$712) ²
Ineligible Adult and Two Children ³	\$274	\$433	\$1,419

- **Food Assistance Program:** FIP works in conjunction with the Food Assistance Program (FAP) to raise the food purchasing power of FIP families. FAP benefit levels are based on net income, allowable expenses and family size. In FY 2012, a family of three receiving a \$492 monthly FIP grant (with no other income), is eligible for \$526 in monthly FAP benefits. Most FIP cases also receive FAP benefits.
- **Medical Assistance:** Families eligible for FIP benefits may also be eligible for Medicaid.

¹ This group receives the same FAP benefits as in FY 2011.

² Estimated Food Assistance assumes that the recipient pays \$400 in monthly rent and incurs the standard FY 2012 FAP heat and utility expense of \$553. The SSI amount is composed of \$698 in federal benefits and a \$14 state supplement. NOTE: FAP benefits in FY 2011 were higher at \$453. An increase in FY 2012 SSI benefits and a decrease in the FAP Heat and Utility Standards were sufficient to lower the FAP amount by \$11 in FY 2012.

³ While the income of an Ineligible Adult is not counted when determining FIP benefit amounts, the SSI amount of \$712 is counted when determining the Food Assistance amount. Thus, the Food Assistance benefit amount will depend on the family's total income.

Department:
Human Services

Appropriation Unit:
Public Assistance

Program:
Family Independence Program (FIP)

- **Family Automated Screening Tool (FAST)**: Adult FIP recipients must complete a FAST within 30 days of the initial FIP application interview. The FAST includes 50 questions to identify individual and family strengths and/or barriers that would affect his or her employability.
- **Family Self-Sufficiency Plan (FSSP)**: FAST information is automatically placed into the FSSP. DHS and contracted employment service agencies also view and enter strengths, barriers, vocational history and current activities to create the FSSP. FIP recipients who complete the FAST participate in the completion of their FSSP.
- **Direct Support Services:**
 - **Employment Support Services:** FIP provides a range of services designed to promote independence. These include supportive services to aid in seeking/retaining employment, such as transportation, automobile repair, work clothes, childcare services and other services. Services combine to promote client self-sufficiency. The goal of Employment Support Services is to achieve 100 percent employment for all FIP clients required to work. DHS works with FIP clients to identify barriers to employment and to provide necessary resources to eliminate those barriers. For each case, barriers are reflected in the FSSP.
 - **Family Support Services:** Families receiving FIP benefits may also receive additional services to assist in preparing for self-sufficiency. For example, a recipient's FSSP may include life skills training and other short-term family counseling. In these instances, a Family Independence Specialist helps identify resources needed by families and helps arrange for payments for services if necessary.

SOURCES OF FINANCING

- Federal Temporary Assistance for Needy Families (TANF) funding.
- State funds.
- Retained child support collections.
- FIP recoupments (accruing as a result of previous payments made in error).
- Federal Emergency TANF Contingency Funds.

LEGAL BASIS

- Social Welfare Act, 1939 PA 280
- Federal Social Security Act
- FY 2012 DHS Appropriations Act, 2011 PA 63, Article X

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Public Assistance	Program: Family Independence Program (FIP)

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS

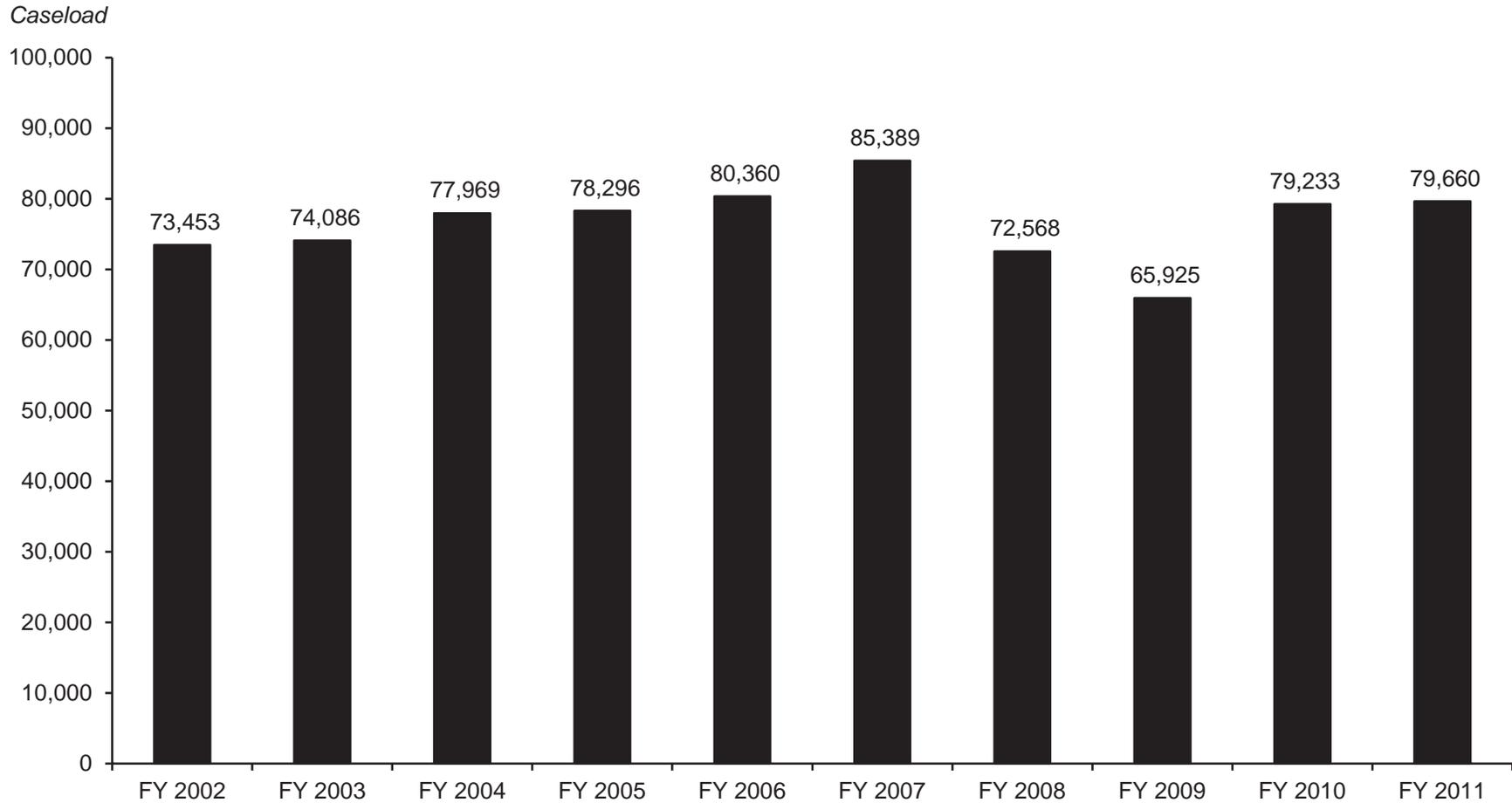
The following graph summarizes FIP-Regular annual average caseloads from FY 2003 through FY 2011.⁴ The second graph shows FIP-Regular maximum payments as a percentage of the poverty level with and without Food Assistance Program benefits. Maximum payments for a family of three were 35 percent of the poverty level in FY 2009, 34 percent in FY 2010, an estimated 34 percent in FY 2011, and an estimated 32 percent in FY 2012.

Michigan provides other TANF-funded programs and services. The following are examples of services intended to allow children to be cared for in their own homes, in the homes of relatives, or to end dependence of needy parents on government benefits by promoting job preparation and work. Without TANF funding the following programs would be at risk or eliminated:

- Emergency Relief; Emergency Shelter; Food Bank; Community Action Agencies; Child Development and Care Services; Employment Support Services; Family Support Services; Individual Development Accounts; Information and Referral Services; Family Resource Centers; Disaster Relief Program; Short-Term Family Support; Family Support Subsidy; Adoption Support Subsidy; Adoption Medical Subsidy; Earned Income Tax Credit; Scholarships Used to Fund Post-Secondary Education; Capacity Building for Michigan's Early Education and Care System; School Readiness Programs; Various United Way Programs; Various Foundation Grants; Programs Targeted Towards At-Risk Youth; Employment Services for Non-Custodial Parents; Energy Assistance; Domestic Violence Comprehensive Services.

⁴ Beginning in March 2007, Michigan instituted a new FIP component called the Extended Family Independence Program (EFIP). EFIP cases are those that would have closed due to earnings but remain open for six additional months and receive a \$10 grant for each of those months. EFIP provides important support to families transitioning to self-sufficiency. By retaining cases in the monthly count, Michigan potentially increases the percentage of those cases that will meet state and federal work requirements. While those cases are included in Michigan's total monthly counts, they are not typically viewed the same as regular FIP cases; for example, those cases that receive regular FIP grant amounts and remain on assistance until other policy considerations and case management actions remove them from assistance.

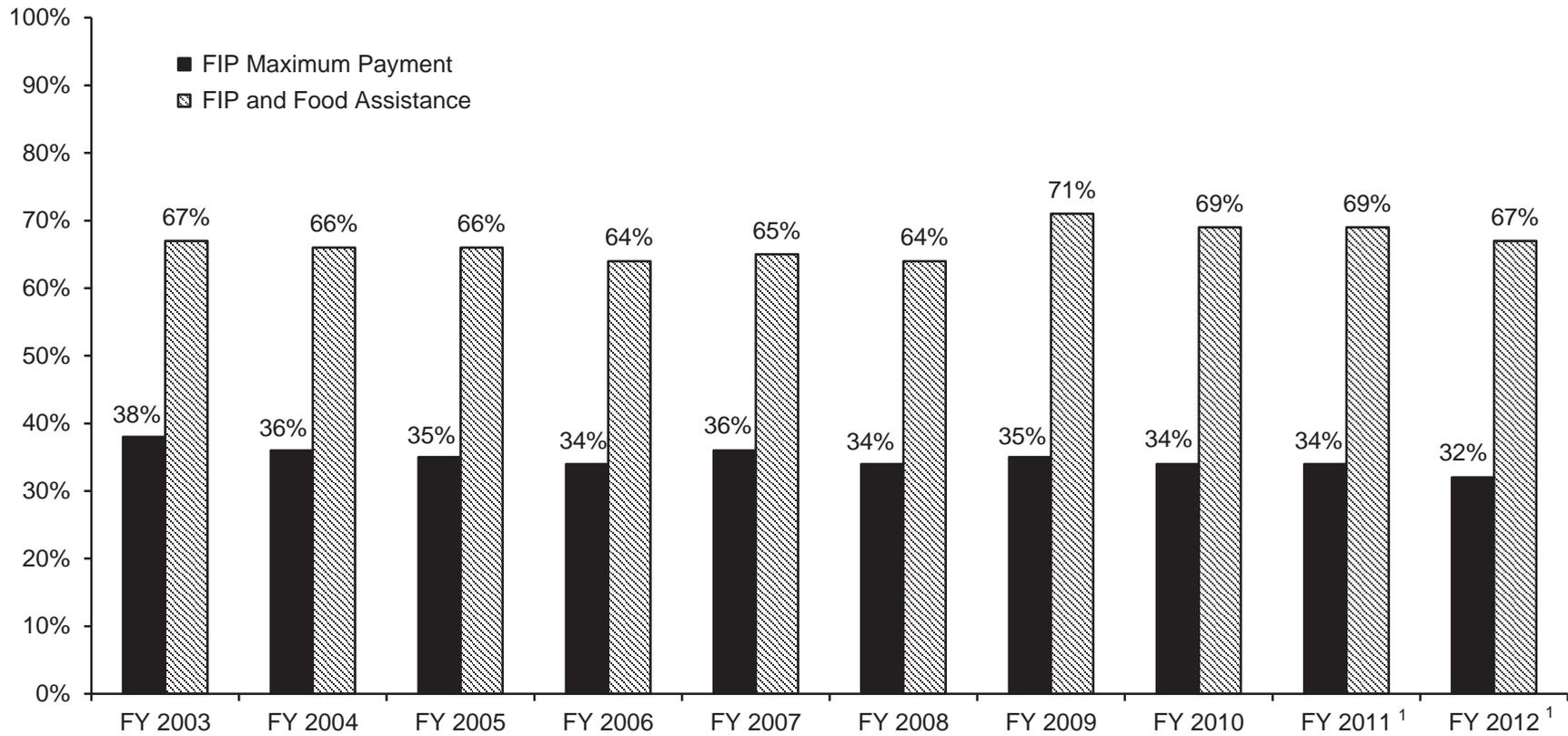
DEPARTMENT OF HUMAN SERVICES
FAMILY INDEPENDENCE PROGRAM (FIP)
Average Monthly FIP-Regular Caseload Trends
FY 2002 - FY 2011



DEPARTMENT OF HUMAN SERVICES

FIP MAXIMUM PAYMENT AS A PERCENTAGE OF THE POVERTY LEVEL

Family Group Size of Three Based on Federal Poverty Thresholds



Note: The FY 2012 maximum payment is estimated to be 32 percent of the poverty level. Adding food assistance to the FIP payment results in a family benefit estimated to be 67 percent of the poverty threshold. FIP amounts did not increase for this group from the FY 2011 level.

¹ *Estimated values.*

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Public Assistance	Program: Food Assistance Program	

PROGRAM STATEMENT

The goal of the Food Assistance Program (FAP) is to raise the food purchasing power of low-income persons. Limited food purchasing power contributes to hunger and malnutrition. FAP is one of the federal safety net programs. Benefits are 100 percent federally funded and administrative costs are shared equally between the state and the federal government.

Program Description/Eligibility Factors:

Groups of people living in the same household are eligible for FAP benefits based on assets, net income, the size of the household, and certain expenses. FAP groups are categorically eligible if all group members receive Family Independence Program (FIP) benefits, State Disability Assistance (SDA) benefits, Supplemental Security Income, or if they meet the income and asset limits. A group is not categorically eligible for FAP if any member of the group is disqualified for an intentional program violation (IPV), trafficking, parole and probation violation, or is a fugitive felon. FAP benefits are not considered income or assets for FIP, SDA Medicaid (MA), or any other federal, state or local programs. Therefore, any other assistance for which a FAP household qualifies is not reduced because of the household's receipt of FAP benefits. FAP benefits can be used to buy eligible food at any Food and Nutrition Service-authorized retail food store or approved meal provider. Eligible items include any food or beverage product intended for human consumption except alcoholic beverages, tobacco, and food prepared for immediate consumption.

Note: Individuals over the age of 60 and their spouse and/or individuals with a disability and their spouse and/or homeless may purchase prepared food at certain approved restaurants.

There are two types of FAP households:

- Public Assistance (PA): A household in which at least one of the members of the household also receives FIP and/or SDA.
- Non-Public Assistance (NPA): A household that has no member receiving FIP and/or SDA.

As of July 2001, Michigan's food assistance and cash assistance benefits began being provided through electronic benefits transfer (EBT). EBT for food assistance replaced paper coupons with a debit card.

SOURCES OF FINANCING

- 100 percent federal funding for Food Assistance benefits through the U.S. Department of Agriculture Food and Nutrition Service (USDA-FNS).
- 50 percent USDA-FNS funding for associated administrative costs less any administrative expense amount determined to have been included in the TANF block grant.
- State funds.
- Public assistance recoupments.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Public Assistance	Program: Food Assistance Program	

LEGAL BASIS

- Food and Nutrition Act of 2008- 7 U.S.C. 2011-2036
- 7 CFR 271.1-283.32
- Administrative Rules 400.3001-400.3015
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS

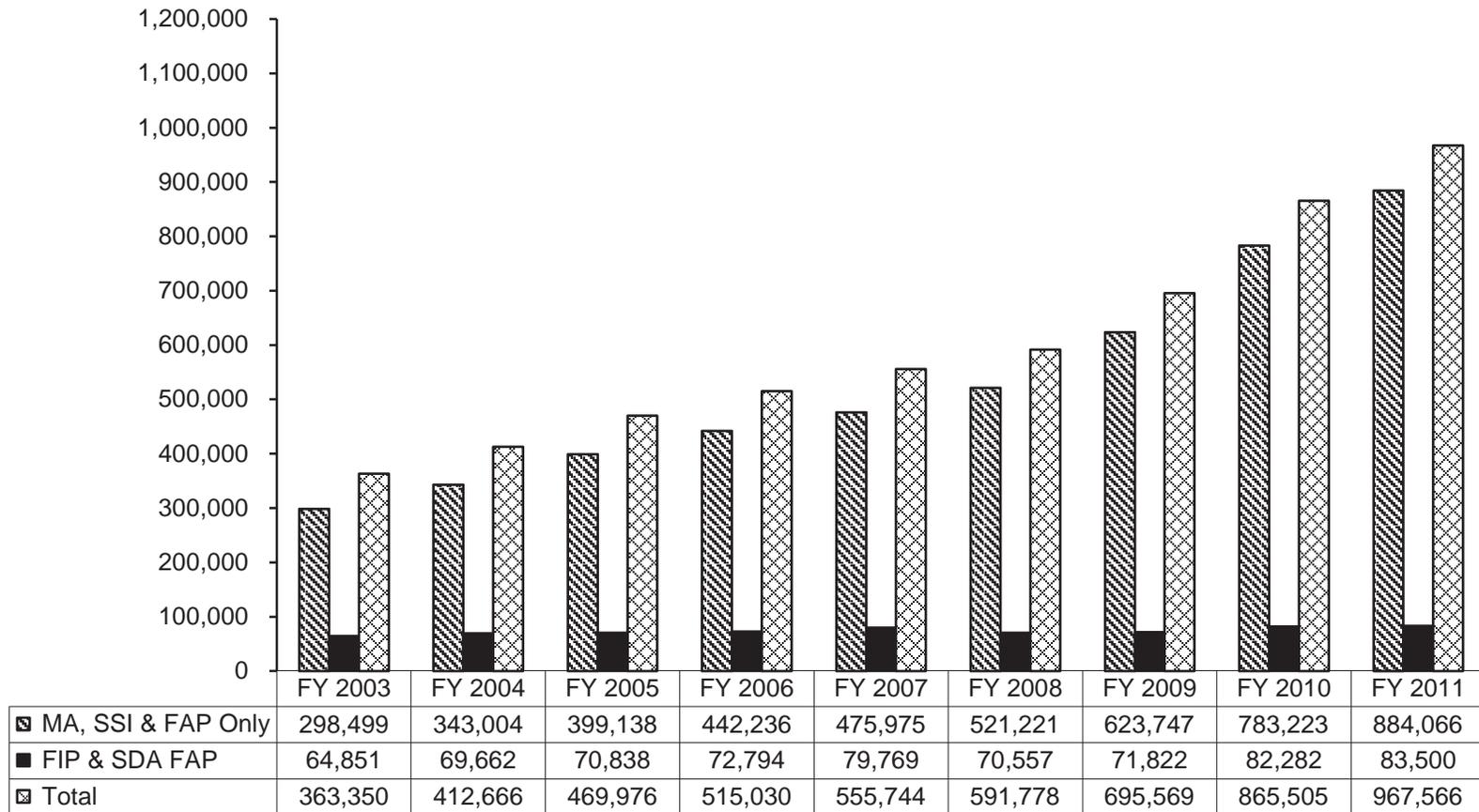
In Fiscal Year 2011, the average number of households receiving FAP monthly was 967,566, providing supplemental food benefits to an average of 1,928,478 people. Both figures were annual records. Household and recipient counts are expected to increase due to Michigan's continued economic challenges. Additional increases are anticipated due to the "MiBridges Portal," Michigan's online FAP application project implemented in August 2009. Since the implementation of the online FAP application, 480,492 people have applied for FAP benefits through its use. Use of this tool has more than doubled over the past year. The count in FY 2010 was 221,543.

Additionally, the Michigan Combined Application Project (MiCAP) has increased Michigan FAP participation. MiCAP is a USDA-FNS-approved process allowing Supplemental Security Income (SSI) clients to automatically receive nutritional benefits. MiCAP is a program for SSI seniors and persons with disabilities living alone. This group comprises the majority of Michigan's current SSI caseload. MiCAP was implemented in April 2009 and to date has added approximately 15,000 households to the FAP program.

The Supplemental Nutrition Assistance Program (SNAP) – FAP in Michigan – is 100 percent federally funded, and benefits not just individuals and families requiring nutritional assistance, but Michigan retail, agriculture and food production businesses as well. For every \$5 in local FAP benefits, the actual value to local communities is \$9.20, or 84 percent higher than initial benefits.

DEPARTMENT OF HUMAN SERVICES FOOD ASSISTANCE HOUSEHOLD SUMMARY

Average Monthly Cases
FY 2003 - FY 2011



Note: The FY 2011 average monthly household average was a record 967,566, providing benefits to 1,928,478 people. While the average FAP recipient count exceeded 1.9 million, the total unduplicated count of people receiving FAP benefits at any point in FY 2011 was 2,438,905.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department	Appropriation Unit	Program	
Human Services	Public Assistance	Low-Income Home Energy Assistance Program	

PROGRAM STATEMENT

The Low-Income Home Energy Assistance Program (LIHEAP) provides assistance to disadvantaged households in meeting the costs of home energy. LIHEAP provides three types of energy assistance payments: 1) Basic heating assistance, through the Michigan Home Heating Credit; 2) State Emergency Relief (SER) energy services — crisis assistance for those facing energy or energy-related home repair emergencies; and 3) Weatherization services. In FY 2011, 394,934 low-income households received basic heating assistance; 267,253 received crisis energy assistance; 1,876 households received energy-related home repair services; and 4,705 received weatherization services. Some households may have received more than one of the above LIHEAP services. LIHEAP is available to public assistance households as well as the working poor.

SOURCES OF FINANCING

- Federal Low-Income Home Energy Assistance Program block grant funds.

LEGAL BASIS

- Federal Low Income Home Energy Assistance Act of 1981 (Title XXVI of Public Law 97-35) 45 CFR Part 96.
- Michigan Income Tax Act, 2004 PA 335.
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X.

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS

FY 2011 LIHEAP Activity:

	<u>Households</u>	<u>Average Payments</u>
Basic Heating Assistance Home Heating Credit	394,934	\$169
SER Energy Services Heating and Electric Energy-Related Home Repairs	267,253 ¹ 1,876	\$671 \$2,145
Weatherization	4,705	\$1,825

¹ In addition to LIHEAP, funding from the Low Income Energy Efficiency Fund awarded by the Michigan Public Service Commission was used to assist households with SER energy services. This number includes those households.

Department:
Human Services

Program:
Medical Assistance (Medicaid)

PROGRAM STATEMENT

Medicaid provides medical assistance to individuals and families who meet the financial and non-financial eligibility factors. The goal of the Medicaid program is to ensure that essential health care services are made available to those who otherwise could not afford them.

The Department of Community Health administers Medicaid and the Adult Medical Program. The DHS determines eligibility and implements the program through central office policy analysts and local office specialists. Medicaid is the single largest health insurance program in the United States (larger than Medicare).

Subsequent pages provide an overview of the Medicaid program and describe the various eligibility categories.

SOURCES OF FINANCING

- Title XIX of the Social Security Act.
- State GF/GP.
- County funds.
- Federal demonstration funds.
- Intergovernmental transfers.

LEGAL BASIS

- Title XIX of the Social Security Act 1902 (a)(10)(A) and (e)
- 42 CFR (Code of Federal Regulations)
- Social Welfare Act, 1939 PA 280, MCL 400.106
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X
- DCH FY 2012 Appropriations Act, 2011 PA 63, Article IV

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS

Total Medicaid beneficiaries: October 2011

Family Medicaid:	773,740
Pregnant women & children under age 21:	679,680
Non-SSI - Aged (over 65), Blind, Disabled:	210,319
SSI Aged, Blind, Disabled	<u>264,146</u>
Total:	1,927,885

Department:
Human Services

Program:
Medical Assistance (Medicaid)

Current Recipient Demographics

- 1,927,885 Medicaid recipients (10/2011).
- 61,167 Adult Medicaid Program recipients (10/2011).
- These recipients are active in 30 different Medicaid categories.

Eligibility Determination

After the application is completed, the Family Independence Specialist or Eligibility Specialist assesses individual applicant situations. Assessment includes a review of income, assets, group composition, disability status, age, and living arrangements to determine which category of Medicaid is most beneficial to the applicant and to complete the eligibility determination.

Access to Benefits

- Mihealth card – Each Medicaid recipient and Adult Medicaid Program (AMP) recipient receives his/her own card to access benefits.

The following several pages provide a Medicaid overview of program categories, and two graphs displaying Medicaid recipient growth (FY 2002-FY 2011), and Medicaid expenditures (FY 2002-FY 2011). **Recipient and expenditure totals are at all-time record levels.**

Department:
Human Services

Program:
Medical Assistance (Medicaid)

MEDICAID OVERVIEW
November 2011

MA Category		BEM Item	Unique Non-Financial Eligibility Factor	Automatic MA Eligibility
FIP Related Categories				
1.	Low-Income Family MA	110	Family with dependent children	No
2.	Transitional MA: Families who lose FIP eligibility because of income from employment of the specified relative are eligible for MA for up to 12 months. <i>Effective date 4-1-90</i>	111	Family with children	Yes
3.	Special N/Support: Families who lose FIP eligibility (in whole or in part) because of increased child support payments are eligible for MA for up to four months. <i>Effective date 10-1-84</i>	113	Family with dependent children	Yes ¹
4.	Title IV-E Recipients: Children receiving Title IV-E foster care maintenance payments and children for whom there is a Title IV-E adoption assistance agreement are eligible for MA. <i>Effective date 2-1-82</i>	117	Under age 21	Yes
5.	Department Wards: Children who are Department Wards are eligible for MA. <i>Effective date 5-1-82</i>	117	Under age 21	Yes
6.	Healthy Kids for Pregnant Women: Pregnant women with income up to 185% of the poverty level are eligible for MA. Eligibility continues for the two calendar months following the termination of pregnancy. There is no asset test. <i>Effective date 1-1-88</i>	125	Pregnant or recently pregnant	No

¹ Once established, MA eligibility continues automatically as long as the family remains Michigan residents.

Department:
Human Services

Program:
Medical Assistance (Medicaid)

	MA Category	BEM Item	Unique Non-Financial Eligibility Factor	Automatic MA Eligibility
FIP Related Categories				
7.	<p>Group 2 Pregnant Women: Pregnant women who meet certain Group 2 financial and non-financial eligibility factors are eligible for MA. Women who are receiving MA when pregnancy ends and remain otherwise eligible may continue receiving MA for the two calendar months following the month pregnancy ends. Incurred medical expenses may be used in determining income eligibility (spend-down).</p> <p style="text-align: right;"><i>Effective date 10-1-84</i></p>	126	Pregnant or recently pregnant	No
8.	<p>Healthy Kids Under Age 1: A child under age 1 whose family's income is below 185% of the poverty level is eligible for MA. There is no asset test.</p> <p style="text-align: right;"><i>Effective date 10-1-88</i></p>	129	Under age 1	No
9.	<p>Other Healthy Kids Expansion: Children ages 16-19 whose income meets specific poverty requirements are eligible for MA. There is no asset test.</p>	131	For children age 16-18, family income must be 101-150%. For children age 19, family income must be below 150%.	No
10.	<p>Group 2 Persons Under Age 21: Persons under age 21 who meet the Group 2 income and asset requirements are eligible for MA. Incurred medical expenses may be used in determining income eligibility (spend-down).</p> <p style="text-align: right;"><i>Effective date 1966</i></p>	132	Under age 21	No
11.	<p>Group 2 Caretaker Relatives: Caretaker relatives of a dependent child who meet the Group 2 income and asset requirements are eligible for MA. Incurred medical expenses may be used in determining income eligibility (spend-down).</p> <p style="text-align: right;"><i>Effective date 1966</i></p>	135	Caretaker of dependent child	No

Department:
Human Services

Program:
Medical Assistance (Medicaid)

	MA Category	BEM Item	Unique Non-Financial Eligibility Factor	Automatic MA Eligibility
FIP Related Categories				
12.	<p>Newborns: A child whose mother is receiving MA on the date of the child's birth is eligible for MA through the month of his/her first birthday if the child lives with his mother and the mother remains an MA recipient or meets certain MA eligibility factors.</p> <p style="text-align: right;"><i>Effective date 10-1-84</i></p>	145	Newborn	Yes ²
13.	<p>Plan First! Family Planning Program: A health coverage program operated by the Department of Community Health (DCH), which will provide family planning services to women who otherwise would not have full medical coverage.</p> <p style="text-align: right;"><i>Effective date 07-01-06</i></p>	124	Non-pregnant women between age of 19-44 not currently covered by Medicaid or Adult Medical Program	No
SSI-Related Categories:				
14.	<p>SSI Recipients: All SSI recipients are eligible for MA.</p> <p style="text-align: right;"><i>Effective date 1-1-74</i></p>	150	Aged, blind or disabled	Yes
15.	Appealing SSI Termination	150	Appealing SSI termination	No
16.	Special Disabled Children	154	Former SSI recipient child	No
17.	<p>503 Individuals: A former SSI recipient who receives RSDI benefits and who would now be eligible for SSI if RSDI cost of living increases paid since SSI eligibility ended were excluded is eligible for MA.</p> <p style="text-align: right;"><i>Effective date 7-7-77</i></p>	155	Aged, blind or disabled	No

² As long as the newborn lives with his/her mother, who is an MA recipient or meets certain MA eligibility factors.

Department:
Human Services

Program:
Medical Assistance (Medicaid)

	MA Category	BEM Item	Unique Non-Financial Eligibility Factor	Automatic MA Eligibility
SSI-Related Categories:				
18.	<p>COBRA Widow(er)s: A person who received RSDI as a disabled widow(er) in January 1984 and also received SSI, who continued to receive RSDI but whose SSI ended due to a special RSDI increase for certain disabled widow(er)s and subsequent RSDI COLA increases, and who would be eligible for SSI if those increases had not been paid, is eligible for MA.</p> <p style="text-align: right;"><i>Effective date 11-7-86</i></p>	156	Aged, blind or disabled	No
19.	<p>Early Widow(er)s: A person who receives at least some RSDI as early widow(er) under Section 202(e) or (f) of the Social Security Act, who is not eligible for Medicare Part A, who lost SSI eligibility due to the receipt of RSDI under Section 202, and who would be eligible for SSI except for the RSDI received under Section 202, is eligible for MA.</p> <p style="text-align: right;"><i>Effective date 2-23-89</i></p>	157	Blind or disabled	No
20.	<p>DAC: A person receiving disabled adult children (DAC) RSDI benefits, who received SSI but who lost eligibility for SSI due to the receipt of DAC RSDI and who would be eligible for SSI except for the receipt of DAC RSDI, is eligible for MA.</p> <p style="text-align: right;"><i>Effective date 5-15-89</i></p>	158	Aged, blind or disabled	No
21.	<p>AD-Care: Aged or disabled persons whose assets do not exceed \$2,000 for one/\$3,000 for a couple and net income does not exceed 100% of the poverty level.</p> <p style="text-align: right;"><i>Effective date 1-1-95</i></p>	163	Aged or disabled	No
22.	<p>Extended-Care: Aged, blind or disabled persons who reside (or are expected to reside) for at least 30 days in hospitals or long-term care facilities or who are waiver clients and who meet certain income and asset requirements are eligible for MA.</p> <p style="text-align: right;"><i>Effective date 5-1-92</i></p>	164	Aged, blind or disabled	No
23.	Medicare Savings Programs	165	Medicare Part A	No

Department:
Human Services

Program:
Medical Assistance (Medicaid)

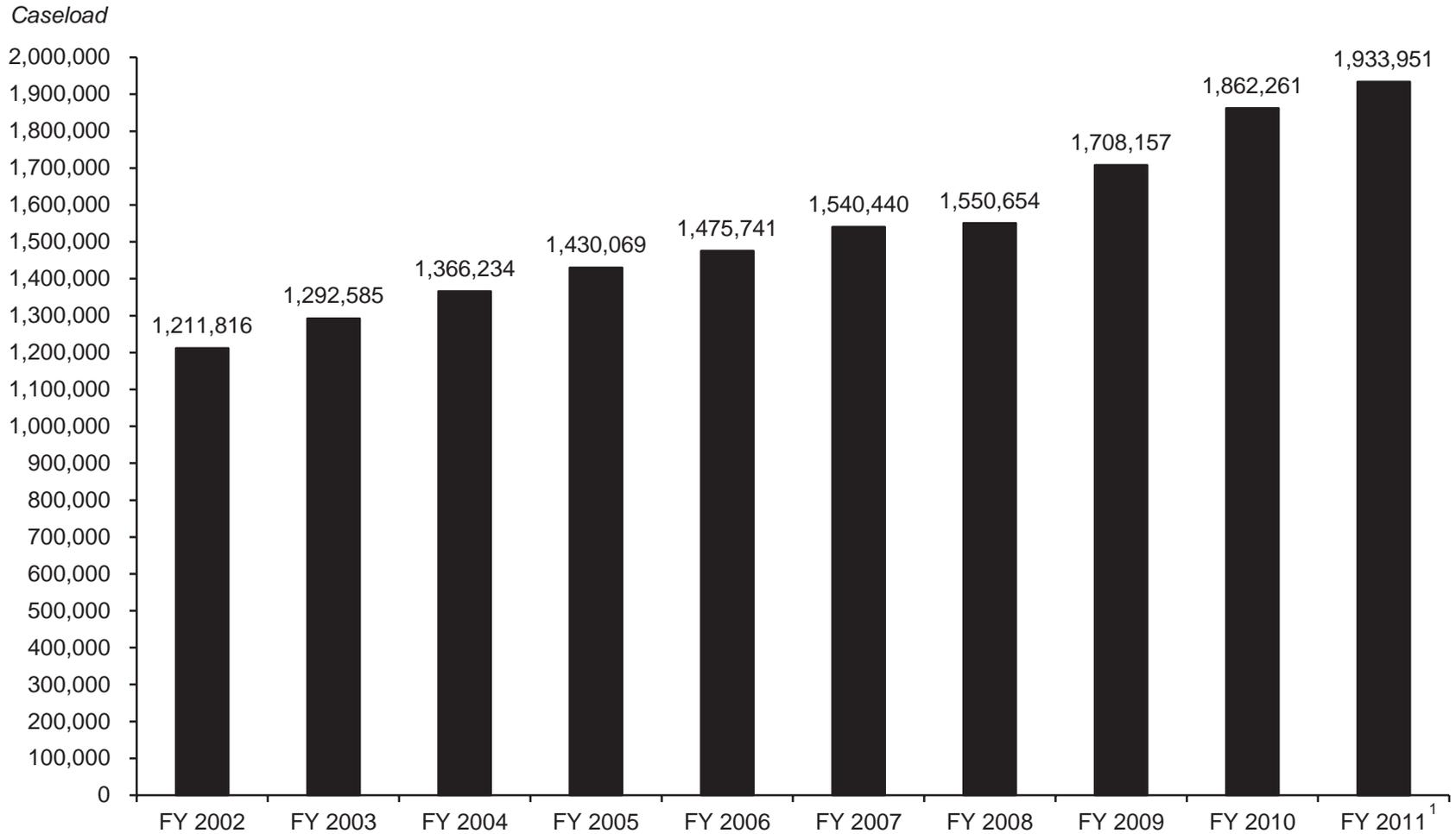
	MA Category	BEM Item	Unique Non-Financial Eligibility Factor	Automatic MA Eligibility
SSI-Related Categories:				
24.	<p>Group 2 Aged, Blind and Disabled: Aged, blind or disabled persons who meet the Group 2 income and asset requirements are eligible for MA. Incurred medical expenses may be used in determining eligibility (spend-down).</p> <p style="text-align: right;"><i>Effective date 1966</i></p>	166	Aged, blind or disabled	No
25.	<p>QDWI: Persons entitled to Medicare Part A under section 1818A of the Social Security Act who have income up to 200% of the poverty level and who are not eligible for MA under any other category are eligible for MA payment of Medicare Part A premiums.</p> <p style="text-align: right;"><i>Effective date 7-1-90</i></p>	169	Type of Medicare	No
26.	<p>Home Care Children: Disabled children under age 18 who require institutional care but who can be cared for at home for less cost are eligible for MA. Only the child's (and not the parent's) income and assets are considered in determining eligibility. (Medical eligibility for this category is determined by DPH).</p> <p style="text-align: right;"><i>Effective date 10-1-87</i></p>	170	Disabled	No
27.	<p>Children's Waiver: Disabled children who require institutional care but can be cared for at home for less cost are eligible for MA. Only the child's (and not the parent's) income and assets are considered in determining eligibility. (Medical eligibility for this category is determined by DMH.)</p> <p style="text-align: right;"><i>Effective date 1-1-92</i></p>	171	Disabled	No
28.	Breast and Cervical Cancer Prevention and Treatment Program	173	Health department cancer screening	No
29.	<p>Freedom to Work (FTW): A disabled client age between 16 and 64 who has earned income, and the month being tested is not before January 2004, who is employed and meets all other MA eligibility requirements, is eligible for FTW. Note: SSI recipients whose SSI eligibility has ended due to financial factors are among those who should be considered for this program.</p>	174	Income eligibility exists when a client's net unearned income does not exceed 100% of the Federal Poverty Level (FPL).	No

Department:
Human Services

Program:
Medical Assistance (Medicaid)

	MA Category	BEM Item	Unique Non-Financial Eligibility Factor	Automatic MA Eligibility
SSI-Related Categories:				
30.	Foster Care Transitional Medicaid (FCTMA): Children in this category are transitioning from foster care to adulthood. Children aging out of foster care on their 18th birthday are eligible for Foster Care Transition Medicaid (FCTMA) from age 18 through their 21st birthday. <i>Effective 4-1-08</i>	118	Referral from Children Services	Yes

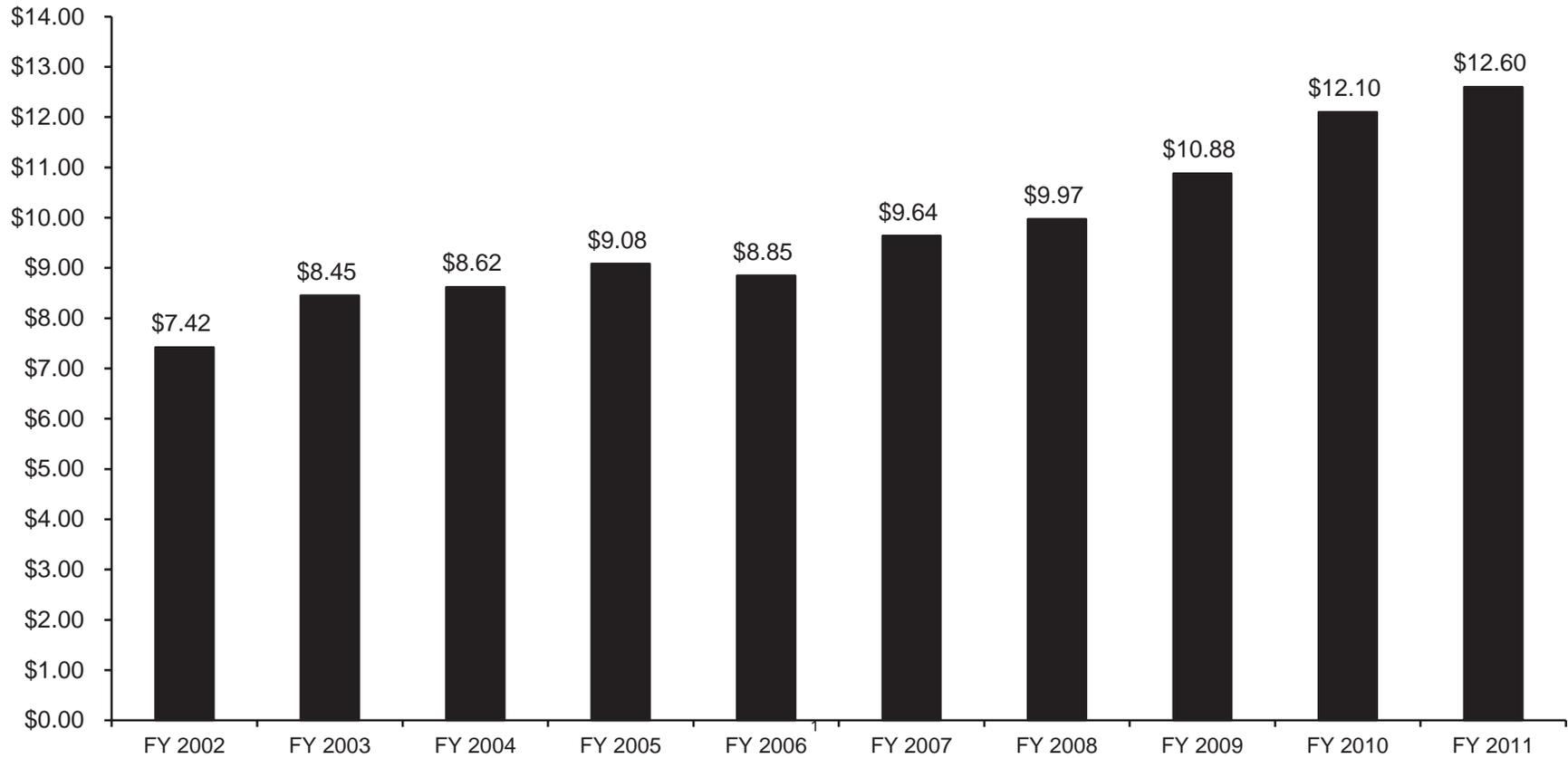
DEPARTMENT OF HUMAN SERVICES TOTAL MEDICAID RECIPIENTS FY 2001 - FY 2011



¹ Medicaid recipient totals have increased year-over-year since FY 2002. The monthly average in FY 2011 was an all-time record 1.93 million.

DEPARTMENT OF HUMAN SERVICES MEDICAID EXPENDITURES FY 2002 - FY 2011

*Medicaid Expenditures
Billions*



Note: From FY 2002 through FY 2011 Medicaid (MA) expenditures (Medical Assistance plus MA Administration) increased 70 percent.

Source: Michigan Department of Technology, Management and Budget.

¹ FY 2006 expenditures decreased from FY 2005 due to the implementation of Medicare Part D prescription drug benefits and new state financial participation requirements.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Public Assistance	Program: Refugee Assistance Program

PROGRAM STATEMENT

The Refugee Assistance Program (RAP) is a federal program which helps refugees become self-sufficient after their arrival in the United States. RAP provides assistance to individuals and families who have left their country of origin because of political, religious or ethnic persecution. Services provided include: Refugee Cash Assistance, Refugee Medical Assistance, Health Screening, Employment Support Services and if qualified, Unaccompanied Minors Foster Care. Refugees may also be eligible for cash assistance and services funded by Temporary Assistance for Needy Families (TANF). Private providers under contract with the RAP deliver services. DHS is the designated agency responsible for the delivery of services to refugees. DHS staff determines eligibility and makes necessary referrals, monitors contractor compliance, and develops grant proposals for this public-private partnership program. Primary resettlement is accomplished through local affiliates of national voluntary agencies. Eight local affiliates of national agencies have resettled refugees in more than 60 Michigan counties.

LEGAL BASIS

- Federal Refugee Act of 1980, P.L. 104-193
- 8 USC Sec. 1522 (a) (9), (e), Note (Sec. 501)
- 45 CFR 400
- 45 CFR 401
- Executive Order No. 12341 (Jan. 21, 1982)
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

SOURCE OF FINANCING

- 100% federal funds

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS

- 1,045 individuals placed in employment in FY 2011.
- Average wages increased to \$8.64 (FY 2011), from \$8.43 per hour (FY 2010).
- 35 percent of employment placements provided full health benefits (FY 2011).
- Health screenings completed (FY 2011): 3,292.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Public Assistance	Program: Refugee Assistance Program

- In FY 2011, DHS administered special grants and projects to increase family self-sufficiency, assist school age refugees through the School Impact Program, and increased employment opportunities for Bosnian and Iraqi refugees who have lived in the United States for more than five years and are currently living in the Detroit area.
- The Refugee Assistance Program provided services to 354 youth per month in the Unaccompanied Refugee Minors Foster Care Program in FY 2011.
- Michigan has received more than 80,000 refugees since 1975. Since FY 2000, Michigan has resettled 23,548 new arrivals. Prior to September 2001, Michigan resettled more than 2,700 refugees per year. Between 2001 and 2006, refugee arrivals averaged 1,127 per year. New arrivals increased to 1,284 in FY 2007; 3,303 in FY 2008, and to 3,503 in FY 2009. The increase in new arrivals from FY 2006 through FY 2009 reflects ongoing internal problems in Iraq. Michigan ranked fifth among all states in the number of refugees resettled in FY 2010. In FY 2010, more than 3,060 refugees were resettled in Michigan. In FY 2011, the number of arrivals decreased to 2,588 due to increased security restrictions instituted by the Department of Homeland Security. The number of arrivals in FY 2012 is expected to total approximately 3,200.

Department:
Human ServicesAppropriation Unit:
Public AssistanceProgram:
State Disability Assistance (SDA)**PROGRAM STATEMENT**

The State Disability Assistance (SDA) program provides financial assistance to Michigan's disabled low-income adults to meet basic personal and shelter needs. SDA is a cash assistance program for disabled adults, caretakers of disabled individuals and persons age 65 or older. SDA recipients have little or no money to pay for living expenses such as rent, heat, utilities, clothing, food or personal care items, and SDA is intended to meet these basic needs. The monthly maximum benefit for new cases in FY 2012 is \$200 (\$315 for a married couple). Ongoing SDA cases receiving benefits prior to FY 2012 will continue to receive the previous payment standard of \$269 (\$423 for a married couple). In FY 2012, SDA recipients with no other income are eligible to receive \$200 per month in food assistance. SDA cases can be composed of a single person or spouses who live together.

Eligibility Factors:

Financial: To be eligible for SDA, applicants must meet income and asset requirements. The asset limit for SDA is \$3,000. Most types of earned and unearned income are counted when determining eligibility. However, most SDA recipients do not have assets or income. A full-time minimum wage job exceeds SDA income eligibility standards.

Non-Financial: A person must meet disability criteria, be caring for a disabled person, or over the age of 65. An individual meets disability criteria for SDA if:

- The individual is receiving Social Security Income (SSI), Social Security benefits based on his or her own disability, or Medicaid due to a disability.
- The individual meets the federal Social Security Administration (SSA) disability standards with the exception of duration. SDA has minimum disability duration of 90 days.
- The individual is age 65 or older, and has applied for benefits with the SSA.
- The individual is receiving services from Michigan Rehabilitation Services.
- The individual is receiving special education services through a local intermediate school district and is under the age of 26.
- The individual is caring for a disabled person when assistance is medically necessary for at least 90 days and the disabled individual and the caretaker live together.
- The individual is residing in an adult foster care home, home for the aged, a substance abuse treatment center (SATC), or a county infirmary.
- The individual is receiving post-residential substance abuse services. Individuals are SDA-eligible for 30 days following discharge from the SATC.
- The individual has an AIDS diagnosis.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Public Assistance	Program: State Disability Assistance (SDA)	

SOURCES OF FINANCING

- State funds.
- SSI recoveries.

LEGAL BASIS

- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS

The State Disability Assistance (SDA) program provides interim financial assistance to Michigan’s neediest disabled adults. Disability is a factor for all individuals found eligible for this program. Benefits are meant to help meet basic personal and shelter needs. Michigan recovers all SDA General Funds payment amounts when individuals are found eligible for Supplemental Security Income (SSI). In FY 2010, Michigan received SSI recoveries from 4,570 individuals. SSI recoveries in FY 2011 were lower at 4,109, with associated payment recoveries of \$8.9 million. DHS Reconciliation and Recoupment staff report the somewhat downward trend from FY 2010 through FY 2011 is largely due to Social Security Administration (SSA) staff more quickly recognizing and making SDA clients eligible for SSI. Doing so reduces the overall time frame during which the same client is receiving SDA. Therefore, there is not a net loss in state revenues, but rather fewer cases requiring payment recovery.

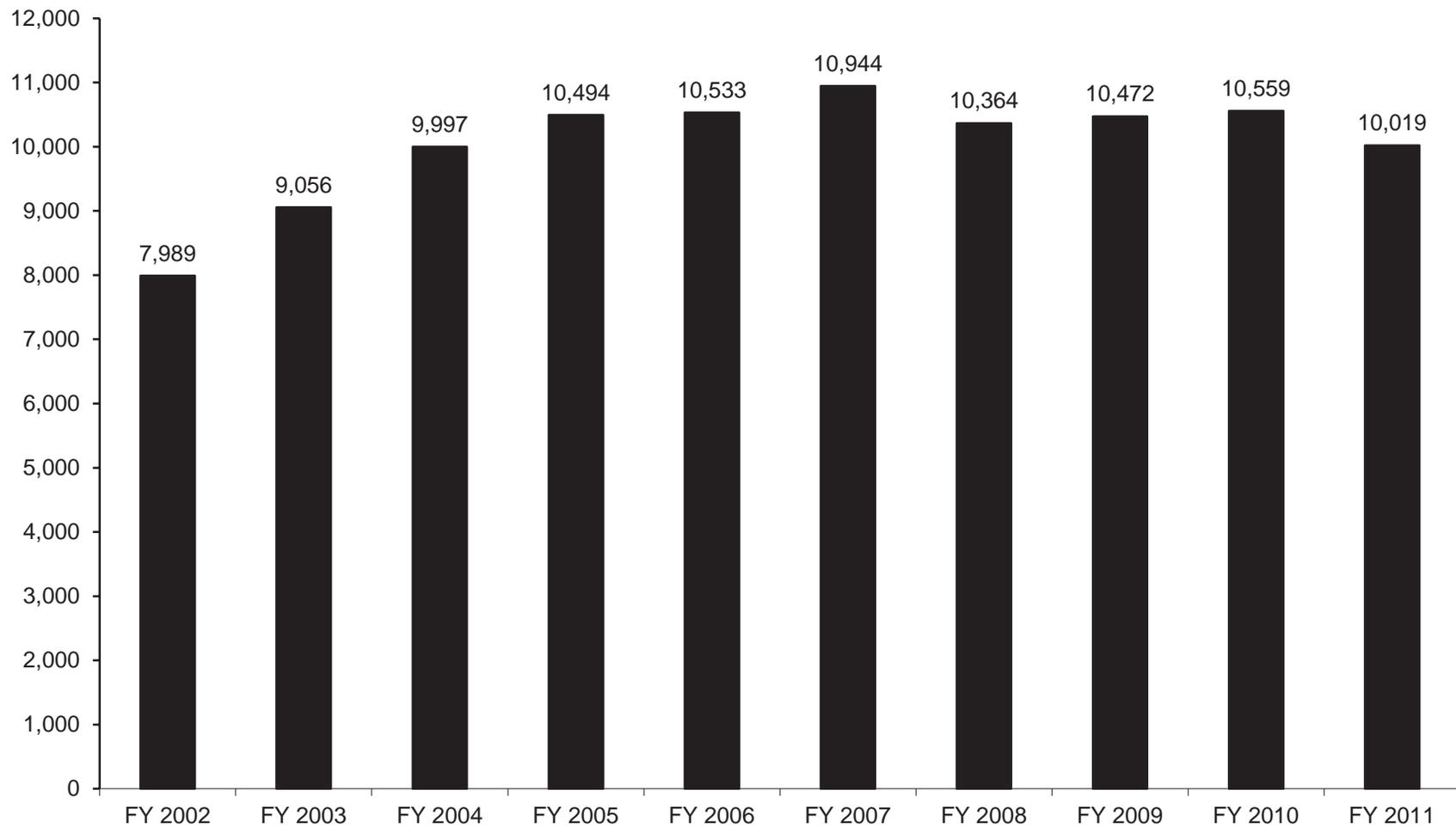
A large measure of SDA success is found in annual recipient turnover rates. While monthly and annual average recipient counts remained above 10,000 in FY 2011, the annual turnover rate is greater than 100 percent. The count of unduplicated SDA recipients in FY 2011 was 21,654. That is, while the monthly average recipient count was 10,094 in FY 2011, more than twice that number received SDA benefits at some point during the year. The turnover rate reflects subsequent receipt of SSI, and other outcomes allowing individuals to no longer require SDA. As recipients move from SDA to SSI, they are replaced by newly eligible SDA recipients.

The following graphs present SDA caseload averages and SDA maximum payments as a percentage of the poverty level. The SDA maximum payment has been declining as a percentage of the poverty level. The FY 2011 caseload average was 10,019.

DEPARTMENT OF HUMAN SERVICES STATE DISABILITY ASSISTANCE (SDA)

Average Monthly Cases
FY 2002 - FY 2011

Caseload

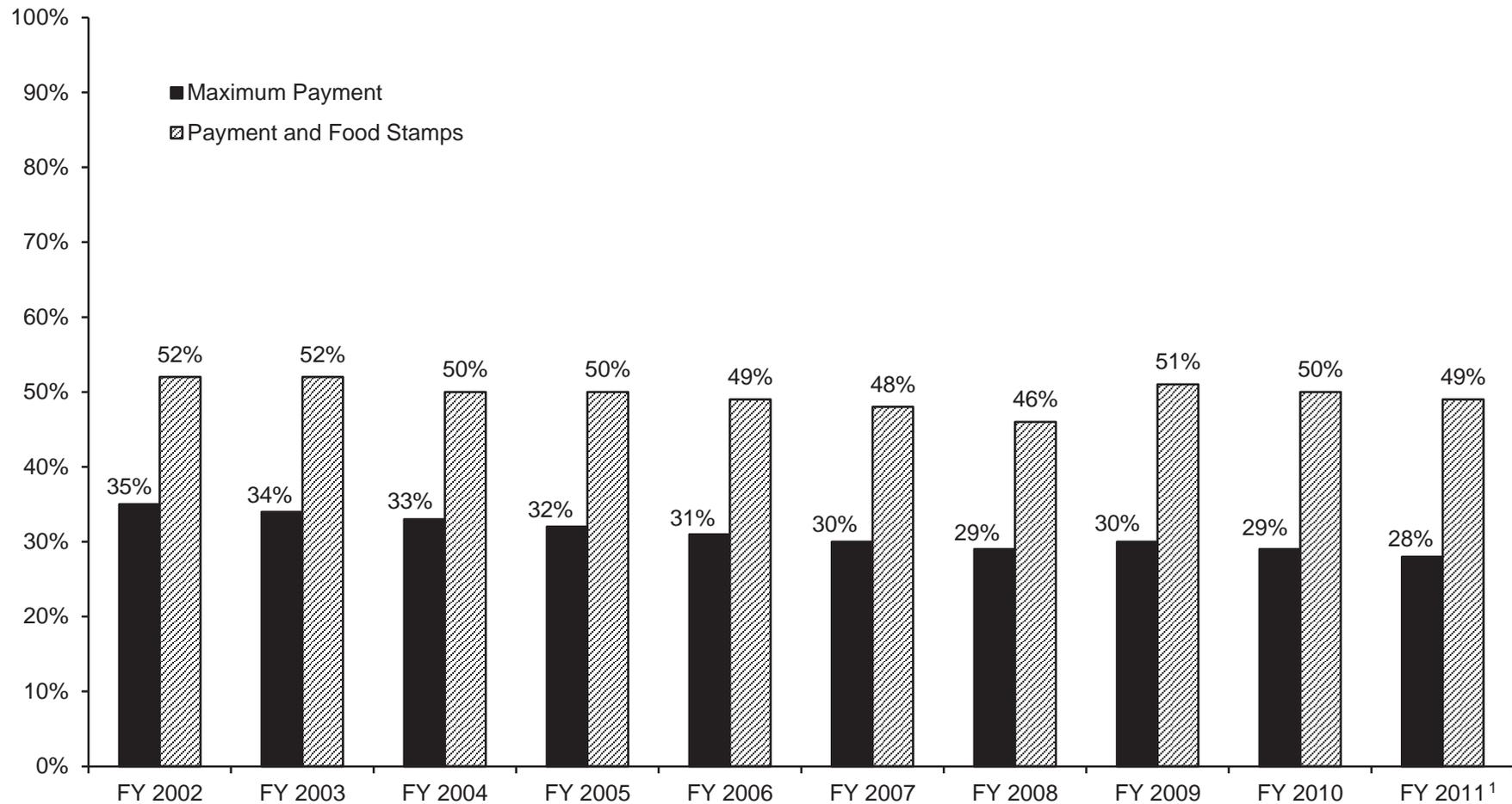


Note: The FY 2011 caseload average was 10,019, a drop of 540 (5.1 percent) from the FY 2010 average.

DEPARTMENT OF HUMAN SERVICES

SDA MAXIMUM PAYMENT AS A PERCENTAGE OF THE POVERTY LEVEL

One-Person Case in Wayne County Based on Federal Poverty Thresholds



¹ The FY 2011 SDA maximum payment was 28 percent of the poverty level. Adding the value of Food Assistance Program benefits to the SDA payment resulted in a benefit that was 49 percent of the poverty level. NOTE: Maximum SDA payments for new cases in FY 2012 drop to \$200, which is estimated to be 21 percent of the poverty level. Adding the value of Food Assistance Program benefits to the FY 2012 SDA payment results in an estimated benefit level equal to 42 percent of the poverty level.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department	Appropriation Unit	Program	
Human Services	Public Assistance	State Emergency Relief (SER) Program	

PROGRAM STATEMENT

The goal of the State Emergency Relief (SER) Program is to prevent serious harm to individuals and families by helping them obtain safe, decent and affordable shelter and other essentials when they face an emergency due to factors or conditions beyond their control. The DHS FY 2012 Appropriations Act includes \$35.9 million for this program. All persons (other than undocumented aliens and households with fugitive felons) are potentially eligible for SER, with no residency requirements. The SER applicant group must be physically present in Michigan at the time of application, must have an emergency that threatens their health or safety, and the emergency must be resolvable through issuance of SER. SER is not issued to resolve applicant-created emergencies. Covered services include:

- Relocation: Provides money for rent, security deposits, and moving expenses.
- Emergency Shelter: Provides emergency food and shelter via the Salvation Army.
- Home Ownership: House payments, property taxes, homeowner’s insurance and mobile home owner’s lot rent, up to a lifetime limit of \$2,000, to prevent loss of a home if no other resources are available and the home will be available to provide safe, affordable shelter in the foreseeable future.
- Home Repairs: Up to a lifetime limit of \$4,000 for energy-related repairs (furnace repair/replacement) and \$1,500 for non-energy-related repairs, to correct unsafe conditions and to restore essential services.
- Utility Assistance: Restoration or shutoff prevention of water and cooking gas service (up to a fiscal year cap of \$175) and utility deposits and reconnection fees (up to \$200 per occurrence) when service is necessary to prevent serious harm.
- Burial: Payments are authorized for burial or cremation when the deceased person’s estate and contributions from friends or relatives are not sufficient to pay for burial or cremation (there is a \$4,000 limit on voluntary contributions from friends or relatives over and above the SER payment).
- Heating Fuel and Electricity: Assistance is provided under the Low-Income Home Energy Assistance Program (LIHEAP) with yearly limits changing based on available funding.

SOURCES OF FINANCING

- Federal TANF funding (Title IV-A).
- State funding for all families with children not eligible for TANF funding, and for all other childless couples and single adults.
- Federal LIHEAP funds.

LEGAL BASIS

- Social Security Act
- Michigan Administrative Code: Rules 400.7001-400.7049
- The Social Welfare Act, 1939 PA 180
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department	Appropriation Unit	Program	
Human Services	Public Assistance	State Emergency Relief (SER) Program	

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS

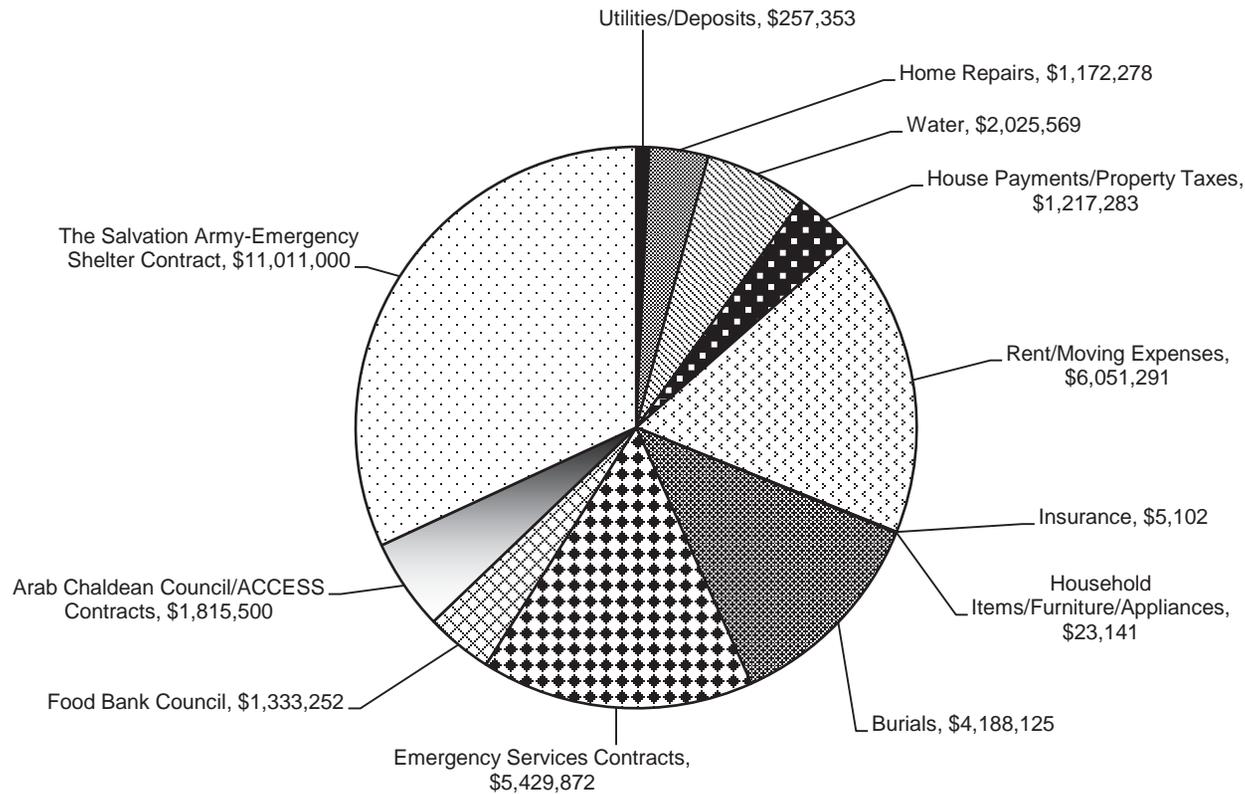
In FY 2011, an average of 35,986 households (92,758 recipients) received SER assistance. This is a monthly average of 7,730 recipients that received some type of emergency service. SER is a safety net program for low-income households. It provides limited funding to resolve immediate emergencies that other agencies and resources in Michigan may not be able to provide, to support safe housing and prevent homelessness.

SER energy assistance is within the LIHEAP appropriation. As reflected in the graph (following page), nearly 50 percent of FY 2011 SER expenditures were used to provide emergency food and shelter via the Salvation Army and other services contracts, such as utilities/deposits, water, house payments/taxes, rent/mobile home rent, insurance, household items/food & other, home repairs and emergency services contracts.

DEPARTMENT OF HUMAN SERVICES

SER EXPENDITURES - NON-EMERGENCY ASSISTANCE

FY 2011 = \$34,529,765



- Nearly 47 percent of FY 2011 SER expenditures were used to provide emergency food and shelter via the Salvation Army and other services contracts, such as: Utilities/Deposits, Water, House Payments/Taxes, Rent/Mobile Home Rent, Insurance, Household Items/Food & Other, Home Repairs and Emergency Services Contracts.
- **Note:** SER energy assistance is within the LIHEAP appropriation.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Public Assistance	Program: Supplemental Security Income

PROGRAM STATEMENT

Supplemental Security Income (SSI) is a federally administered income maintenance program for the aged, blind and disabled. Six categories of living arrangements are recognized: Independent Living, Household of Another, Domiciliary Care (Supervisory), Personal Care, Home for the Aged and Medicaid Facility, i.e., nursing home. Payment amounts vary by living arrangements. Federal payments are supplemented with state funds. The majority of these state funds are paid to persons in independent living arrangements. Additionally, Medicaid payments for personal care services are provided for persons who need these services in adult foster care categories.

The Social Security Administration (SSA) charges the state a fee, per transaction, for administering state funds. To minimize these fees the state administers the state funds paid to those persons in Independent Living and Household of Another living arrangements with the state SSI Payment program. This group constitutes approximately 93 percent of the total number of SSI recipients receiving state funds. The SSA administers state funds to mandatory SSI individuals in all living arrangements and those in Domiciliary (Supervisory) Care, Personal Care, Home for the Aged, and Medicaid Facility living arrangements.

The passage and enactment of federal welfare reform legislation in 1996 changed SSI eligibility for children and legal immigrants.

SSI for Legal Aliens – Future legal aliens were barred from receiving SSI unless they were residing in the United States on August 22, 1996. Exceptions for:

- Legal aliens already receiving benefits on August 22, 1996 could continue to receive benefits.
- A legal alien residing in the U.S. on August 22, 1996 who becomes disabled may qualify for SSI.
- Refugees, asylees, those granted withholding of deportation, Cuban/Haitian entrants or Amerasian immigrants are eligible for SSI their first seven years in the United States.
- Lawful permanent residents with 40 qualifying work quarters.
- Veterans, active duty military, spouses and dependents.

SSI for Children: With the passage of 1996 welfare reform legislation, a revised disability standard for new and pending applications was established. This standard eliminated the listings-only approach to assessment of child disability and added a “comparable severity standard” similar to that used on adult cases. The Social Security Administration (SSA) conducted redeterminations of eligibility for current beneficiaries based on the new definition.

Disability for Drug Abuse or Alcoholism: Those individuals receiving SSI with drug abuse or alcoholism as the primary cause were no longer eligible effective January 1, 1997.

Department:
Human Services

Appropriation Unit:
Public Assistance

Program:
Supplemental Security Income

SOURCES OF FINANCING

- SSI benefits are 100 percent federally funded and are not appropriated in the DHS budget.
- State supplementation of the federal SSI benefit is 100 percent state-funded and is appropriated in the DHS budget.

LEGAL BASIS

- Social Security Act, Title XVI
- Social Welfare Act, 2008 PA 280
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS

To enhance the financial stability of families, Michigan will continue to pursue benefits for disabled and financially needy adults and children through SSI. Families with children who are potentially eligible for SSI benefits are assisted with the application process.

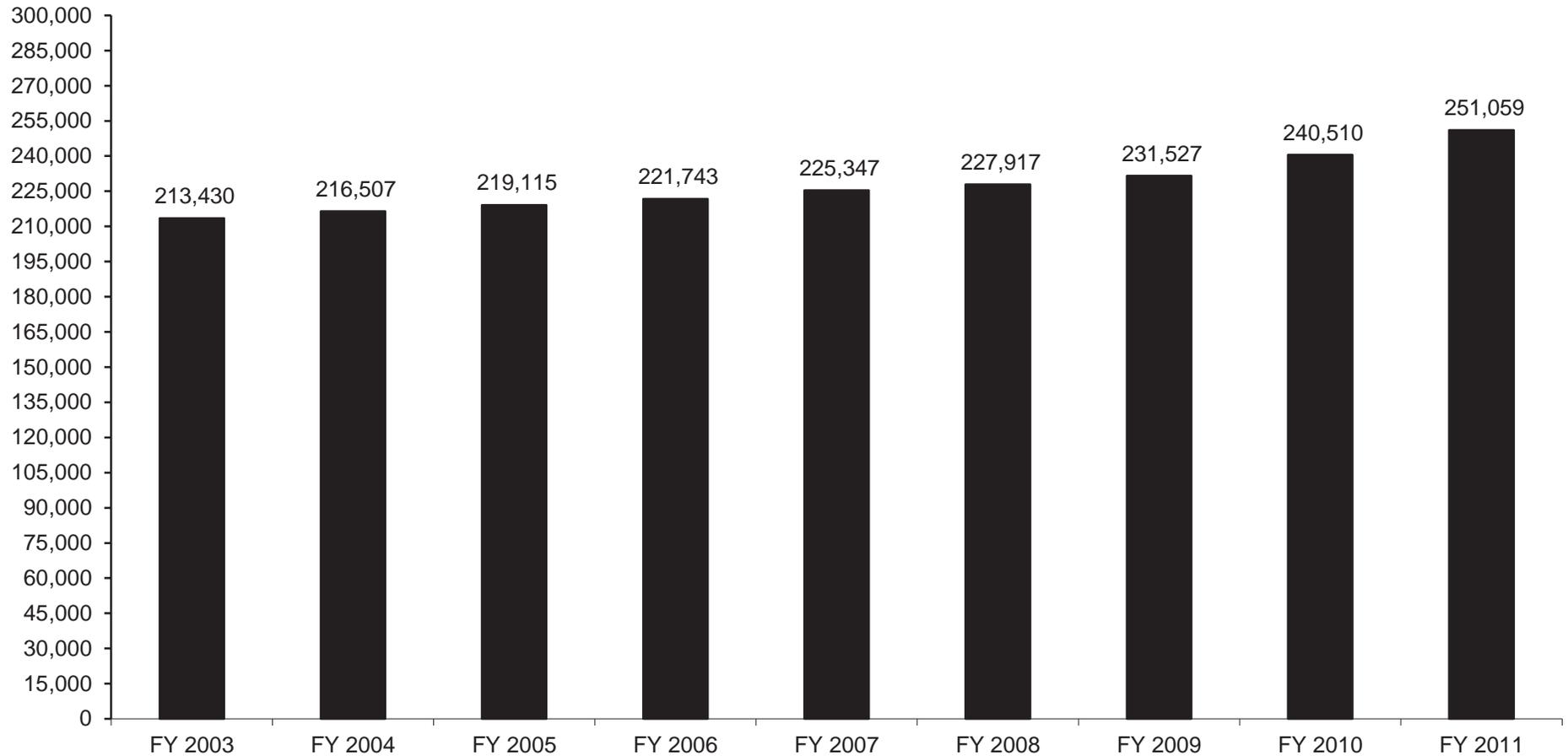
A 1990 U.S. Supreme Court decision, *Sullivan v. Zebley*, invalidated SSI child disability regulations and ordered they be replaced with new regulations. The court decision found SSA's listing-only methodology for determining SSI child claims inconsistent with the statutory standard of "comparable severity" set forth in the Social Security Act. The court invalidated the previous SSA rulings as they were not providing SSI child claimants with individualized functional assessment similar to the functional analysis used in adult claims. The court concluded that SSA could determine the effect of an impairment on a child's ability to perform age-appropriate activities in much the same way it determines the effect of impairments on an adult's ability to work. This ruling dramatically altered the SSI program as it operated after the *Zebley* decision and increased the number of children deemed eligible for SSI. The portion of children under 21 receiving SSI in Michigan is approximately 20 percent. FIP and food assistance benefits to a family will increase if a child's SSI benefits are terminated.

As displayed in the SSI caseload graph (following page), caseloads have increased year-over-year since FY 2003. The increase through 2011 was 37,629 (17.6 percent).

DEPARTMENT OF HUMAN SERVICES SUPPLEMENTAL SECURITY INCOME

Number of Recipients
FY 2003 - FY 2011

Number of Recipients



Note: SSI caseloads have increased year-over-year since FY 2003. The increase through FY 2011 was 37,629 (17.6 percent).

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department of Human Services	Appropriation Unit Child Welfare Services	Program Adoption Services Program

PROGRAM STATEMENT

The Adoption Services Program provides for adoption planning and placement of children who are permanent court wards due to termination of parental rights. Services are provided to recruit and support permanent placements of children in homes that are capable of meeting the long-term physical, emotional, educational and behavioral needs of the child. Efforts are made to place children into adoptive homes as soon as possible following termination of parental rights. Services are provided by local DHS office adoption staff or adoption purchase of service contracts with 63 private Michigan child-placing agencies. Children receiving adoption services are in foster care and may have special needs, (be older, a member of a sibling group, or may be physically, mentally or emotionally challenged). Adoption services include assessing the placement needs of the child; recruitment, orientation and training of potential adoptive families; completion of an adoptive family assessment (home study); certification of eligibility for adoption subsidy; adoptive placement and supervision; and the provision of post-adoption support services.

SOURCES OF FINANCING

- Federal Title IV-E
- State funds
- TANF

LEGAL BASIS

- Adoption Assistance and Child Welfare Act of 1980, PL 96-272
- Indian Child Welfare Act of 1978, PL 95-608
- Adoption and Safe Families Act of 1997, PL 105-89
- Multiethnic Placement Act of 1994, PL 103-382
- Interethnic Placement Act of 1996, PL 104-188
- Adam Walsh Child Protection and Safety Act, PL 109-248
- Child Care Organization Act, 1973 PA 116
- Michigan Children's Institute, 1935 PA 220
- Michigan Children's Institute, 2011 PA30 Amended PA220
- Social Welfare Act, 1939 PA 280
- Juvenile Code, Chapter XIA, 1939 PA 288
- Adoption Code, 1974 PA 296
- Foster Care and Adoption Services Act, 1997 PA 172 Amended PA 203
- Foster Care and Adoption Services Act, 1998 PA 495 Amended PA 203
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department of Human Services	Appropriation Unit Child Welfare Services	Program Adoption Services Program

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

Michigan effectively uses a public/private partnership to achieve permanency through adoption for waiting children. Permanency planning decisions are child-focused and carefully consider the unique needs and circumstances of each child. Whenever possible, placements are made with families who have an existing relationship or attachment to the child. Additionally, efforts are made to provide an adoptive home where siblings may stay together. To increase program effectiveness and outcomes, time frames were established in adoption policy.

Michigan’s performance-based adoption contracts provide a financial incentive to private contractual agencies that actively recruit families to adopt children. The financial incentive is based on adoption timeliness or if the child was adopted from either a residential placement or from the Michigan Adoption Resource Exchange. Contracted agencies are required to reimburse the permanency portion of the incentive in the event that the adoption dissolves within 182 days of the Order of Adoption.

In FY 2011, preliminary figures show that 2,480 children were adopted from foster care. The adoption program continues to keep proportional pace relative to foster care and adoption levels.

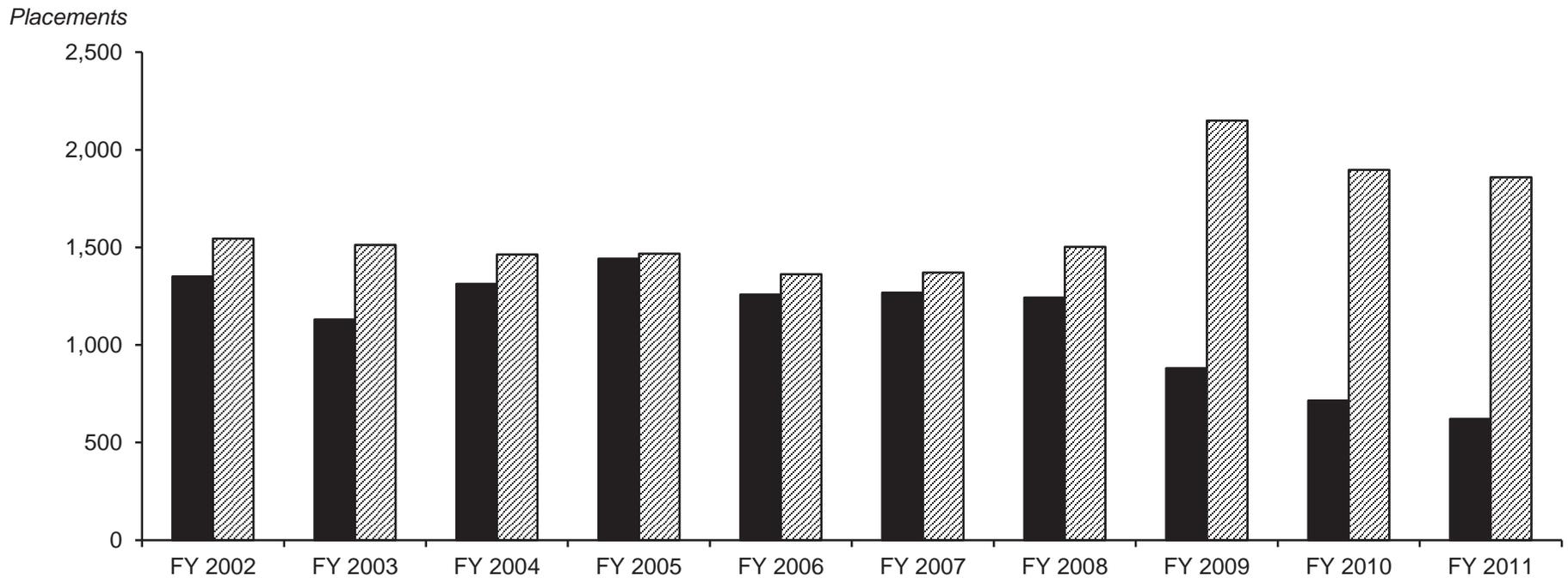
Based on the most recently available data:

- Of all children discharged from foster care to a finalized adoption, 33.6 percent were discharged in less than 24 months from the date of the most recent removal from the home.
- Of all children discharged from foster care to a finalized adoption, the median length of stay was 29.2 months from the date of the most recent removal from the home.

DEPARTMENT OF HUMAN SERVICES

FINALIZED ADOPTIONS - NUMBER OF ANNUAL PLACEMENTS

Fiscal Year 2002 - Fiscal Year 2011



■ DHS	1,351	1,130	1,313	1,442	1,259	1,268	1,243	881	715	621 ¹
▨ Private Agency	1,544	1,513	1,463	1,468	1,362	1,370	1,502	2,149	1,897	1,859 ¹
Total	2,895	2,643	2,776	2,910	2,621	2,638	2,745	3,030	2,612	2,480 ¹

NOTE: Finalized adoptive placements are placements for which the court has issued final orders dismissing court wardship and confirming adoptions.

Source: Product of Children's Services Data Management Unit

¹ FY 2011 Preliminary figures.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Child Welfare Services	Program: Adoption Subsidy

PROGRAM STATEMENT

The Adoption Subsidy program provides support subsidy, nonrecurring adoption expenses reimbursement, and/or medical subsidy to adoptive families after the adoptive placement, or final adoption of a special needs child in Michigan. The financial support assists families with caring for special needs children (for example, older children, sibling groups, children placed with relatives, children with disabilities, medical, and/or mental health needs, children whose parental rights have been terminated, etc). The eligibility criteria for subsidy assistance are determined by established federal and/or state laws, and DHS policies. Each individual child’s circumstance is considered in determining eligibility, and whether one or more subsidy benefits will be approved to support the adoption. Adoption support subsidy assists adoptive families with the daily costs of caring for the child. The subsidy rates are linked to the foster care rate that would be appropriate if the child were in a family foster home. Adoption support subsidy is a monthly payment and has three funding sources: Title IV-E, state funds, and Temporary Assistance to Needy Families (TANF). Support subsidy benefits are the same regardless of the funding sources. Nonrecurring adoption expenses are reimbursements to the adoptive family for expenses (up to \$2,000) specifically related to the adoption. Adoption support subsidy and nonrecurring adoption expenses require that an approved subsidy agreement is in place prior to the finalized adoption for eligibility. Adoption Medical subsidy assists adoptive parents with the costs of care for a physical, mental, and/or emotional condition which exists, or the cause of which existed, prior to the adoption. Medical support subsidy has two funding sources: Federal Title IV-B Subpart 2 and TANF.¹ You can apply for Adoption Medical Subsidy before or after the adoption is finalized. This allows adoptive parents to add conditions that were caused prior to the adoption that were not apparent or were undiagnosed.

Adoption subsidies are perhaps the single-most powerful tool by which the child welfare system can encourage adoptions, and provide post-adoption support to families. Adoptive parents must be informed about the adoption subsidy program when they express an interest in adopting. Adoption workers must request an adoption subsidy and have it approved prior to finalization of the adoption.

SOURCES OF FINANCING

- Federal Title IV-E
- Federal Title IV-B Subpart 2
- State Funds
- Temporary Assistance to Needy Families Block Grant (TANF)

¹ Every adoption support subsidy case does not have a medical subsidy agreement. Medical subsidy is supported by state funding, and by Federal Title IV-B Subpart 2 funding. Only Federal Title IV-B Subpart 2 funding may be used for counseling.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Child Welfare Services	Program: Adoption Subsidy

LEGAL BASIS

- Adoption Assistance and Child Welfare Act of 1980, Federal PL 96-272
- Social Welfare Act, 1939 PA 280
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X
- The Adoption and Safe Families Act of 1997

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

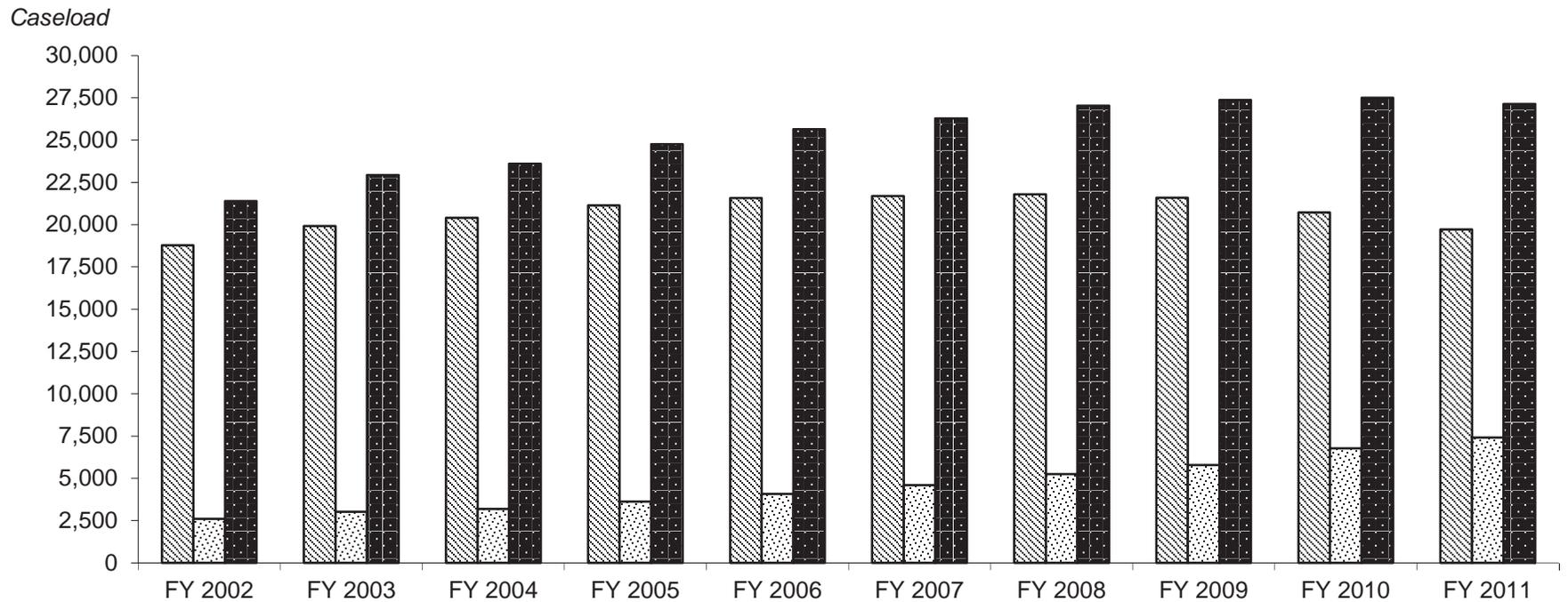
Federal law requires efforts be made to place a child in an adoptive home without a subsidy unless this is the only placement that can be made in the child's best interest. The adoptive parents must be informed about the program and must specifically request an adoption subsidy prior to the finalization of child's adoption. Requests for an adoption subsidy were made for approximately 99 percent of children adopted in FY 2010. Data for FY 2011 are not yet available. Of those in FY 2010, an estimated 90 percent were determined eligible to receive adoption support. Note: Adoption assistance is available only for those children certified as children with special needs as detailed in 1938 PA 280, sec. 400.115g.

As summarized in the following chart, from FY 2002 to FY 2011 average monthly caseloads increased 5,741 (26.8 percent). The second graph compares expenditures from FY 2002 to FY 2011.

DEPARTMENT OF HUMAN SERVICES

ADOPTION SUBSIDY ANNUAL AVERAGE CASELOADS

FY 2002 - FY 2011



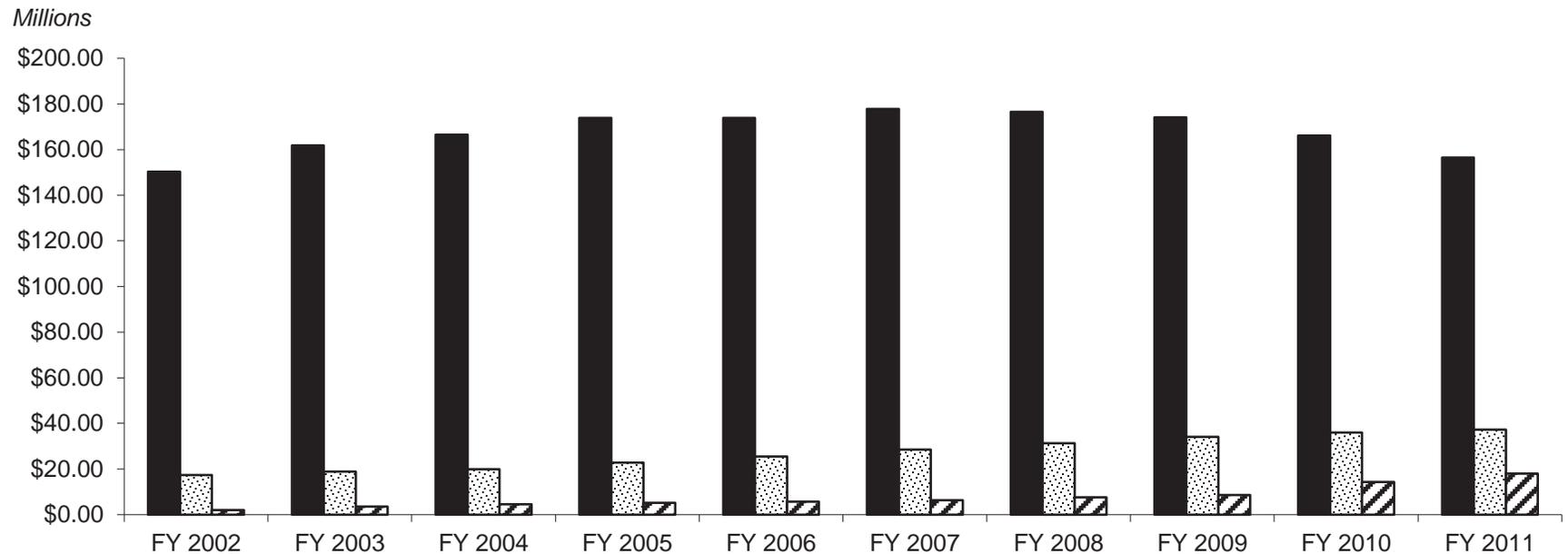
		FY 2002	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007	FY 2008	FY 2009	FY 2010	FY 2011
▨	Funded by Title IV-E	18,778	19,909	20,400	21,139	21,579	21,688	21,790	21,588	20,726	19,721
▤	Funded by TANF/State	2,608	3,028	3,195	3,619	4,069	4,591	5,248	5,781	6,774	7,406
■	Total	21,386	22,937	23,595	24,758	25,648	26,279	27,038	27,369	27,500	27,127

Note: Adoption subsidy caseloads increased 26.8 percent from FY 2002 to FY 2011. Title IV-E, TANF/State cases refer to eligibility categories of children covered by the Adoption Support Subsidy program. Effective October 1, 1997, Adoption Support Subsidy is financed by Federal Title IV-E and TANF/state funding.

DEPARTMENT OF HUMAN SERVICES

ADOPTION SUBSIDY EXPENSES: FY 2002 - FY 2011

IVE, TANF & State Funded Payments - Average Cost per Case



■ Title IV-E	\$150.30	\$161.87	\$166.48	\$173.84	\$173.84	\$177.84	\$176.57	\$174.14	\$166.13	\$156.56
▨ TANF	\$17.41	\$18.95	\$19.89	\$22.87	\$25.47	\$28.49	\$31.38	\$34.07	\$36.04	\$37.32
▧ State Funds	\$1.99	\$3.51	\$4.59	\$5.22	\$5.73	\$6.38	\$7.56	\$8.57	\$14.39	\$18.07
Total	\$169.70	\$184.33	\$190.96	\$201.93	\$205.04	\$212.71	\$215.51	\$216.78	\$216.56	\$211.95

Note: Total statewide adoption subsidy payments increased 25 percent from FY 2002 to FY 2011. Title IV-E, TANF and state funds refer to the eligibility categories of children covered by the Adoption Support Subsidy program.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Child Welfare Services	Program: Children's Foster Care

PROGRAM STATEMENT

The Children's Foster Care Program provides placement and supervision of children who have been removed from their homes due to abuse or neglect. The court authorizes removal of children from their parents and refers them to DHS for placement, care and supervision. Foster care is viewed as a short-term solution to an emergency situation and permanency planning must continue throughout the child's placement in care. Foster care intervention is directed toward assisting families to rectify the conditions that brought the children into care through assessment and service planning. When families cannot be reunified, children must be prepared for safe, appropriate permanent placements through adoption, guardianship or another permanent placement.

The foster care program is based on the following principles:

- Whenever possible, the department shall preserve the child's family. A child should be separated from his/her family only when the family is absent or is unwilling or unable, even with assistance, to provide a safe home for the child.
- If the child cannot be protected from abuse or neglect in his/her home, and removal is necessary, the primary focus of services is directed toward alleviating the conditions that brought the child in care so he/she may be returned home.
- The purpose of foster care is to provide continuity, consistency, and permanence in a family setting for the growing child. If a return home is not possible, alternative permanent plans must be pursued. Foster care policy provides caseworkers with a framework for child-focused, family-centered interventions to help achieve timely permanency planning decisions. Independent living services and supportive connections must be provided to older youth to ensure a successful transition to adulthood once they exit the foster care system.
- To improve outcomes for children and families in the foster care system, numerous child-focused, family-centered strategies are used: state and local recruitment and retention of foster homes targeting specialized groups of children, relative home licensing, concurrent permanency planning, permanency planning conferences with the involvement of parents, children, and foster parents and public/private partnerships. These strategies are achieved through self-evaluation, quality assurance and data-driven decisions.

The provision of foster care services is a joint undertaking between the public and private sectors. Currently, approximately 42 percent¹ of foster care services are purchased. The Children's Foster Care Program is closely tied to the Children's Protective Services program, Family Preservation initiatives, and the Adoption program. The Children's Protective Services program identifies those children who cannot be protected from abuse or neglect in their homes. CPS petitions the court, which has the authority to authorize the removal of a child from his/her home, and the court refers the child to DHS for placement, care, and supervision. Thus, CPS and the courts function as the entry point to the Foster Care program. The goal of the Foster Care program is to ensure the safety, permanence and well-being of children through reunification with the birth family, permanent placement with a suitable relative, a permanent adoptive home or legal guardianship.

¹ Statistical report: CFC Chart A; Foster Care Placements; September 2002 to September 2011

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Child Welfare Services	Program: Children's Foster Care

SOURCES OF FINANCING

- Titles IV-E, IV-B and XX of the Federal Social Security Act, Title XIX (Medicaid) for staffing costs only.
- State funds.
- County funds.
- TANF for staff and foster care costs.
- Chafee Foster Care Independence Program for Youth in Transition and Educational Training Vouchers, Jim Casey Youth Initiative.

LEGAL BASIS

- Federal Individuals w/ Disability Education Act of 1970 (Parts B & H), Federal PL 91-230
- Indian Child Welfare Act of 1978, Federal PL 95-608
- Adoption Assistance and Child Welfare Act of 1980, Federal PL 96-272
- Omnibus Budget Reconciliation Act of 1986, Federal PL 99-509
- Howard M. Metzenbaum Multi-Ethnic Placement Act of 1994, Federal PL 103-382
- Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Federal PL 104-193
- Adoption and Safe Families Act of 1997, Federal PL 105-89
- John H. Chafee Foster Care Independence Act of 1999, Federal PL 106-169
- Strengthening Abuse and Neglect Courts Act of 2000, Federal PL 106-314
- Fair Access Foster Care Act of 2005, Federal PL 109-113
- Deficit Reduction Act of 2005, Federal PL 109-171
- Safe and Timely Interstate Placement of Foster Children Act of 2006, Federal PL 103-239
- Adam Walsh Child Protection and Safety Act of 2006, Federal PL 109-248
- Child and Family Services Improvement Act of 2006, Federal PL 109-288
- Tax Relief and Health Care Act of 2006, Federal PL 109-432
- Fostering Connections to Success and Increasing Adoptions Act of 2008, Federal PL 110-351
- Social Welfare Act, 1939 PA 280
- Juvenile Code, Chapter XIIA, 1939 PA 288
- Michigan's Children's Institute Act, 1935 PA 220
- Child Care Organization Act, 1973 PA 116
- Adoption Code, 1974 PA 296 (added Chapter X to 1939 PA 288)
- Foster Care and Adoption Services Act, 1994 PA 203
- Child Protection Law, 1975 PA 238
- State Foster Care Review Program, 1989 PA 74
- Foster Care Youth Focus Groups, 2004 PA 18

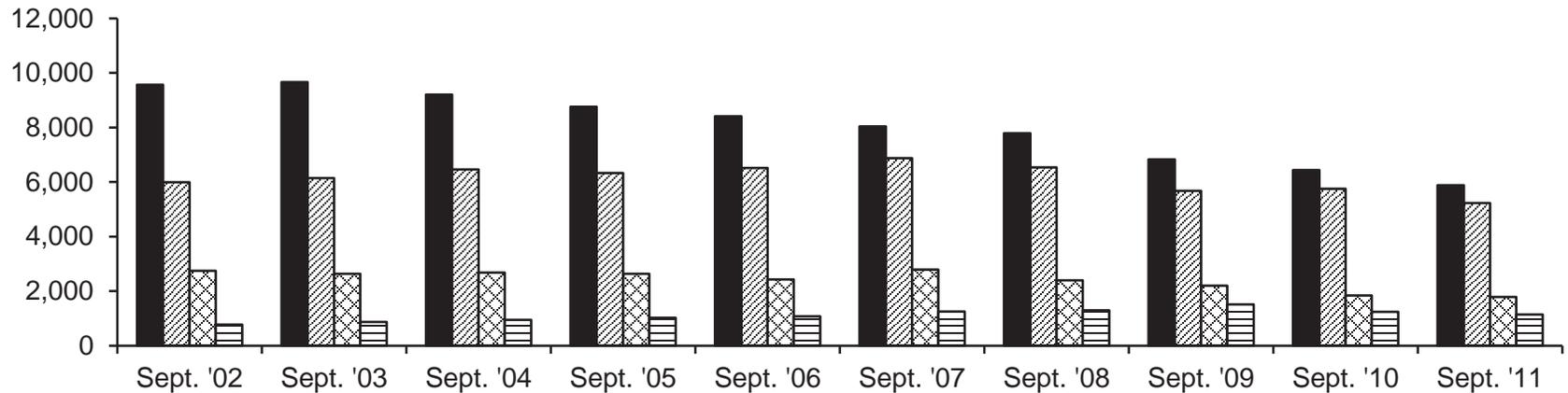
Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Child Welfare Services	Program: Children's Foster Care	

- Foster Care Review Hearings, Permanency Planning Hearings, 2004 PA 476
- Foster Care Criminal Background Checks, 2008 PA 218
- Permanency Planning Hearings, Termination of Rights, 2008 PA 200
- Notification of Foster Change in Placement to Court and Guardian Ad Litem, 2008 PA 201
- Concurrent Permanency Planning, 2008 PA 202
- Appointment of Guardian after Termination, 2008 PA 203
- Foster Care Independence Program, 2008 PA 215
- Fostering Connections to Success Act of 2008
- DHS FY 2012 Appropriations Act, PA 63 of 2011, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

- The number of Foster Care program cases has been declining in recent years from a peak of 18,562 in 2003 to 14,043 as of September 30, 2011.
- Among current living arrangements, 37 percent of children in care are placed with relatives. Michigan's public/private partnership is working together to license relative caregivers, making them eligible for the same training and support as unrelated foster homes. In FY 2011, 911 relative-only licenses were issued.
- Among children returned home, 3.6 percent of the children re-enter foster care within 12 months of reunification, which is below the national standard of 9.9 percent for foster care re-entries.
- Of all children discharged from foster care (FC) to reunification, who had been in FC for eight days or longer, the median length of stay (in months) continues to decrease. As of 3/31/11, the median length of stay was 10.8 months compared to 11.6 months for FY2009. Of all children who were discharged from foster care, and who were legally free for adoption at the time of discharge, the percent discharged to a permanent home prior to their 18th birthday continues to increase. (A permanent home is defined as having a discharge reason of adoption, guardianship, or reunification, including living with relative.) As of 3/31/11, 97.8 percent of children were discharged to a permanent home prior to their 18th birthday compared to 96.7 percent for FY2009.
- The number of children placed in residential care facilities continues to decrease. As of September 30, 2011, 766 children were in residential care compared to approximately 1,200 in October 2008.

DEPARTMENT OF HUMAN SERVICES FOSTER CARE PLACEMENTS¹ September 2002 - September 2011



■ Out-of-Home Placements ²	9,571	9,670	9,203	8,757	8,407	8,037	7,787	6,830	6,441	5,882
▨ Relative Placements ³	5,991	6,144	6,458	6,335	6,511	6,878	6,539	5,674	5,750	5,231
▩ Own Home/ Legal Guardian ⁴	2,748	2,633	2,676	2,635	2,421	2,781	2,399	2,193	1,836	1,787
▤ Other ⁵	768	870	944	1,018	1,075	1,247	1,291	1,507	1,234	1,143
Total	19,078	19,317	19,281	18,745	18,414	18,943	18,016	16,204	15,261	14,043

Source: Product of Children's Services Data Management Unit

¹ Excludes out-of-town inquiry (neglect) and non-ward (short-term detention) population.

² Out-of-Home Placements include: 04 Adoptive Home, 05 Licensed Unrelated Foster Home, 08 Unrelated Caregiver, 09 Emergency Shelter Home/Facility, 10 Community Justice Center, 11 Detention, 12 Jail, 13 Private Child Care Institution, 14 DHS Training School, 16 Mental Health Facility, 17 Court Treatment Facility, 24 Out-of-State - Foster Home, 25 Out-of-State - Child Placement. Agency, 26 Out-of-State - Child Institution.

³ Relative Placements include: 02 Licensed/Unlicensed Relatives, 23 Out-of-State - Unlicensed Relative, 27 Out-of-State - Licensed Relative.

⁴ Own Home/Legal Guardian Placements include: 01 Parental Home, 22 Out-of-State Parental Home, 03 Legal Guardian.

⁵ Other Placements include: 07 Independent Living, 19 Boarding School, etc. (other), 20 AWOL. Excludes out-of-town inquiry (neglect) and non-ward (short-term detention) population.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department of Human Services	Appropriation Unit Child Welfare Services	Program Children's Protective Services (CPS)

PROGRAM STATEMENT

Children's Protective Services (CPS) investigates allegations that a child under the age of 18 is being abused or neglected by a caretaker (a person defined in the law as responsible for the child's health or welfare.) CPS also assesses the safety of all children in the household and, if necessary, initiates actions needed to protect them. If there is a preponderance of evidence that abuse or neglect occurred, CPS assists the family in resolving issues that place the children at risk. If a child is unsafe or has been severely abused or neglected per the Child Protection Law, CPS must file a petition for court jurisdiction over the victim and family with the Family Division of Circuit Court. Since July 1, 1999, CPS has assigned a disposition category to each completed investigation. There are five disposition categories which are determined by a combination of evidence and risk to the child. For categories I through IV, the result of the safety assessment is either: safe, safe with services, or unsafe. If the result of the assessment is unsafe, CPS must file a court petition to remove the victim or perpetrator from the home.

- Category I:** A court petition is required because a child is unsafe, a petition is mandated in the law or a court order is needed to get the family to cooperate with the investigation or comply with the service plan. The perpetrator is listed on Central Registry.
- Category II:** There is a preponderance of evidence that abuse or neglect occurred and the initial risk level is high or intensive. CPS must open a services case and the perpetrator is listed on Central Registry.
- Category III:** There is a preponderance of evidence that abuse or neglect occurred and the initial risk level is low or moderate. CPS must assist the family in participating with community-based services. The perpetrator is not listed on Central Registry.
- Category IV:** There is *not* a preponderance of evidence that abuse or neglect occurred. CPS is to assist the family in accessing community-based services.
- Category V:** There is no evidence that abuse or neglect occurred (a false complaint; no basis in fact). No action beyond the investigation is required by CPS.

Legal Issues:

- DHS has investigatory authority only. Enforcement authority is with the police and the Family Division of Circuit Court. All DHS intervention and services are voluntary unless done with police or court authority.
- There must be court action within 24 hours any time a child is taken out of the home.
- The police have responsibility for investigating allegations if anyone other than a person responsible for the child's health and welfare as defined in the law is suspected of abuse or neglect (such as non-custodial relatives). DHS may be involved in these investigations only to determine if a caretaker is failing to protect the child from the alleged perpetrator.
- CPS determines through investigation whether a preponderance of evidence exists that a child was abused or neglected.
- CPS begins assessing child safety at the time the complaint is received. This assessment is continuous to assure the child's safety. If the child is unsafe, CPS must file a petition (Category I).

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department of Human Services	Appropriation Unit Child Welfare Services	Program Children's Protective Services (CPS)	

- If a preponderance of evidence is found and the risk level is high or intensive, the perpetrator is notified in writing that his/her name is placed on Central Registry and informed of the due process for requesting amendment or expunction. CPS must open a services case (Category II).
- An open CPS services case means there is a plan to reduce the risk of future harm by addressing the family's services needs. This may involve referral to other agencies or programs, including CPS purchase of specific services as well as direct services by a CPS worker.
- If there is a preponderance of evidence but the risk level is low or moderate, CPS must assist the family in participating with community-based services. The perpetrator's name is not entered on Central Registry (Category III). If the family does *not* participate in or benefit from services which help to reduce the risk of harm to children in the home, CPS may elevate the case to Category II.

SOURCES OF FINANCING

- Federal Titles IV-B, IV-E, and XX of the Social Security Act
- Keeping Children and Families Safe Act of 2003
- Child Abuse Prevention and Treatment Act
- Federal Child Abuse and Neglect grant
- Children's Justice Act
- State funds
- Community funds

LEGAL BASIS

- Adoption Assistance and Child Welfare Act, Federal PL 96-272
- Social Security Act of 1935
- Child Abuse and Prevention Treatment Act, Federal PL 104-235
- Child Protection Law, 238 PA 1975
- Social Welfare Act, 1939 PA 280
- Probate Code, PA 288
- DHS FY 2012 Appropriations Act 2011 PA 63, Article X

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department of Human Services	Appropriation Unit Child Welfare Services	Program Children's Protective Services (CPS)	

PROGRAM EFFECTIVENESS

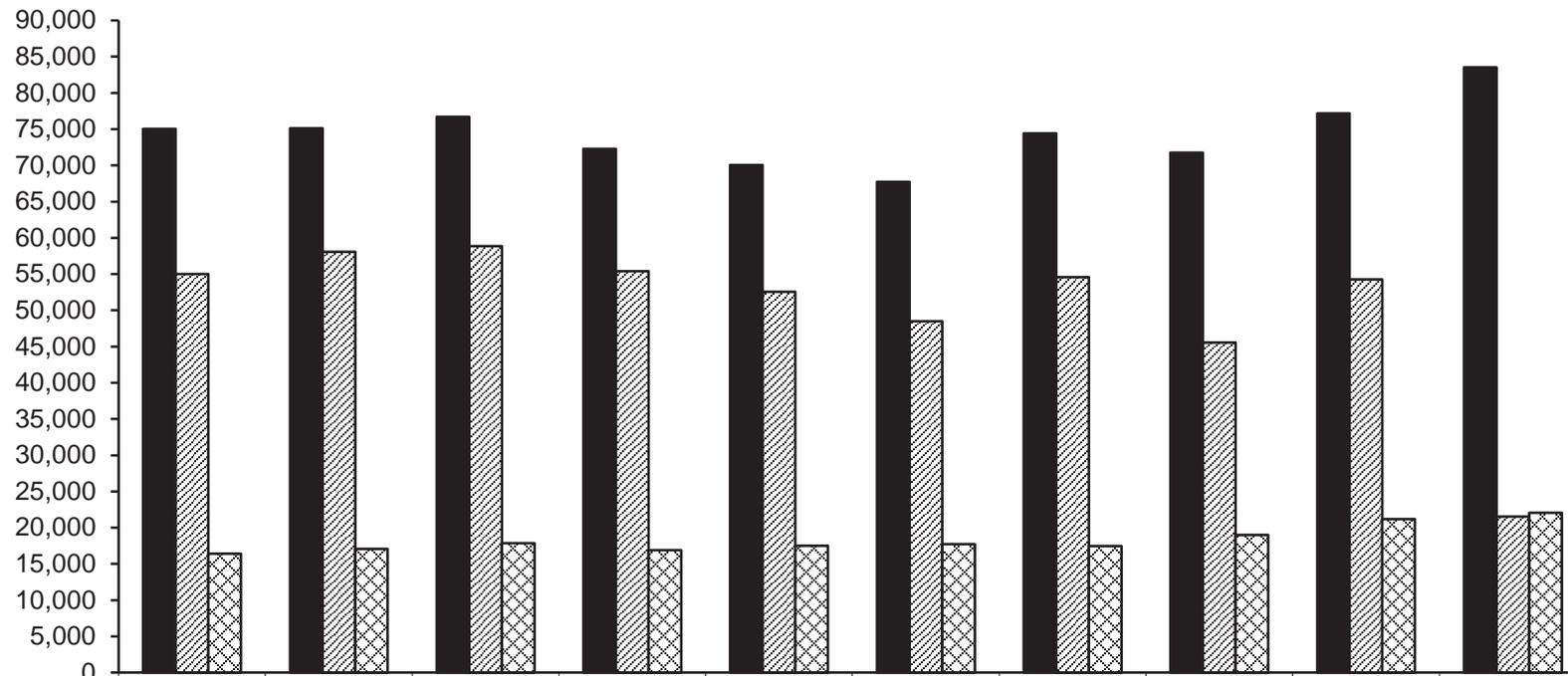
- Between 2005 and 2010 the number of complaints assigned increased by 9.14 percent (6,607). During this same time, substantiated abuse/neglect rose by 28.1 percent (4,742).
- In March 2012, Michigan will expand its pilot centralized intake program statewide. The centralized intake system will allow for greater statewide consistency for all CPS intake complaints.
- Beginning in October 2009, CPS created Maltreatment in Care investigative units. The intent of the change was to develop and maintain units responsible for the investigation of child abuse and neglect allegations in foster homes and child-caring institutions. In December 2010 these units were established statewide, and provide the most comprehensive investigations for children who are under the care and supervision of our department.
- CPS Policies and Procedures are evaluated on a consistent basis in an effort to improve the quality of investigations. Many efforts in Family Preservation programming and child safety are unique to Michigan, and recognized throughout the country as innovative approaches to address child safety and risk.
- Michigan is the only state in the country to have a statewide Birth Match notification system. Birth matches provide alerts to CPS Intake when a child is born to parents who have previously had their parental rights terminated in Michigan, or have been responsible for serious injury or death to a child.

DEPARTMENT OF HUMAN SERVICES

CHILDREN'S PROTECTIVE SERVICES - COMPLAINTS INVESTIGATED

FY 2002 - FY 2011

Complaints



	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007	FY 2008	FY 2009	FY 2010	FY 2011
■ Investigated	75,026	75,115	76,694	72,286	70,069	67,756	74,439	71,780	77,168	83,512
▨ Non-Substantiated	55,008	58,063	58,847	55,397	52,546	48,492	54,581	45,536	54,255	21,525
▩ Substantiated ¹	16,425	17,052	17,847	16,889	17,523	17,748	17,460	18,977	21,171	22,069

Source: Product of Children's Services Data Management Unit

¹ Complaints substantiated are those in which evidence of abuse and/or neglect was found.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Children's Services	Program: Children's Trust Fund	

PROGRAM STATEMENT

The Michigan Children's Trust Fund (CTF), also known as the State Child Abuse and Neglect Prevention Board, is an independent, autonomous nonprofit organization created by Public Act 250 of 1982. CTF serves as Michigan's only source of permanent funding for the statewide prevention of child abuse and neglect. CTF's purpose is to prevent child abuse and raise awareness of prevention through community-based programs. CTF provides grants for direct services and local child abuse and neglect prevention councils that serve children and families before any involvement with the DHS Children's Protective Services division. The primary purpose of these prevention programs is to keep children safe, strengthen families, and promote safe, stable, and nurturing parent-child relationships. CTF is the Michigan chapter of Prevent Child Abuse America and also administers the Michigan Citizen Review Panel for Prevention. CTF is overseen by a 15-member State Child Abuse and Neglect Prevention Board and is administered by an executive director. Eleven of these board members are citizens appointed by the Governor with the advice and consent of the Senate. The remaining four members are representatives appointed by the cabinet directors of the following departments: Human Services, Community Health, Education, and State Police. The CTF Board employs an executive director, senior program development coordinator, event/fund development coordinator, research analyst, direct service grant monitor, and local council grant monitor. CTF also administers the DHS Prevention Pilots and supervises the pilots' coordinator.

SOURCES OF FINANCING

- Federal Community-Based Child Abuse Prevention (CBCAP) grant.
- Annual interest from its \$23 million trust fund.
- Annual state income tax check-off.
- CTF license plate sales.
- Direct donations and fundraising activities.

LEGAL BASIS

- Children's Trust Fund Act, 1982 PA 249
- Income Tax Act, 281 PA 1967, MCL 206.440, MCL 206.475
- Child Abuse and Neglect Prevention Act, 1982 PA 250
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

CTF is committed to supporting the statewide prevention network while increasing the effectiveness of funded programs. This includes working with grantees to identify their needs and to strengthen their program capacity through stronger evaluation, outcomes-based practices, and parent leadership. In particular, CTF is working to increase the level of evidence-based and evidence-informed programs and practices it funds. For example, CTF employs the federal Office of Management and Budget (OMB) Program Assessment Rating Tool (PART) to identify the evidence level of all direct service programs, ranging from "Emerging" to "Well-Supported." To qualify for funding, a program must minimally meet the "Emerging" PART level, using criteria developed by the federal government. Starting in FY 2010, all new direct service grants were required to use the Protective Factors Survey (PFS). PFS data will be aggregated and analyzed to determine participant outcomes. In addition,

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Children's Services	Program: Children's Trust Fund	

a Best Practices Work Group composed of CTF staff and local councils, is exploring best practices and research-based options for local councils. Many of these councils are volunteer-run and operate on minimal budgets.

Direct service and local council grantees are extremely diverse (in terms of programs, services, budget, staffing, capacity, etc.) and therefore use varying measurement and outcomes tools. However, CTF requires that all grantees submit work plans that identify objectives, activities, expected outcomes, and measurement tools. Grantees then report progress and outcomes and/or evaluation results on a quarterly or biannual basis. Required program register reports also include quantitative data on populations served and the types of services provided. Additionally, direct service grantees are required to measure client satisfaction and report results on an annual basis.

CTF also strives to develop effective, resourceful partnerships with other nonprofit, early childhood, and prevention organizations and encourages its local council and direct service grantees to work with community collaboratives in their communities. CTF local council grants are designated, while direct service grant monies are competitive and typically serve as "seed" funding. It is the goal of the grant that programs become self-sufficient, with local communities gradually assuming the cost of supporting the programs. All programs are required to obtain local cash and in-kind matching funds for each year of the CTF grant. Direct service grants are funded for four years and local councils are on a three-year grant cycle. Local councils receive designated, non-competitive grants that also have local match requirements.

The Prevention Pilot Project: In FY 2010, DHS initiated a Prevention Pilot project for child abuse and neglect prevention programs in Wayne, Genesee, Kent, and Oakland counties. The Prevention Pilot project became fully operational in FY 2011 and the CTF has administrative and fiduciary responsibilities. This decision was a result of ongoing efforts between CTF and DHS to better align prevention efforts across the full continuum of prevention services. While CTF funds primary and secondary prevention efforts, the pilot sites provide services at the secondary and tertiary end of the prevention continuum. By transferring administrative responsibility to CTF, funding across the prevention continuum can be used in a more coordinated and collaborative way. In addition, CTF is able to more efficiently provide technical assistance, training and other administrative supports by having a direct relationship with all prevention services providers. CTF also has a long-standing relationship with the foundation community and is increasingly working with the corporate sector to provide opportunities to leverage other sources of support for the prevention continuum.

The purpose of the Prevention Pilot is to implement services to prevent the abuse and neglect of children ages birth through 18 years, strengthen families, and prevent them from entering the child welfare system. The Prevention Pilot was designed to give priority to Children's Protective Services Category III and IV low-risk cases. In addition, families that have three or more risk factors, but may not have come to the attention of CPS, are eligible for services. The Prevention Pilot programs are built upon evidence-based and evidence-informed home visitation service models with strategies to ensure that families are provided with individualized service plans that are culturally appropriate.

Prevention Pilot referrals and enrollments increased each quarter in FY 2011. From the 1st Quarter through the 4th Quarter, there were 1,512 CPS Category III & IV referrals for child abuse and neglect prevention services made to Prevention Pilot contractors. In addition, 773 referrals for services to identified at-risk families that have not yet come to the attention of CPS were received. As of September 30, 98.73 percent of the families and children enrolled in Prevention Pilot services have not had a CPS referral, re-referral, substantiated case of child abuse or neglect,

Department:
Human Services

Appropriation Unit:
Children's Services

Program:
Children's Trust Fund

or have been placed in foster care or other out-of-home placements while participating in services. Select services that were provided are summarized below.

- 2,285 at-risk families were referred for services in FY 2011, and 84% of the families that were eligible for services voluntarily enrolled.
- 3,139 at-risk children were served in FY 2011.
- 15,276 home visits were made in FY 2011.
- 5,205 parenting classes, counseling and parent support groups were held in FY 2011.
- 2,174 service coordination activities on behalf of families were conducted in FY 2011.
- 1,290 transportation services on behalf families were provided in FY 2011.
- 24,418 additional services were provided to families in FY 2011.

Prevention Pilot contractors administer the Protective Factors Survey (PFS) when a family enters (pre-administration), completes and exits services (post-administration). There are 20 PFS constructs. Participation in the PFS is voluntarily and anonymous. The PFS is designed for use with caregivers receiving child abuse and neglect prevention services. The instrument measures protective factors in five areas: family functioning/resiliency, social emotional support, concrete support, nurturing and attachment, and knowledge of parenting /child development. The PFS results are designed to provide the following information: a snapshot of the families they serve; changes in protective factors; and areas where workers can focus on increasing individual family protective factors.

Entry and exit percentages represent the average of participant responses ranging from never, very rarely, rarely, and ½ the time, to frequently, very frequently and always. Ninety percent (90.38%) of the families that completed services participated in the Protective Factors Survey. An increase of protective factors is noted across all 20 constructs, indicating a decrease in child abuse and neglect risk factors as a result of prevention services. Pre- and post-administrations of seven PFS constructs are summarized below:

- Percent improvement of families reporting they talk about problems: **50%**
- Percent improvement of families reporting that they take time to listen to each other: **46%**
- Percent improvement of families reporting that they are able to solve their problems: **30%**
- Percent improvement of families reporting that they would have no idea where to turn if their family needed food and/or housing: **11%**
- Percent improvement of families reporting that if there were a crisis, they have others that they can talk to: **43%**
- Percent improvement of families reporting that there are many times when they don't know what to do as a parent: **24%**
- Percent improvement of families reporting that they and their children are very close to each other: **33%**

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Children's Services	Program: Children's Trust Fund

Parental involvement, investment, participation and satisfaction are crucial to improved parenting skills, improved parent-child interactions and successful outcomes. Prevention Pilot contractors administer the Parent Satisfaction Survey (PSS) developed by DHS when a family completes and exits services. Participation in the PSS is also voluntarily and anonymous. Aggregate parental satisfaction responses and perceptions of how participation in the Prevention Pilot Project benefited their families are listed below.¹

- Percentage of families served that were sent the parent satisfaction survey: **95.53%**
- Percentage of families completing the parent satisfaction survey: **77.82%**
- Percentage of families reporting overall satisfaction with services: **95.46%**
- Percentage of families who were satisfied with their home visitor: **93.49%**
- Percentage of families who believe they can change negative parenting attitudes: **90.39%**
- Percentage of families who believe they can benefit from their individualized service plan: **80.89%**
- Percentage of families who reported that they received referrals for needed services: **92.38%**
- Percentage of families who followed-up with referrals for needed services: **80.61%**
- Percentage of families who reported they are benefiting from the services needed: **87.41%**
- Percentage of families who reported that their parenting skills improved as a result of services: **90.57%**
- Percentage of families who reported that they have participated in another parenting program: **19.99%**

¹ *These outcomes were achieved with families who had multiple child abuse and/or neglect risk factors known to be precursors to child maltreatment.*

Department:
Human Services

Appropriation Unit:
Children's Services

Program:
**Family Preservation and Family Support –
Families First**

PROGRAM STATEMENT

Families First of Michigan (FFM) serves families that have at least one child at imminent risk of placement in out-of-home care. Families with children in out-of-home care are eligible for referral to the program when it is determined that reunification is not appropriate without intensive services and the Family Reunification Program (FRP) is not available. If indicated in the contract as a referral source, some contract areas are designated as providing services to families referred from tribal referral sources. Similarly, referrals may also be made by designated domestic violence shelter programs for families with at least one child at risk of homelessness due to domestic violence. FFM offers families intensive, short-term crisis intervention and family education services in their home for four weeks using the FFM model. FFM workers are available and accessible to the family 24 hours a day, seven days a week. The workers assist families by establishing individual family goals designed to reduce risk of out-of-home placement and increase child safety. FFM workers assist families in meeting goals by teaching, modeling and reinforcing appropriate parenting and providing concrete services and connections to community services. FFM workers provide service to the family for up to four weeks. Up to a two-week extension may be available. Extensions beyond 28 days may be considered if the risk of removal of the child from the home continues to be present and both the referring worker and supervisor and both the FFM worker and FFM supervisor agree the extension will reduce that risk. Extensions are to be limited to the amount of time needed to reduce the risk of removal. The Family Preservation Specialist must approve extensions if the number of cases requiring extensions exceeds 5 percent of contracted annual number of interventions. Services may not exceed a total of six weeks. Seventy-five percent (75 percent) of the families served must be shown to have avoided placement after 12 months of termination with FFM.

SOURCES OF FINANCING

- Temporary Assistance for Needy Families (TANF)

LEGAL BASIS

- Adoption Assistance and Child Welfare Act of 1980, Federal PL 96-272
- Social Security Act of 1935, Title IV-B
- Omnibus Budget Reconciliation Act of 1993, Social Security Act Amendment Title IV-B, adding subpart 2, Family Preservation and Support Services Act, Federal PL 103-66
- Adoption and Safe Families Act of 1997, PL 105-89
- Promoting Safe and Stable Families Act of 2001, Federal PL 107-133
- Child and Family Services Improvement Act of 2006, Federal PL 109-288
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Children's Services	Program: Family Preservation and Family Support – Families First	

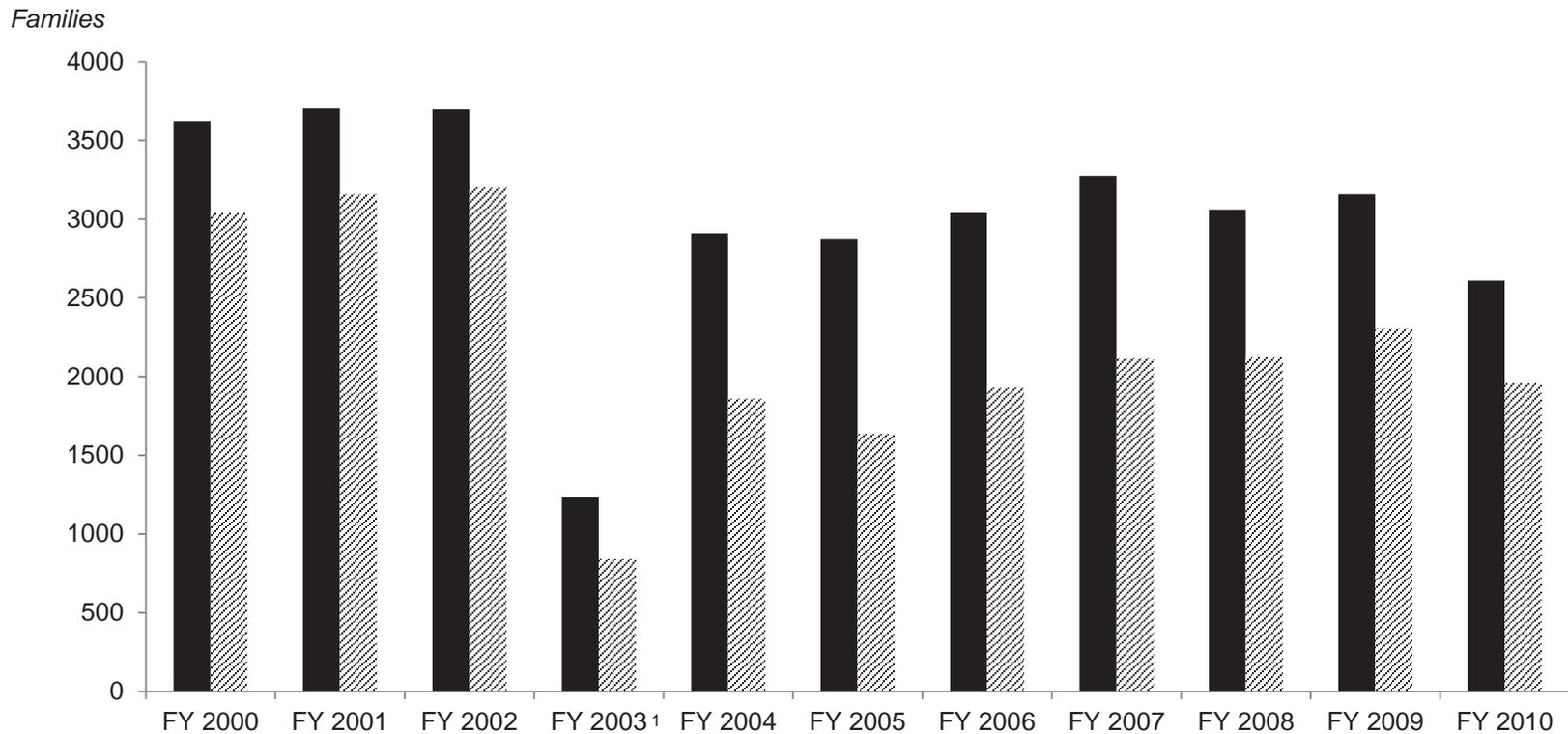
PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

The program has exceeded its objective since 1992. Data for FY 2010 show 88.5 percent of families served were intact one year after service. A 1992 longitudinal study of a representative sample of 225 families showed 69 percent were intact at 30 months. More than 61,600 families have received services since 1988. These services have been a vital part of the services continuum due to:

- Reducing the number of unnecessary removals, thereby reducing the foster care rate.
- Reducing the number of families/children “lingering” in the system.
- The modality of treatment is based on skill enhancement, thereby creating the ability for family members to transfer new learning and apply skills to prevent future crises.
- All programs work in partnership with the local Department of Human Services referring staff to create the safest environment for our most vulnerable citizens.
- All family preservation programs are designed to be cost-effective. An example: The cost per family for Families First averages \$4,600. The cost per child for one year in foster care ranges from \$47,450 to as much as \$146,000 (based on current rates of \$130 to \$400 per day per child).

DEPARTMENT OF HUMAN SERVICES STATEWIDE FAMILIES FIRST SERVICES

Number / Percent of 12-Month Successful Program Outcomes: FY 2000 - FY 2010



■	Families w/ 12 Mo. Placement Data	3623	3703	3697	1233	2910	2877	3040	3275	3061	3159	2610
▨	Number Successful Outcomes ²	3040	3158	3202	841	1860	1637	1930	2115	2123	2303	1956
	Percent Successful Outcomes ³	83.9%	85.3%	86.6%	80.5%	83.4%	75.7%	80.4%	80.9%	86.4%	89.0%	88.5%

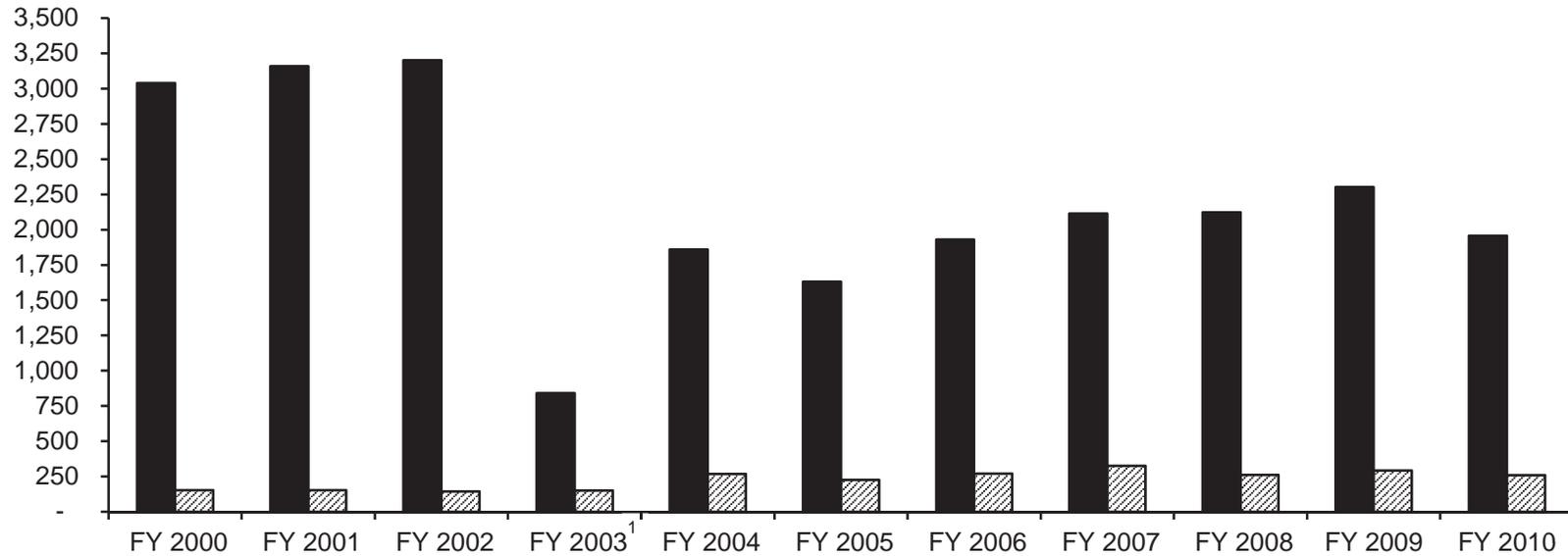
¹ Complete outcome data for FY 2003 are not available

² "Successful outcomes" is defined as those where no child was placed in foster care during the 12-month follow-up period

³ Effective FY 2003, "Percent Successful Outcomes" is the total number of 12-month follow-ups minus total unable to locate (or determine) divided into total intact families

DEPARTMENT OF HUMAN SERVICES STATEWIDE FAMILIES FIRST SERVICES

Relative Placements as a Percentage of 12-Month Successful Program Outcomes: FY 2000 - FY 2010



Number Successful Outcomes ²	3,040	3,158	3,202	841	1,860	1,631	1,930	2,115	2,123	2,303	1,956
Number Relative Placements	153	153	145	152	268	227	271	325	261	292	259
Percent Relative Placements	5.0%	4.8%	4.5%	18.1%	14.4%	13.9%	14.0%	15.4%	12.3%	12.7%	13.2%

¹ Complete outcome data for FY 2003 not available.

² "Successful outcomes" are defined as those families where no child was placed in foster care during the 12-month follow-up period.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Children's Services	Program: Family Preservation and Family Support – Strong Families/Safe Children	

PROGRAM STATEMENT

Strong Families/Safe Children (SF/SC) is a community-based initiative in response to federal funding for new and enhanced family preservation and support services. SF/SC funds provide preventive services to families at risk of child abuse/neglect (family support services), services to families at risk of out-of-home placement or in crisis (family preservation placement prevention), time-limited reunification services, and adoption promotion and support services. The Department of Human Services (DHS) partners with Community Collaborative groups to select services based on assessment of local needs. The local Collaborative groups include the directors of the local human services agencies, the prosecutor, the probate judge, the school superintendent, advocacy organizations, child welfare parents and other stakeholders. The program included 28 counties in an initial phase during FY 1995. Sixteen additional counties were added in FY 1996. The remaining 39 counties were phased in during FY 1997. To date, all 83 Michigan counties continue to implement local service plans. The local DHS directors approve the SF/SC service plans each fiscal year. A 48-member, broad-based state advisory group guided the state program design and plan. DHS is the designated fiscal agent and provides program support and oversight.

SOURCES OF FINANCING

- The Omnibus Budget Reconciliation Act of 1993 originally authorized funds for the Family Preservation and Support Services Act. The federal program was re-titled Promoting Safe and Stable Families under legislative reauthorization.
- State allotments are based on the state's percent of the nation's children receiving benefits under the federal Food Assistance Program.
- SF/SC is 100 percent federal funds, Title IV-B, Sub Part 2.
- The state must provide 25 percent match funds for the federal allocation and meet Maintenance of Effort (MOE) requirements.

Michigan's Allotments:

FY 1994	\$2,394,862	FY 2000	\$9,485,814	FY 2006	\$13,978,581
FY 1995	\$5,535,083	FY 2001	\$10,076,821	FY 2007	\$13,716,709
FY 1996	\$8,327,752	FY 2002	\$12,652,879	FY 2008	\$12,774,935
FY 1997	\$8,926,614	FY 2003	\$13,100,000	FY 2009	\$13,173,846
FY 1998	\$8,349,578	FY 2004	\$13,823,639	FY 2010	\$13,268,289
FY 1999	\$8,952,492	FY 2005	\$14,156,264	FY 2011	\$13,268,289
				FY 2012	\$12,871,390 <i>Estimated</i>

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Children's Services	Program: Family Preservation and Family Support – Strong Families/Safe Children	

LEGAL BASIS

- Adoption Assistance and Child Welfare Act of 1980, Federal PL 96-272
- Social Security Act of 1935, Title IV-B
- Omnibus Budget Reconciliation Act of 1993, Social Security Act Amendment Title IV-B, adding subpart 2, Family Preservation and Support Services Act, Federal PL 103-66
- Adoption and Safe Families Act of 1997, Federal PL 105-89
- Promoting Safe and Stable Families Act of 2001, Federal PL 107-133
- Child and Family Services Improvement Act of 2006, Federal PL 109-288
- Child and Family Services Improvement and Innovation Act of 2011, Federal PL 112-34
- DHS FY 2012 Appropriation Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

Program evaluation focuses on local client outcomes for the services approved in local plans. Local offices report annually to DHS central office. Reported outcomes for FY 2010:

- SF/SC served 10,687 customers.
- 81.9 percent of all reported outcomes met intended service goals.
- 82.7 percent of service outcomes targeting child safety were achieved.
- 76.6 percent of service outcomes targeting permanency were achieved.
- 85.4 percent of service outcomes targeting improved family functioning were achieved.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Children's Services	Program: Family Preservation and Family Support – Family Reunification Program	

PROGRAM STATEMENT

Family Reunification Program (FRP) services are available to those families who have a child residing in out-of-home placement due to abuse or neglect, who may be returned home with intensive services within 30 days of the FRP referral. Out-of-home placement includes, but is not limited to: residential treatment, family foster care, group family foster care, relative placement, psychiatric hospitalization, and detention (if dual wardship).

For the family to be eligible for services, one of the following must apply:

- A written court order allowing return of the child(ren) to a permanent family home has been obtained by the foster care worker.
- Return home must be anticipated / planned within 30 days of the referral to FRP.
- The child(ren) was returned home unexpectedly at a court hearing, and the referral to FRP is made within 48 hours of the written court order for the child(ren) to return home at that time.

The Family Reunification Program seeks to increase permanency by facilitating early return home from foster care and decreasing subsequent returns to foster care in abuse and neglect cases. FRP is not available in all counties, but where it is available, a referral is mandatory (as contract capacity permits) for all abuse and neglect foster care cases where the goal is to return the child home.

Family Reunification staffing is as follows:

- Supervisor.
- Team Leader – Provides 1.5 hours of therapeutic intervention to the family per week. Team Leaders carry a maximum of 12 cases during an intervention period.
- Family Reunification Worker – Provides an average of 2.5 hours of skill-based and concrete intervention to the family per week. They carry a maximum of six cases during an intervention period.

A team is composed of one Team Leader and two workers. It is expected that they provide four hours of face-to-face contact with each family per week.

During the intervention period, each time a child is returned home, the FRP team provides 8 – 12 hours of face-to-face contact with the family for the first two weeks after the child is returned to the family.

SOURCES OF FINANCING

- Temporary Assistance for Needy Families (TANF).
- General Funds.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Children's Services	Program: Family Preservation and Family Support – Family Reunification Program	

LEGAL BASIS

- Adoption Assistance and Child Welfare Act of 1980, Federal PL 96-272
- Social Security Act of 1935, Title IV-B
- Adoption and Safe Families Act of 1997, PL 105-89
- Promoting Safe and Stable Families Act of 2001, Federal PL 107-133
- Child and Family Services Improvement Act of 2006, Federal PL 109-288
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

During FY 2011, 859 families received FRP services. FRP is a specific model of intervention. The program employs an evidence-based evaluation process.

Standard evaluation criteria include:

- 70 percent of families served shall successfully complete four months of services. The program meets this performance measurement.
- 75 percent of families served shall not have a Category I, II, III, preponderance of evidence with Protective Services for a 12-month period following placement of children) in the family home. Data management system is in the development process.
- 70 percent of families served shall not have children removed from the family home and placed in out-of-home care for a 12-month period following placement in the family home. Data management system in in the development process.
- 90 percent of families exiting services shall express satisfaction with received services. The program meets this performance measurement.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Juvenile Justice Services	Program: Juvenile Programs Division

PROGRAM STATEMENT

The Juvenile Programs Division (within the Bureau of Child Welfare Funding, Contracting and Juvenile Programs) provides technical assistance, consultation, assessment services and training for community-based juvenile justice programs and supervision for juvenile justice youth in state-operated residential facilities. Treatment programs are comprehensive, individualized and provide educational services, vocational services, cognitive restructuring, family assistance, crises intervention, and recreation. Reintegration and employment services are offered for youth transitioning to the community after residential placement. The Juvenile Programs Division operates three secure residential facilities for youth.

Secure Facilities:

- **W.J. Maxey Boys Training School, Whitmore Lake**

Capacity: 80 youth (funded for 60 youth in FY 2011)

Per Diem Rate: \$572.54

Maxey offers specialized programming for youth with sexual offenses, chronic, serious offender behavior, and intensive mental health treatment needs in a high-security setting. Each program is augmented by the services of a psychiatrist and a psychologist.

- **Bay Pines Center, Escanaba**

Capacity: 40 youth

Per Diem Rate: \$384.95

The treatment program offers specialized treatment for female and male youth with substance abuse issues or a history of chronic/violent offenses.

- **Shawono Center, Grayling**

Capacity: 40 youth

Per Diem Rate: \$446.56

Shawono offers three specialized treatment programs for sex offenders, addiction and substance abuse, and general delinquents with mild-to-medium mental issues.

SOURCES OF FINANCING

- Federal Title IV-E.
- State General Fund.
- Federal Title II Grant, Federal Title II-E Grants and Federal Title II-E Grant.
- Juvenile Accountability block grant.
- Local Funds county chargeback.

Department:
Human Services

Appropriation Unit:
Juvenile Justice Services

Program:
Juvenile Programs Division

LEGAL BASIS

- Youth Rehabilitation Services Act, 1974 PA 150, MCL 803.301
- Federal Child Abuse and Prevention Treatment Act
- Children's Justice Act, Federal PL 100-294
- Social Welfare Act, 1939 PA 280, MCL 400.1
- Probate Code, 1939 PA 288, MCL 712A.1
- Juvenile Facilities Act, 1988 PA 73, MCL 803.221
- Child Care Organizations Act, 1973 PA 116 PA, MCL 722.111
- Department of Social Services, Office of Children and Youth Services, Child Care Fund R400.2001 – R400.2049
- Administrative Order 85-5
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

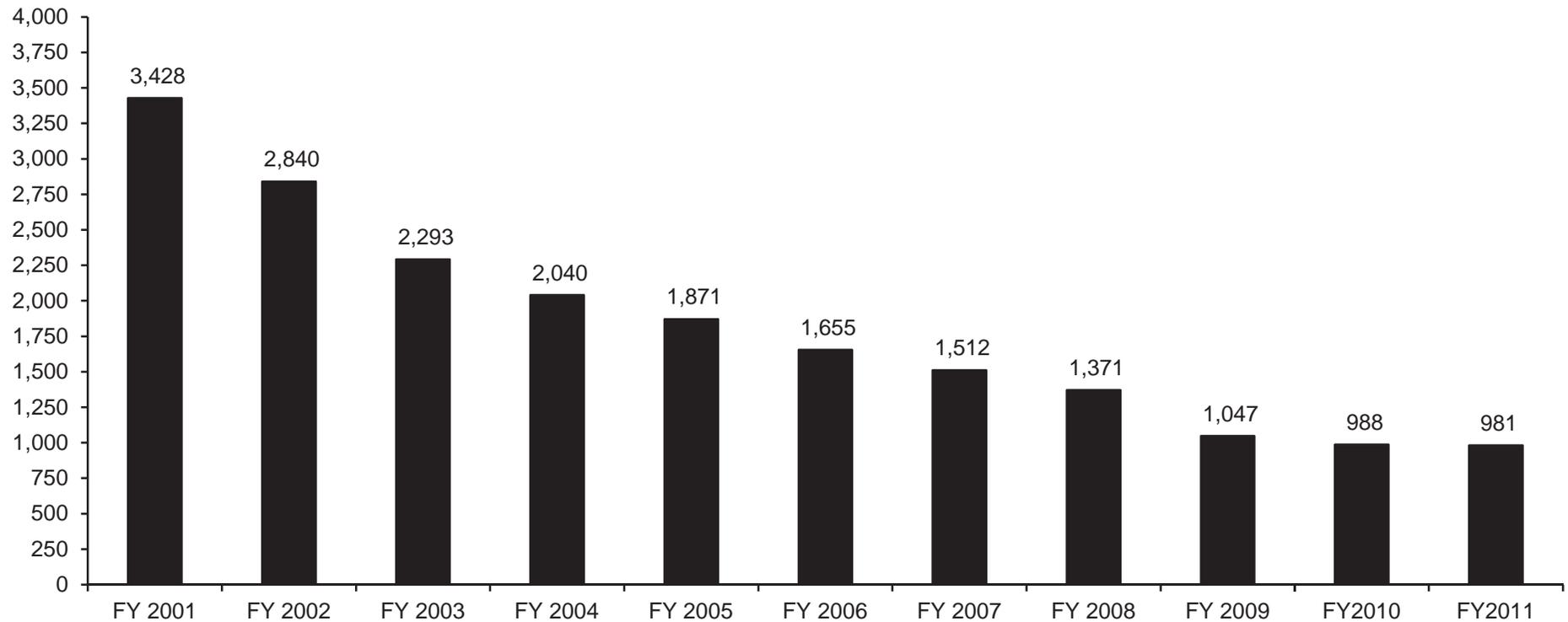
- The implementation of the new Michigan Youth Re-Entry Initiative (MYRI), which employs a seamless system in state facilities from facility through community re-entry, has led to more effective programming, including more intensified treatment targeting criminogenic risk factors with evidence-based treatment.
- Since implementation of the MYRI in FY 2010, 35 youth have transitioned back into their communities with MYRI services, two of whom have returned to the criminal justice system. To date, this represents a 6 percent recidivism rate. For FY 2008, the most recent year for which final follow-up data were available, the recidivism rate was higher at 22 percent. Note: FY 2009 data are not available.
- The Mental Health treatment model developed by W. J. Maxey Boys Training School clinicians has proven successful in the stabilization and treatment of youth with serious and poly-morbid mental health conditions. Michigan is statutorily required to provide care of delinquent youth referred by courts for residential placement. The state provides much of required care through issuance of contracts to private providers. Still, there continues to be a population of offenders that cannot be properly served by the private sector. Some youth come to care with such high needs that it is not in the best interest of the youth or other youth in their programs, the agency or the public to accept the youth into care. In these instances, the state is left as the responsible entity to provide residential care.
 - 1974 PA150 states:
 - "A youth agency shall accept youth properly committed to it in accordance with the law."
 - If a public ward is placed in a residential facility "a youth agency shall provide for the youth's food, clothing, housing, educational, medical, and treatment needs."
- Through the Juvenile Programs Division, referred youth are carefully screened and assessed and referred to the program, public or private, that is best equipped to meet their needs for treatment and security.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Juvenile Justice Services	Program: Juvenile Programs Division

- The Division administers the Regional Detention Support Services (RDSS) program. RDSS is a nationally recognized program that provides alternatives to jail and detention for juvenile offenders who have been detained and are awaiting a hearing and/or placement. RDSS components include holdover services, home detention, transportation and tether or electronic monitoring services. Eligible jurisdictions include the 61 rural counties that do not have secure detention facilities in Michigan and Native American Tribal Jurisdictions.
- The Division's Federal Grant Unit provides staff support to three United States Department of Justice (USDOJ) Office of Justice Programs (OJP), Office of Juvenile Justice, and Delinquency Prevention (OJJDP) funded programs. Gubernatorial executive orders designate the Department of Human Services as the state agency responsible for the administration and appropriate staff support for the programs
- The Juvenile Justice and Delinquency Prevention Act (JJDP) of 1974 provides for Title II Formula Grants Program and the Title V Community Prevention Program. The JJDP was most recently reauthorized in 2002.
 - The Juvenile Programs Division is mandated to provide support, resources, technical assistance and policy direction to juvenile justice stakeholders in Michigan.
- The Division's caseload trends are reflected in the graph on the following page. The average monthly caseload decreased year-over-year since FY 2001. From FY 2001 to FY 2011 the caseload dropped by 2,447 (71 percent). The substantial decline occurred primarily in Wayne County, as responsibility for Wayne County Juvenile Justice cases was transferred from DHS to the county of Wayne beginning February 2000. Additional reductions are the result of fewer placements in both public and private residential programs due to system efforts at less restrictive treatment programming for juvenile justice youth. Reflected caseloads include youth in public and private placements.

DEPARTMENT OF HUMAN SERVICES JUVENILE JUSTICE AVERAGE CASELOADS FY 2001 - FY 2011

Average Caseload



Note: The average monthly Juvenile Justice caseload decreased year-over-year since FY 2001. From FY 2001 to FY 2011 the caseload dropped by 2,447 (71 percent). The substantial caseload decline occurred primarily in Wayne County as responsibility for the Wayne County Juvenile Justice cases was transferred from DHS Wayne County beginning in February 2000. Reflected caseloads include youth in public and private placements.

Source: DHS Data Management Unit (DMU).

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Child Welfare Services	Program: Runaway and Homeless Youth Services	

PROGRAM STATEMENT

Runaway Youth Services are crisis-based services available to youth between the ages of 12-17, their siblings and families. Services include crisis intervention, community education, prevention, case management, counseling, and placement. Services are available in every county in the state through a contracted provider.

Homeless Youth Services are services provided to youth between the ages of 16-21 who require support for a longer period of time. Services include crisis management, community education, counseling, placement, and life skills. Services are provided statewide through contracted providers. One significant change to the service array is the mandate that at minimum 25 percent of the youth served by transitional living programs must have been former foster youth.

In addition to the runaway and homeless youth services, DHS supports and/or funds two related projects. One is the transitional living program in the Upper Peninsula, which is funded through a federal Housing and Urban Development (HUD) grant. DHS provides a match for the federal funding. The second is a statewide crisis line with a 1-800 number available for youth and families in crisis. The hotline services connect callers with the respective Homeless Youth and Runaway providers or local community services.

SOURCES OF FINANCING

- Runaway Services - Temporary Assistance to Needy Families (TANF).
- Homeless Youth Services - Title XX.

LEGAL BASIS

- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

The program goal is to strengthen and enhance services for the state's homeless and runaway youth through age 21 by providing a continuum of services for all homeless youth. Services provided to youth and families through these contracts may prevent court intervention and the placement of youth in foster care. In FY 2011, homeless youth contractors served 518 youth in transitional living programs (TLP); 46.9 percent (243) of the TLP youth served were former foster youth. DHS collaborates with the Michigan Coalition Against Homelessness to collect performance outcomes and make improvements in the data collection. Performance-based outcomes are used to determine program effectiveness. Runaway youth service outcomes are established based on the number of youth accessing services, locating safe and appropriate housing, and remaining in or returning to their own homes. Homeless youth service outcomes are established based on the number of youth accessing services, locating safe and appropriate housing, remaining in or returning to their own homes, and/or demonstrating improvement in the areas of education, job skills and daily living skills.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Local Office Staff and Operations	Program: Adult Community Placement

PROGRAM STATEMENT

The goal of Adult Community Placement (ACP) is to provide services that assist in achieving the least restrictive community-based care settings for adults who require care in licensed community placement: Adult Foster Care (AFC) facilities, or Homes for the Aged (HA). ACP works to maximize independence and self-determination for program recipients by assisting in maintaining connections with family, other community members, and community activities. ACP provides pre-placement services and assistance with placement for adults who need care in licensed community placement settings (AFC facilities and HA). Post-placement/follow-up services are also provided, as are transitional services for individuals relocated when nursing homes close. DHS Adult Services workers provide program services to adults 18 or older who are elderly, frail, physically handicapped, emotionally impaired, or mentally ill. Most clients are Medicaid-eligible and receive Supplemental Security Income (SSI). Specific ACP services include: case management, counseling, education and training, health-related services, information and referral, money management, pre-placement services, post-placement services, and protection.

SOURCES OF FINANCING

- State funds.
- Title XIX of the Social Security Act.

LEGAL BASIS

- Adult Foster Care Facility Licensing Act, 1979 PA 218
- Social Security Act, Title XIX
- 42 CFR 440.170(f)
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

An average 2,408 clients were served monthly in FY 2011. ACP caseload levels are believed to have decreased year-over-year due to a payment disparity between the combined SSI and Medicaid Supplemental rates (\$1,004 per month), and relatively higher private care rates that typically start at \$1,500 a month. The payment disparity therefore provides an incentive for providers to offer placements to private-pay families/individuals. Clients residing in an AFC facility or home for the aged receive services from Medicaid that enable them to live in a setting other than a nursing home. AFC and Homes for the Aged (HA) facilities offer an interim setting between living independent living and nursing home care. The Medicaid cost per month for an AFC or HA resident is \$192.38 compared to the \$4,213 per-month cost for a resident in a nursing home. The resident pays for room and board separately from the personal care supplement of \$192.38 paid by Medicaid.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Local Office Staff and Operations	Program: Adult Protective Services	

PROGRAM STATEMENT

Adult Protective Services (APS) provides protection to vulnerable adults (18 years or older) who are at risk of harm due to the presence or threat of abuse, neglect or exploitation. Referrals to APS can be made by anyone. The identity of the reporting person is kept confidential. Individuals who perform certain functions or who provide certain services are required to report suspected abuse. This includes those employed, licensed, registered or certified (including agency employees) who provide health care, education services, social welfare services, mental health services, other human services (includes homes for the aged, and adult foster care homes). Also included are law enforcement officers and employees of the county medical examiner.

Based on definitions in law, referrals are screened to determine if there is sufficient justification to warrant assignment for investigation. Justification exists if the alleged victim is an adult at risk of harm from abuse, neglect, or exploitation, and there is reasonable belief that the alleged victim is vulnerable and in need of protective services. Vulnerability is defined as a condition in which an adult is unable to protect him or herself from abuse, neglect, or exploitation because of a mental or physical impairment or because of advanced age.

FY 2011 Program and Client Characteristics

- 20,857 referrals received.
- 66 percent of APS referrals were for individuals over age 60.
- 58 percent of APS referrals were female.
- Self-neglect, neglect and financial exploitation are the most frequent forms of harm reported to APS.
- Adult children are the most frequently alleged perpetrators of harm against vulnerable adults.
- Health care providers, social welfare workers and concerned citizens account for 44 percent of referrals. Physicians and educators account for fewer than 2 percent of referrals; 25 percent of referrals are anonymous.

SOURCES OF FINANCING

- Social Security Act Title XX.
- State funds.

LEGAL BASIS

- Social Welfare Act, 1939 PA 280
- Michigan Penal Code, 1931 PA 328, MCL 750.174a
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Local Office Staff and Operations	Program: Adult Protective Services

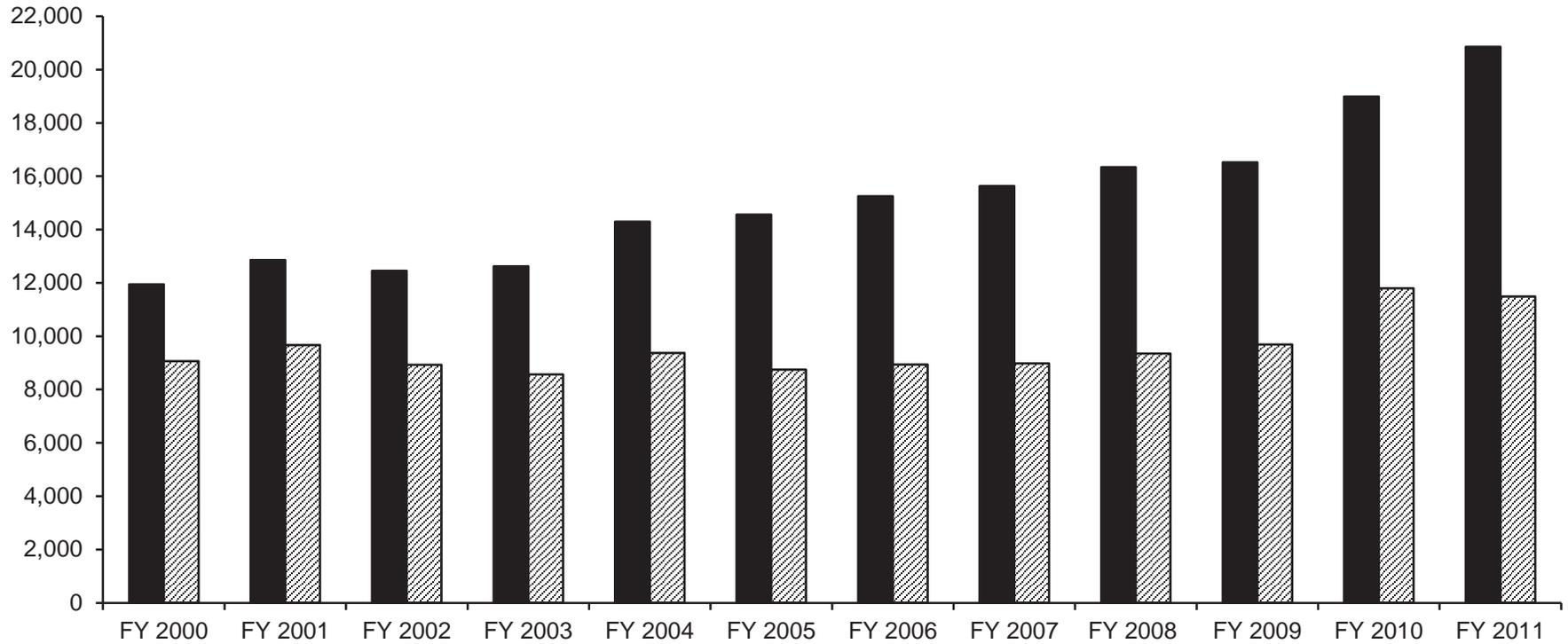
PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

DHS is mandated by the Social Welfare Act, 1939 PA 280, to provide protective services for adults. The APS program responds to a growing number of referrals. In FY 2011, there were 20,857 APS referrals, a 10 percent increase from FY 2010. During FY 2011, 11,486 referrals were opened for investigation. Harm from abuse, neglect or and/or exploitation was substantiated in 25 percent of investigations.

As a result of APS interventions, vulnerable adults are protected from physical, emotional and sexual abuse; neglect by caregivers; self-neglect; exploitation of the person and financial exploitation. By stopping financial exploitation “early on” and putting protections in place, most individuals will continue to meet their living and care needs without having to apply for governmental assistance. APS interventions often reduce the need for more restrictive and costly living arrangements such as adult foster care or nursing homes. Most importantly, APS works with vulnerable adults to develop a safety plan that allows the individual to continue living in the least restrictive setting.

DEPARTMENT OF HUMAN SERVICES ADULT PROTECTIVE SERVICES

Total Annual Referrals and Referrals Opened for Investigation FY 2000 - FY 2011



■ Referrals	11,950	12,859	12,456	12,623	14,294	14,562	15,257	15,632	16,348	16,527	18,992	20,857
▨ Invest.	9,064	9,666	8,929	8,571	9,377	8,743	8,940	8,985	9,347	9,685	11,797	11,488
% Investigated	75.8%	75.2%	71.7%	67.9%	65.6%	60.0%	58.6%	57.5%	57.2%	58.6%	62.1%	55.1%

Note: While APS caseloads continue to grow, since FY 2002 Adult Services staff available for completing investigations dropped 39 percent.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Executive Operations	Program: Bureau of Children and Adult Licensing

PROGRAM DESCRIPTION AND OVERVIEW

The Bureau of Children and Adult Licensing (BCAL) protects vulnerable adults and children by regulating and consulting with licensees. BCAL regulates this industry through initial licensure, original and renewal inspections, complaint investigations, approval of corrective action plans and taking disciplinary action as needed to protect individuals served.

BCAL is composed of three major divisions: the Adult Foster Care Licensing Division, the Child Care Licensing Division and the Child Welfare Licensing Division. These divisions are described later in this document. Their common mission is to provide protection for vulnerable adults and children receiving services from licensed facilities. As of September 2011, BCAL regulated 25,129¹ facilities with a cumulative licensed capacity of 580,117 individuals². In FY 2011, 6,295 complaints were received, resulting in 229 disciplinary actions and 14 summary suspensions³.

PROGRAM GOALS

- Protect the health, safety, and development of children in child care and out-of-home care.
- On behalf of Michigan’s vulnerable adults who are aged, developmentally disabled, mentally ill, and/or physically disabled, provide technical assistance and consultation regarding their health, safety, and welfare.
- License and regulate all child care homes and centers, adult foster care homes, homes for the aged, child caring institutions, child placing agencies, camps, foster family and foster family group homes that meet licensing requirements.
- Provide care to children or vulnerable adults and appropriately respond when licensing standards are not met.
- Timely, competently, and fairly meet all licensing responsibilities.
- Maintain the BCAL data system to accurately reflect the license status of the applicants, registrants, and licensees.

MAJOR GOALS OF EACH BCAL DIVISION

- Provide pre-application assistance.
- Receive and process applications for licenses.
- Conduct protective services and criminal history background checks.
- Conduct pre-licensing and complaint inspections.
- Conduct other inspections and investigations as required by statute.
- Conduct abuse and neglect investigations in child care facilities and child caring institutions.
- Conduct registrant orientation sessions for family child care homes.
- Conduct compliance conferences.
- Present cases in an administrative hearing.
- Assist the Attorney General’s office in preparing for administrative hearings.

¹ As noted in the first table, through all of FY 2011, the average number of regulated facilities was 24,732.

² See chart “Licensing Activity, Fiscal Year 2011.”

³ See graph “BCAL: Adult and Child Care Facilities Complaints and Disciplinary Actions.”

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Executive Operations	Program: Bureau of Children and Adult Licensing

- Provide public education and training.

SOURCES OF FINANCING:

- Federal funds – Child Care and Development Fund block grant (CCDF).
- Social Services block grant.
- Title IV-E Program.
- GF/GP.
- Licensing fees.

LEGAL BASIS

- Child Care Organization Licensing Act, 1973 PA 116
- Adult Foster Care Facility Licensing Act, 1979 PA 218
- Public Health Code, 1978 PA 368
- Social Welfare Act, 1939 PA 280
- Child Protection Law, 1979 PA 238
- Michigan Administrative Procedures Act, 1969 PA 306
- Freedom of Information Act, 1976 PA 442
- Good Moral Character Statute, 1978 PA 294
- Zoning Act, 1921 PA 207
- Zoning Act, 1943 PA 183
- Zoning Act, 1943 PA 184
- Mental Health Code, 1974 PA 258
- Children's Product Safety Act, 2000 PA 219
- FY 2012 DHS Appropriations Act, 2011 PA 63, Article X

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Executive Operations	Program: Bureau of Children and Adult Licensing

DIVISION DESCRIPTIONS

ADULT FOSTER CARE (AFC) LICENSING DIVISION

The AFC Licensing Division is responsible for the prevention of harm and the protection of dependent adults who are developmentally disabled, mentally ill, physically handicapped, or aged. It licenses and regulates the following:

- Family Homes (1-6 adults)
- Small Group Homes (1-6 adults)
- Medium Group Homes (7-12 adults)
- Large Group Homes (13-20 adults)
- Congregate Homes (>20 adults)
- County Infirmaries
- Homes for the Aged (20 or more Aged adults)

CHILD CARE LICENSING DIVISION

The Child Care Licensing Division is responsible for the protection of vulnerable children less than one year-of-age through age 17. Children are in out-of-home child care facilities for periods less than 24 hours. The division licenses and regulates:

- Child care centers (capacity based on square footage)
- Family child care homes (1-6 children)
- Group child care homes (7-12 children)

CHILD WELFARE LICENSING/DISCIPLINARY ACTION DIVISION

The Child Welfare Licensing division ensures children, adults and families are receiving required services when children receive 24-hour out-of-home care. The Child Welfare Licensing division regulates and licenses the following:

- Child Caring Residential Institutions: Provide maintenance and supervision.
- Child Placing Agencies. Government and nonprofit organizations that receive children for placement in private family homes for eventual placement in foster care and/or for adoption.
- Children's Foster Homes: Private family or group homes in which minors, not related to an adult member of the household, receive care.
- Adult and Children's Camps: Residential, day, troop or travel camps conducted in a natural environment for more than four school-age minors.
- Court-Operated Facilities: Open or secure residential care facilities for children and youth. Facilities are operated by juvenile courts.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Executive Operations	Program: Bureau of Children and Adult Licensing

PROGRAM EFFECTIVENESS/ PROGRAM OUTCOMES

ADULT FOSTER CARE LICENSING DIVISION

The Adult Foster Care Licensing division regulates 4,656 facilities, with a combined capacity of 49,173 individuals⁴. In FY 2011, 1,874 complaints were received, 23 disciplinary actions were taken, and five summary suspensions were served.

CHILD CARE LICENSING DIVISION

The Child Care Licensing division regulates 11,854 facilities with a capacity of 354,842 children. In FY 2011, 1,286 complaints were received, 59 disciplinary actions were taken, and nine summary suspensions were served.

CHILD WELFARE LICENSING DIVISION

The Child Welfare Licensing division regulates 8,619 facilities above. The total residential capacity is 111,305 children. In FY 2011, 3,135 complaints were received, 147 disciplinary actions were taken, and no summary suspensions served.

The combined volume of responses to complaints, disciplinary actions and summary suspensions of BCAL’s three major divisions provide ample substantiation that the BCAL continues to provide important work to protect vulnerable adults and children by regulating and consulting with licensees. The following chart and first graph detail combined FY 2011 licensing activity, complaints and disciplinary actions (across BCAL divisions – FY 2000 through FY 2011), and the number of combined complaints and disciplinary actions (all divisions) for the same 11-year span. The final three graphs detail the number of adults and children in care by living arrangement (FY 2000 - FY 2011).

⁴ See chart “Licensing Activity, Fiscal Year 2011.”

**DEPARTMENT OF HUMAN SERVICES
BUREAU OF CHILDREN AND ADULT LICENSING**

Licensing Activity, Fiscal Year 2011

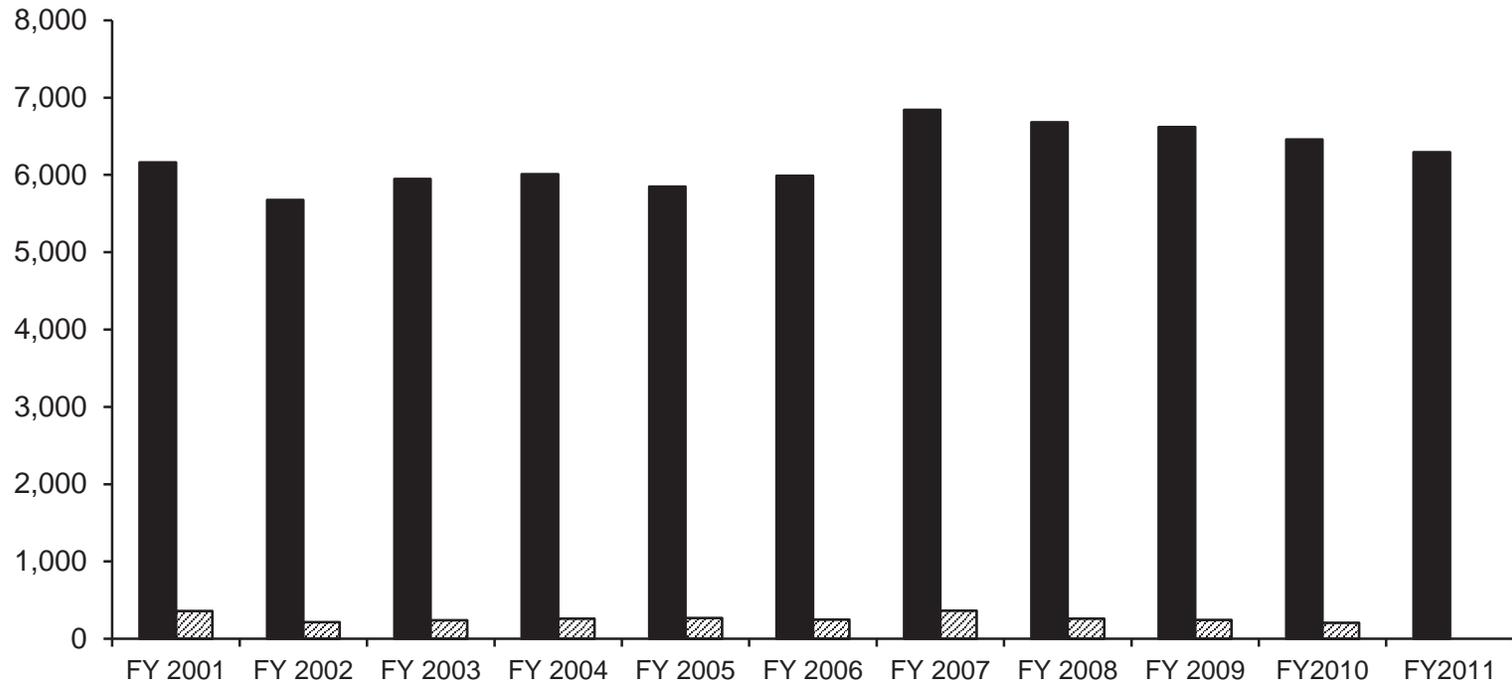
Adult Foster Care and Homes for the Aged, Child Care, Child Welfare

Licensing Activity By Division and Care Setting	Facilities	Capacity	Enrollments Received All Care Settings	License: Original Issues	License: Renewals Timely	Total Renewals Completed	Facilities Closed	Disciplinary Actions	Summary Suspensions
Adult Foster Care, & Homes for the Aged									
Family Homes Capacity 1-6 People	1,094	5,252	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Small Group Homes Capacity 1-6 People	2,297	13,056	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Medium Group Homes Capacity 7-12 People	540	5,856	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Large Group Homes 13-20 People	520	9,731	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Congregate Homes Capacity > 20 people	10	353	N/A	N/A	N/A	N/A	N/A	N/A	N/A
County Infirmary Homes for the Aged	2 193	96 14,829	N/A N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A
TOTAL	4,656	49,173	313	306	1,204	2,013	320	23	5
Child Care Licensing									
Child Care Centers	4,508	296,700	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Family Homes	4,941	29,387	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Group Homes	2,405	28,755	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TOTAL	11,854	354,842	875	994	2,368	3,926	1,688	59	9
Child Welfare Licensing									
Child Placing Agencies	221	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
CCI Institutions	213	9,205	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Camps	529	85,005	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Foster Care	7,259	17,095	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TOTAL	8,222	111,305	474	2,159	334	407	1,974	147	0
BCAL TOTAL	24,732	515,320	1,662	3,459	3,906	6,346	3,982	229	14

DEPARTMENT OF HUMAN SERVICES

BCAL: ADULT AND CHILD CARE FACILITIES

Complaints and Disciplinary Actions FY 2001 - FY 2011

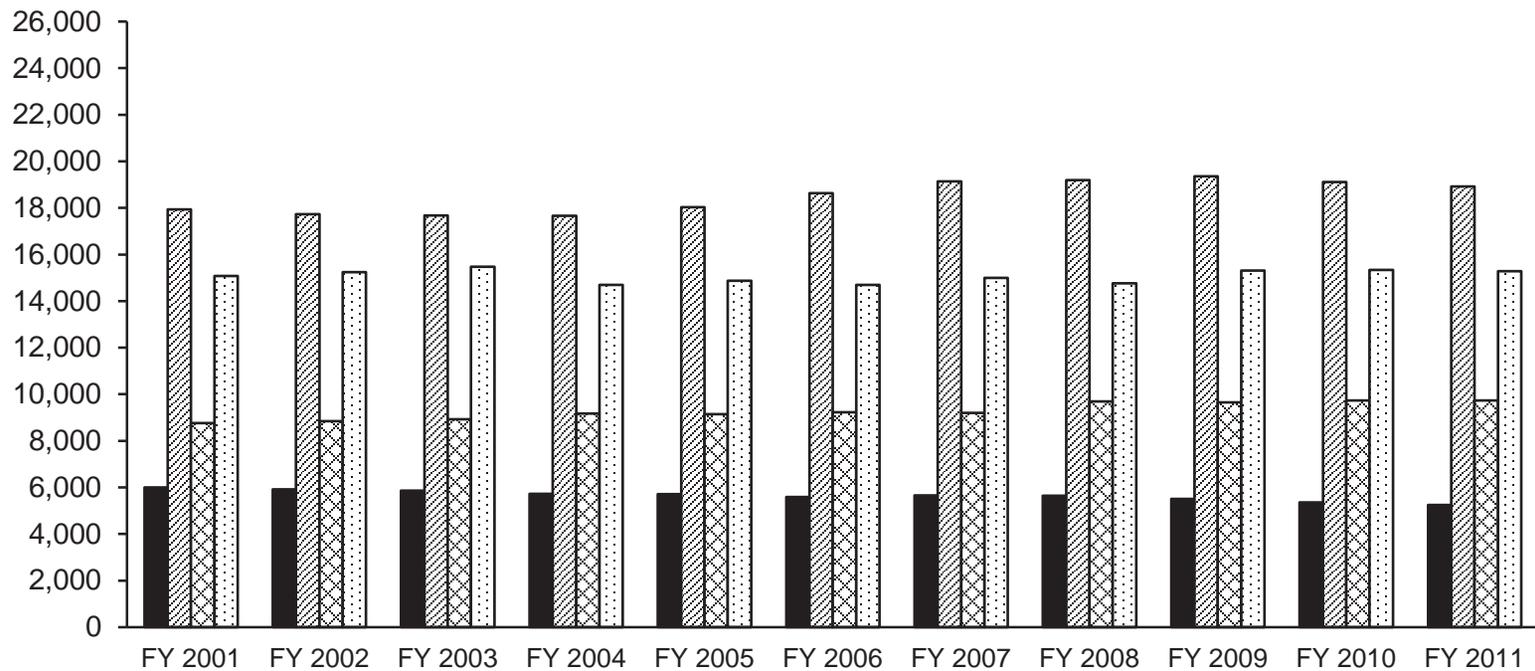


■ Complaints	6,164	5,675	5,950	6,012	5,849	5,991	6,844	6,683	6,618	6,461	6,295
▨ Disciplinary Actions	358	214	238	261	269	250	364	262	243	205	229
% Complaints Res. Disp. Act.	5.8%	3.8%	4.0%	4.3%	4.6%	4.2%	5.3%	3.9%	3.7%	3.2%	3.6%

Note: The Bureau of Children and Adult Licensing regulates more than 24,730 facilities, serving more than 515,320 children and adults. In FY 2011, BCAL responded to more than 6,295 complaints, resulting in 229 disciplinary actions.

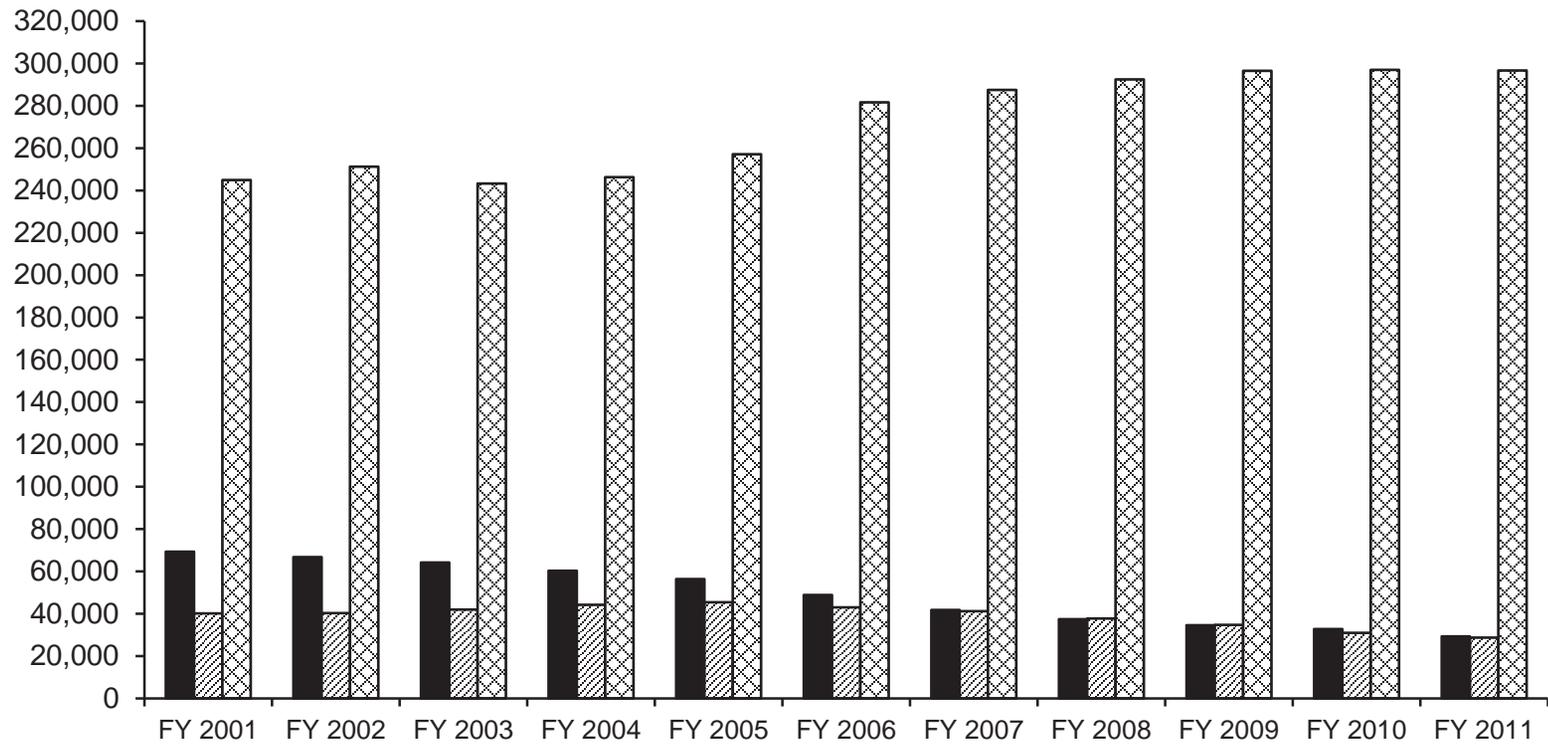
DEPARTMENT OF HUMAN SERVICES BCAL: ADULT FOSTER CARE LICENSING

Total Number of Adults in Care by Care Setting FY 2001 - FY 2011



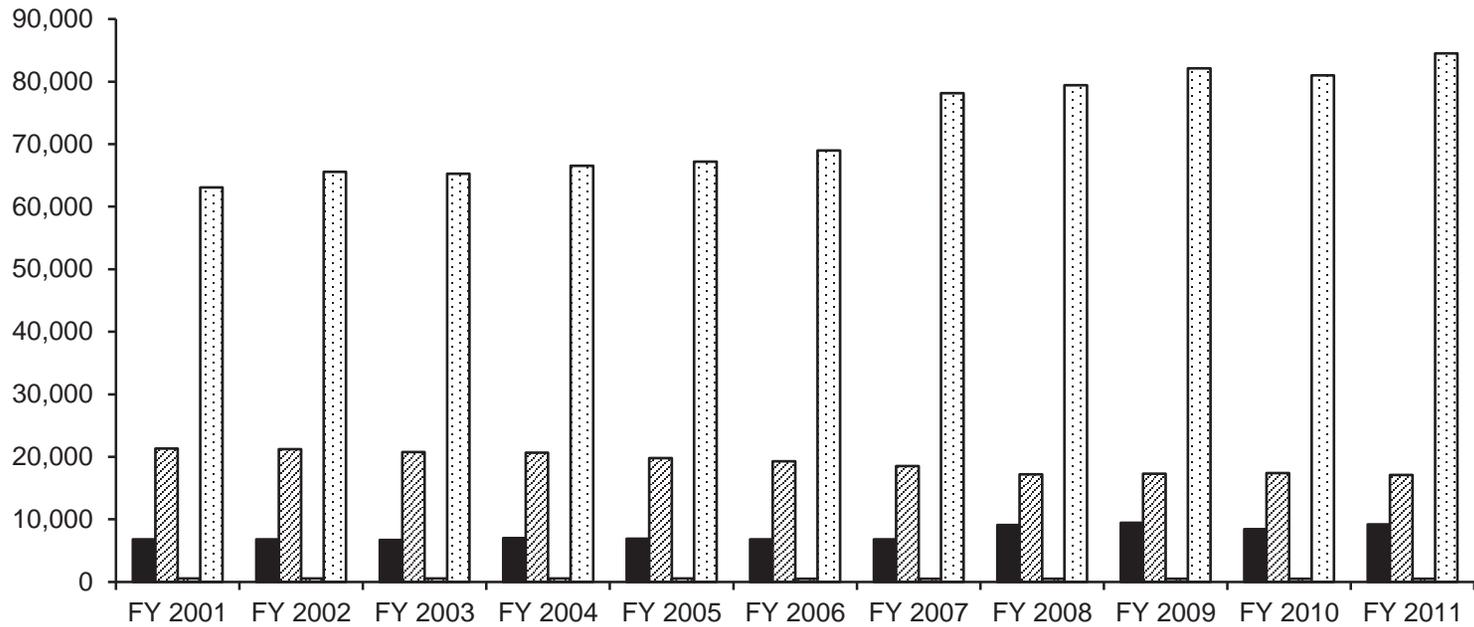
■ Family Homes	6,005	5,913	5,864	5,731	5,718	5,591	5,661	5,642	5,504	5,356	5,252
▨ Small & Med. Group Homes	17,932	17,727	17,677	17,662	18,029	18,631	19,131	19,198	19,350	19,105	18,912
▩ Large Group Homes	8,763	8,839	8,925	9,170	9,149	9,228	9,196	9,685	9,651	9,726	9,731
▤ Congregate, Co. Infirm., Other	15,083	15,243	15,469	14,693	14,876	14,697	14,989	14,766	15,306	15,338	15,278
Total	47,783	47,722	47,935	47,256	47,772	48,147	48,977	49,291	49,811	49,525	49,173

DEPARTMENT OF HUMAN SERVICES
CHILD CARE LICENSING DIVISION
 Total Number of Children in Care by Care Setting
 FY 2001 - FY 2011



■ Family Homes	69,276	66,729	64,193	60,338	56,348	48,833	41,744	37,482	34,645	32,840	29,387
▨ Group Homes	40,149	40,362	41,884	44,143	45,410	42,937	41,182	37,817	34,706	30,932	28,755
▩ Centers	244,906	251,229	243,194	246,302	257,084	281,581	287,513	292,450	296,604	297,042	296,700
Total	354,331	358,320	349,271	350,783	358,842	373,351	370,439	367,749	365,955	360,814	354,842

DEPARTMENT OF HUMAN SERVICES
CHILD WELFARE LICENSING DIVISION
 Total Number of Children in Care by Care Setting
 FY 2001 - FY 2011



■	Child Care Institution	6,790	6,796	6,702	7,015	6,909	6,791	6,816	9,095	9,440	8,425	9,205
▨	Foster Care Placement	21,322	21,210	20,772	20,672	19,770	19,296	18,494	17,181	17,292	17,406	17,095
▩	Court-Operated Placement	520	538	538	538	540	498	506	506	506	506	482
▤	Camps	63,084	65,588	65,243	66,556	67,180	68,972	78,157	79,431	82,138	80,975	84,523
	Total	91,716	94,132	93,255	94,781	94,399	95,557	103,973	106,213	109,376	107,312	111,305

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Local Office Staff and Operations	Program: Community Resource Program

PROGRAM STATEMENT

The Community Resource Program (CRP) offers numerous services and locally customized programs to meet community needs with the assistance of volunteers, donations, and grant funding. The CRP responds to the unique and changing needs of DHS staff, recipients, and community partners. The mission of the CRP is to connect volunteers, donations, and other community resources to support independence and well-being for public assistance and other DHS clients. Services provided by volunteers include, but are not limited to: transportation, mentoring, tutoring, case aid, donation distribution, tax preparation assistance, food pantry, camperships, infant safe sleep projects, and telephone reassurance programs. A new service provided by volunteers statewide in 2011 is the Job Navigator (JN) program. Job Navigators (JN's) are mentors, guides, and job coaches who help DHS clients with terminated cash assistance (FIP) benefits to find and retain employment. Most Community Resource Coordinators (CRCs) also organize and oversee sizable holiday donation programs for their respective communities. CRCs may have additional duties, including contract management and supervision of other DHS program areas.

SOURCE OF FINANCING

- State funds.
- Various federal funds.

LEGAL BASIS

- FY 2012 DHS Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

- In FY 2010, more than 17,100 volunteers provided 516,824 hours of service to clients. The estimated value of volunteered hours was \$10,877,652.¹
- In addition to nearly \$11.0 million in volunteer hours in FY 2010, an additional \$5.35 million in cash and non-cash donations was received.
- The combined monetary value of CRP in FY 2010 (that is the amount of cash, goods & services brought into DHS) was estimated to be \$16.23 million. That is, \$10.88 million in volunteered hours, plus \$5.35 million in cash and non-cash donations.
- CRP outlays for wages, salaries and other expenditures in FY 2010 totaled \$6.99 million.
- Thus, the FY 2010 CRP return on investment was estimated to be about \$2.32 per dollar invested. In other words, for about \$7.0 million in CRP program costs, DHS leveraged client and community services worth nearly 232 percent of originating outlays.

¹ In CY 2009, the national "Independent Sector Organization" estimated the national average value of volunteer time at \$20.85 per hour. Annual "value estimates" are a means to acknowledge and quantify time, talents and energy afforded clients and charitable organizations. As reported by CRP staff for FY 2010, the actual average value per-hour of volunteered hours in Michigan was \$21.04.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Community Action and Economic Opportunity	Program: Community Services Block Grant

PROGRAM STATEMENT

The goals of the Community Services Block Grant (CSBG) program are to assist low-income individuals and families to achieve self-sufficiency and to address the causes of poverty. The target population for FY2011 includes individuals and families with income at or below 125 percent of the poverty level. CSBG grantees include 30 Community Action Agencies (CAAs) serving all 83 counties. They are:

<i>Agency</i>	<i>Community Served</i>
Alger-Marquette Community Action Board.....	Alger, Marquette
Allegan County Resource Development Committee, Inc.	Allegan
Area Community Services Employment and Training Council.....	Kent
Baraga-Houghton-Keweenaw Community Action Agency, Inc.	Baraga, Houghton, Keweenaw
Capital Area Community Services, Inc.	Clinton, Eaton, Ingham, Shiawassee
City of Detroit, Department of Human Services	City of Detroit
Chippewa-Luce-Mackinac Community Action and Human Resources Authority, Inc.	Chippewa, Luce, Mackinac
Community Action Agency of South Central Michigan.....	Barry, Branch, Calhoun, St. Joseph
Community Action Agency of Jackson, Lenawee, Hillsdale.....	Hillsdale, Jackson, Lenawee
Dickinson-Iron Community Services Agency	Dickinson, Iron
Economic Opportunity Committee of St. Clair County	St. Clair
Eight CAP, Inc.	Gratiot, Ionia, Isabella, Montcalm
Five CAP, Inc.	Lake, Manistee, Mason, Newaygo
Genesee County Community Action Resource Department.....	Genesee
Gogebic-Ontonagon Community Action Agency.....	Gogebic, Ontonagon
Human Development Commission	Huron, Lapeer, Sanilac, Tuscola
Kalamazoo County Community Action Bureau	Kalamazoo
Macomb County Community Services Agency	Macomb
Menominee-Delta-Schoolcraft Community Action Agency and Human Resource Authority	Delta, Menominee, Schoolcraft
Mid-Michigan Community Action Agency, Inc.	Bay, Clare, Gladwin, Mecosta, Midland, Oscoda
Monroe County Opportunity Program	Monroe
Muskegon-Oceana Community Action Against Poverty, Inc.....	Muskegon, Oceana
Northeast Michigan Community Service Agency	Alcona, Alpena, Arenac, Cheboygan, Crawford, Iosco, Montmorency, Ogemaw, Oscoda, Otsego, Presque Isle
Northwest Michigan Community Action Agency.....	Antrim, Benzie, Charlevoix, Emmet, Grand Traverse, Kalkaska, Leelanau, Missaukee, Roscommon, Wexford
Oakland Livingston Human Services Agency	Livingston, Oakland
Ottawa County Community Action Agency	Ottawa
Saginaw County Community Action Committee, Inc.....	Saginaw
Southwest Michigan Community Action Agency.....	Berrien, Cass, Van Buren
Washtenaw County Human Services Department.....	Washtenaw
Wayne Metropolitan Community Action Agency	County of Wayne, excluding City of Detroit

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Community Action and Economic Opportunity	Program: Community Services Block Grant

Michigan's CSBG allotment is used at the local level in combination with a variety of funding sources to support programs such as USDA commodity food distribution, senior meal programs, Head Start, housing, homelessness, job training support, literacy, school readiness/pre-school programs and other programs targeted to low-income individuals and families. Services and activities by the CAAs are designed to attain meaningful education and employment opportunities, adequate housing and living environments, emergency assistance, participation in community affairs and the removal of obstacles that impede self-sufficiency. CAAs develop service plans outlining activities under one or more of the following nine major program categories: employment, education, income management, housing, emergency services, nutrition, linkages with other programs, health and self-sufficiency.

SOURCES OF FINANCING

- Federal (HHS) Community Services Block Grant funds

LEGAL BASIS

- Community Services Block Grant Act of 1981, Public Law 97-35
- DHS FY 2012 Appropriations Act, 2011 PA 63

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

Estimated expenditures for FY 2011 CSBG services¹ were:	
Employment	\$993,678
Education	1,442,812
Income Management	1,755,135
Housing	1,715,663
Emergency Services	4,582,357
Nutrition	2,272,405
Linkages with other programs	3,578,761
Self-Sufficiency	2,067,871
Health	695,100
Estimated Total Expenditures	\$19,103,782

¹ FY 2011 estimated expenditures are based on FY 2011 planning reports from the 30 CAAs. DHS will not have all FY 2011 figures from the CAAs until March 31, 2012.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Community Action and Economic Opportunity	Program: Community Services Block Grant

Of the above amounts, approximately \$5.1 million was used to support CAA centralized operating costs. Although agencies receive funding from other government and private organizations for direct services, the CSBG funding enables the agencies to maintain core staffing, facilities, equipment maintenance and other centralized activities. This core funding enables CAAs to leverage approximately \$373 million in additional federal, state, local and private funds. CAAs served over 293,691 households in FY 2010. NOTE: Final FY 2011 household data are not yet available.

CSBG discretionary funds were utilized to fund a variety of program areas including: training and technical assistance for all CAAs, migrant services contracts, Indian tribes/councils contracts, statewide earned income tax credit outreach and tax return preparation services and for various community-based initiatives, including: agency capacity building such as staff training and strategic planning; developing new programs such as home buyer education, IDAs, entrepreneurship training, budget counseling, and youth employment; and technology and infrastructure enhancement for agency accounting systems, reporting needs, and service expansion.

Department:
Human Services

Appropriation Unit:
Children's Services

Program:
Domestic Violence Prevention and Treatment Board

PROGRAM STATEMENT

The Michigan Domestic Violence Prevention and Treatment Board (MDVPTB) was established in 1978 by state legislation that created a governor-appointed board responsible for focusing state activity on domestic violence. The board, administratively housed in the Department of Human Services, administers state and federal funding for domestic violence shelters and advocacy services, develops and recommends policy, and develops and provides technical assistance and training. The seven-member Board represents a cross-section of professions concerned with the crime of domestic and sexual violence. Members are appointed by the governor with the advice and consent of the senate.

The goals of the board are to:

- Contract for the provision of emergency shelter and related services (counseling, information and referral, and advocacy) to victims of domestic violence and their children.
- Contract for the provision of Sexual Assault Comprehensive Services (counseling, advocacy, public awareness, and emergency intervention services) to victims of sexual assault, their family members and/or their significant others.
- Contract for the provision of Transitional Supportive Housing and supportive services (transitional housing, counseling, transportation, financial/specific assistance, employment services, health care, and client development seminars) to victims of domestic violence and their dependent children.
- Educate service providers and other professionals on the prevention and treatment of domestic and sexual violence.
- Improve the response of the criminal justice, legal, medical, mental health and social welfare systems to the crimes of domestic and sexual violence.
- Ensure that safety, confidentiality and justice are provided to victims of domestic and sexual violence.

Specific services provided:

- Domestic Violence Comprehensive Services: The following services are provided under contracts with 44 nonprofit domestic violence programs: emergency shelter; emergency intervention (24-hour crisis lines and emergency response services); supportive counseling (individual and group); community education and prevention services; personal and support advocacy with health care, criminal justice systems, housing location, financial assistance, transportation and child care; and children's services.
- STOP Violence Against Women Grant: The federal STOP Violence Against Women Grant for FY 2011 provided more than \$3 million to local collaborative projects to improve victim services and the criminal justice response to violent crimes against women. Local projects address domestic violence, sexual assault, dating violence and stalking throughout the state including specialized Sexual Assault Nurse Examiner programs. These funds also support the development of statewide policies, protocols, and training in collaboration with state agencies and statewide organizations.
- Sexual Assault Comprehensive Services Program: The board currently funds 23 nonprofit sexual assault programs to provide comprehensive services (24-hour crisis line, individual and group counseling, emergency response, and advocacy) to sexual assault survivors and their significant others.
- Transitional Supportive Housing Program: The board currently funds 17 nonprofit domestic violence programs to provide for safe transitional housing and supportive services for up to 24 months.

Population Description:

- The Michigan State Police Michigan Incident Crime Reporting in 2010 (latest complete data available) indicates that 101,171 domestic violence victims and 4,590 sexual assault victims were reported. Data on these victims include:

DOMESTIC VIOLENCE				SEXUAL ASSAULT			
Age of Victim		Race of Victim		Age of Victim		Race of Victim	
19 Or Under	21.0%	White	60.4%	19 Or Under	69.4%	White	71.4%
20 – 29	29.8%	Black	36.2%	20 – 29	17.1%	Black	22.9%
30 – 39	21.5%	Other/Unknown	3.4%	30 – 39	6.6%	Other/Unknown	5.7%
40+/Unknown	27.7%			40+/Unknown	6.9%		

SOURCES OF FINANCING

- State funds.
- Sexual Assault Victims Medical Forensic Intervention and Treatment Act (PA 546 of 2008).
- TANF block grant.
- Federal Family Violence Prevention and Services Act grant.
- Preventative Health and Health Services block grant.
- Violence Against Women Act – STOP Violence Against Women grant.
- Violence Against Women Act – Rural Domestic Violence and Child Victimization Enforcement grant.

LEGAL BASIS

- Michigan Domestic Violence, 1978 PA 389
- Federal Family Violence Prevention and Services Act 42 USC 10401
- Federal Violence Against Women Act of 2005, P.L. 106-386
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

Domestic Violence:

All 83 counties receive services from 44 nonprofit domestic violence programs. The following figures are from FY 2011:

Number Served (Domestic Violence):		Services Provided:	
Residential adults and children	10,858	Nights of shelter	245,966
Non-residential adults and children	29,359	Crisis calls answered, includes information and referral calls	86,350

In 2010, MSP crime statistics show that there were 89 domestic violence homicides in Michigan. If not for services (including shelter) for victims and their children, this number would likely be much higher. These services are critical in preventing homicides in Michigan. These services provide access to immediate safety and support for women and a multitude of children who otherwise would likely be left with no option but to stay and continue to struggle against the batterer's physical, emotional, psychological, and sexual violence.

Sexual Assault Comprehensive Services (SACS):

Sexual assault services were competitively bid mid-year in FY 2011. From 10/1/10 to 3/30/11, 57 counties received services from 26 nonprofit sexual assault programs. From 4/1/11 to 9/30/11, 42 counties received services from 23 nonprofit sexual assault programs, including eight Sexual Assault Nurse Examiner (SANE) programs serving 10 counties. The following figures are from FY 2011:

SACS Number Served:		SANE Number Served:	
Adults and children	6,165	Adults and children	622

Services Provided:	
Hours of individual counseling	19,693
Crisis calls answered includes information and referral calls	9,364

National statistics say that one in three women will be sexually assaulted in their lifetime and one in six boys will be sexually assaulted before the age of 18. Because sexual assault (SA) is one of the most underreported violent crimes, SA crisis programs are often the only organizations that victims access for help to try to heal from this significant trauma. Michigan has NEVER been able to provide support services in all 83 counties, even though the need clearly exists. In addition to counseling, programs help victims with immediate needs like broken locks, reports to law enforcement, and medical care. Research clearly shows that without these services, sexual assault victims are at much higher risk for more violence, long-term psychological effects and economic struggle, which has a substantial impact on this and future generations.

Department:
Human Services

Appropriation Unit:
Children's Services

Program:
Domestic Violence Prevention and Treatment Board

Transitional Supportive Housing (TSH):

Transitional Supportive Housing services were competitively bid in FY 2011. Seventeen grants were awarded to domestic violence or transitional supportive housing service providers that cover 34 counties. Additionally, four previously awarded TSH grantees were provided with continuation funding for transitional housing covering five additional counties. The following figures are from FY 2011:

TSH Number Served:		Services Provided:	
Adults and children	1,134	Nights of housing	236,205

Research shows that the most dangerous time for victims of domestic violence is when they leave the abusive relationship. Emergency shelter helps for a very limited time. Women and their children face many problems when they are forced to leave their homes to escape abuse. Often, affordable housing is not available and shelters are only able to provide temporary housing. Victims may also face challenges with credit problems, an inability to find a job, or a troubled rental history because the batterer created problems resulting in an eviction. For domestic violence victims, transitional housing is the step between emergency shelters and permanent housing. The MDVPTB TSH program is a combination of providing a safe home along with supportive services resulting in women being able to transition to their new lives.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Adult and Family Services	Program: Employment Training Programs Overview	

PROGRAM STATEMENT

Family Independence Program (FIP) recipients, unless temporarily deferred, are required to participate in Michigan Works! Agency (MWA) employment and training programs to increase their employability and find employment. Deferred FIP recipients may volunteer. The employment program components are:

- Jobs, Education and Training (JET)
- Employment and Training Program for Food Assistance Recipients
- Direct Support Services (including Employment Support Services and Family Support Services)

JET is the employment program for FIP applicants and recipients administered by the Workforce Development Agency, State of Michigan (WDASOM) through the local MWAs. FIP recipients are required to participate in the JET program unless they are exempt by state law. The goal of JET participation is FIP case closure due to self-sufficiency. MWAs will continue to serve all JET participants until their FIP case is closed by DHS, or until they are referred back to DHS due to failure to participate or becoming deferred. DHS will refer to JET every non-deferred mandatory participant except those participating with a Tribal Contractor or Refugee Contractor program, VISTA, Job Corps, and AmeriCorps participants.

JET is a partnership between DHS and WDASOM. The program began as a pilot in April 2006 in four sites: Kent County, the Madison District in Oakland County, Sanilac County and the Glendale/Trumbull District in Wayne County. Local workforce boards, the MWAs and local DHS offices provide a blended set of services to connect Michigan’s families with the kind of jobs, education and training opportunities to achieve self-sufficiency and meet the workforce and skill needs of Michigan’s businesses. JET primary goals lead to a reduction in welfare cases, and reduce recipients cycling on and off public assistance. An increase in job retention, earnings, and participation in education and job training programs is expected to take place. A corresponding decrease in Medicaid cases and an overall reduction in program costs are primary goals.

- Employment and Training Program for Food Assistance Recipients: serves former time-limited Food Assistance-only recipients who are required to work or meet other requirements. The program is provided through the local MWAs.
- Direct Support Services (DSS):
 - Employment Support Services (ESS): are available through DHS and the MWAs to support FIP recipients’ participation in employment and training activities. ESS are available from DHS or MWA for parents or caretaker relatives. ESS are also available to families for a maximum of four consecutive months when receiving Child Care, Food Assistance or Medicaid, and the services are needed to maintain or enhance employment. These are services not available through the JET program, such as counseling and classes in life skills that address family issues that will help families to self-sufficiency.

- Family Support Services: are available through DHS for FIP recipients who are participating in JET or recipients who are deferred to prepare them for when their deferral ends. Family Support Services are also available to families for a maximum of four consecutive months when receiving Child Care, Food Assistance or Medicaid, and the services are needed to maintain or enhance employment. These are services not available through the JET program, such as counseling and classes in life skills that address family issues that will help families to self-sufficiency.
- Non-Cash Recipient Employment and Training Program: Adults or caretaker relatives in families receiving Child Care, Food Assistance or Medicaid are eligible for employment and training activities from the MWA. However, this program has been suspended due to lack of funding. Adults can self-refer under other funding sources.

Federal Program Requirements:

- Participation Rates: Federal law requires that states receiving funding under the Temporary Assistance for Needy Families (TANF) block grant must meet work participation rates for the cash assistance caseload. States must achieve the following minimum work participation rates (as a percentage of the total cash assistance caseload):

WORK PARTICIPATION RATES - UNADJUSTED			
All Families		Two-Parent Families	
FY 1997	25.0%	FY 1997	75.0%
FY 1998	30.0%	FY 1998	75.0%
FY 1999	35.0%	FY 1999 (and onward)	90.0% ¹
FY 2000	40.0%		
FY 2001	45.0%		
FY 2002 (and onward)	50.0%		

- Adjusted Participation Rates: States are allowed to adjust work participation rates to take into account cash assistance caseload reductions that have occurred since 2005. Michigan's participation rate targets have been adjusted as allowed over the years of TANF regulations. See chart on next page.

¹ Two-parent families have been state- funded effective FY 2007. The 90 percent participation rate does not apply.

Department:
Human ServicesAppropriation Unit:
Adult and Family ServicesProgram:
Employment Training Programs Overview

**TANF FEDERAL PARTICIPATION RATE TARGETS
AND MICHIGAN ADJUSTED AND ACTUAL PARTICIPATION RATES**

Federal work participation rate targets were established with the passage of welfare reform. These rates were subsequently adjusted to recognize the reductions in public assistance caseloads that states have experienced since 1995 and 2005. The following chart displays both federal rates and adjusted target rates, along with Michigan's actual participation rates.

FISCAL YEAR	F E D E R A L T A R G E T		M I C H I G A N			
	All Families <i>Percent</i>	Two-Parent Families <i>Percent</i>	ADJUSTED TARGET		ACTUAL PARTICIPATION RATES	
			All Families	Two-Parent Families	All Families	Two-Parent Families
2000	40%	90%	0.0%	4.1%	36.4%	61.7%
2001	45%	90%	0.0%	5.0%	33.8%	53.5%
2002	50%	90%	0.0%	4.6%	28.9%	46.5%
2003	50%	90%	0.0%	6.4%	25.3%	36.2%
2004	50%	90%	0.0%	6.0%	24.5%	35.7%
2005	50%	90%	0.0%	7.6%	22.0%	30.4%
2006 ²	50%	90%	0.0%	8.2%	21.6%	26.2%
2007	50%	NA	44.3%	NA	24.2%	NA
2008	50%	NA	50.0%	NA	33.6%	NA
2009	50%	NA	27.8%	NA	27.9%	NA
2010 ³	50%	NA	26.8%	NA	22.8%	NA

² Original TANF participation rates and caseload credits remained in effect until 9/30/06. Re-authorization of the original TANF legislation occurred on 10/1/06.

³ Estimates

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Adult and Family Services	Program: Employment Training Programs Overview	

SOURCES OF FINANCING

- Federal TANF
- Food Stamp Employment and Training Funds
- Refugee Assistance Program

LEGAL BASIS

- Federal Social Security Act
- Social Welfare Act, 1939 PA 280
- Administrative Rules R.400.3591-R.400.3596
- 45 CFR Part 400 and 401
- Department of Licensing and Regulatory Affairs FY 2012 Appropriations Act, 2011 PA 63, Article XII
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS

As is the case in many states, Michigan is currently operating under economic crisis conditions. With the unemployment rate more than 10 percent, moving recipients off of temporary assistance is more difficult than ever. There has been a steady decrease in the amount of funding available to provide employment services to TANF-eligible families and corresponding decreases each year to the funding for Direct Support Services that assist clients with barrier removal services and activities. The chart above outlines Michigan's past and current work participation rates.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Adult and Family Services	Program: Employment and Training Programs - Employment-Related Activities

PROGRAM STATEMENT

The Department of Human Services encourages all applicants and recipients to engage in activities that lead to self-sufficiency. Adult Family Independence Program (FIP) recipients and Food Assistance-only recipients must participate in employment-related activities unless they are deferred.

Recipients served by JET through Michigan Works! Agencies:

- Family Independence Program (FIP) applicants and recipients.
- Refugee Assistance Program (RAP) recipients not served by a refugee contractor.
- Minor parents who have graduated from high school.

Recipients served by DHS:

- FIP recipients not meeting work requirements and referred back to the DHS by the MWA for non-cooperation or refusing employment.
- Non-cash recipients of Child Development and Care (CDC), Medicaid (MA), Food Assistance Program (FAP) (emergency employment support services only). Participants not meeting minimum federal requirements are referred to JET.
- FIP Job Corps participants, VISTA volunteers or AmeriCorps participants who meet minimum required hours of participation.
- Applicants and recipients exempt by state law.
- Applicants and recipients working 40 hours per week.

SOURCES OF FINANCING

- Federal TANF
- Food Stamp Employment and Training Funds
- Refugee Assistance Program

LEGAL BASIS

- Federal Social Security Act
- Social Welfare Act, 1939 PA 280
- Administrative Rules R.400.3591-R.400.3596
- 45 CFR Part 400 and 401
- DELEG FY 2012 Appropriations Act, 2011 PA 63, Article XII
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Adult and Family Services	Program: Employment and Training Programs - Employment-Related Activities	

PROGRAM EFFECTIVENESS

As is the case in many states, Michigan is currently operating under economic crisis conditions. With the unemployment rate over 10 percent, moving recipients off of temporary assistance is more difficult than ever. There has been a steady decrease in the amount of funding available to provide employment services to TANF-eligible families and corresponding decreases each year to the funding for Direct Support Services that assists clients with barrier removal services and activities. DHS is monitoring and reducing the number of clients claiming deferral by providing necessary services to enable referral to the JET program as quickly as possible.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Adult and Family Services	Program: Employment and Training Programs - Employment Support Services	

PROGRAM STATEMENT

DHS assists families in overcoming obstacles to achieving financial independence. To achieve the goal of self-sufficiency, applicants and recipients may need Employment Support Services (ESS). Services are provided through the MWAs or DHS. These services include, but are not limited to, the following:

- Transportation assistance, including bus tickets, tokens, reimbursement for public transportation or authorization for auto repairs or purchase.
- Child care for orientation or a compliance test.
- Pre-employment and training medical exams.
- Moving expenses.
- Special clothing (work boots, work gloves, hard hats, etc.).
- Assistance with child care.
- One-time work-related expenses such as payment for license fees.
- Purchase of professional tools.

SOURCES OF FINANCING

- Federal TANF
- Refugee Assistance Program
- Food Stamp Employment and Training funds

LEGAL BASIS

- Federal Social Security Act
- 45 CFR Part 400.72, 401
- Social Welfare Act, 1939 PA 280
- 7 CFR 273.7,
- DELEG FY 2012 Appropriations Act, 2011 PA 63, Article XII
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS

ESS continues to be one of the most efficient ways to remove barriers to self-sufficiency for clients. Transportation and child care continue to be the biggest barriers in reaching self-sufficiency. DHS and the MWAs provide these and the services mentioned above in an effort to reduce barriers associated with employment and participation in employment-related activities. DHS provides these same services to non-cash recipient families in an effort to avoid the need for application of cash assistance and maintenance of employment. DHS and the MWAs will continue to provide these services in 2012.

Department:
Human Services

Appropriation Unit:
Adult and Family Services

Program:

**Employment and Training Programs -
Employment and Training Program for Food Assistance Recipients**

PROGRAM STATEMENT

The Employment and Training Program for Food Assistance applicants and recipients provides services to assist Food Assistance applicants and recipients in obtaining and maintaining employment. Michigan is currently under a waiver that exempts childless adults from the three-month time limit for food assistance. Therefore, all food assistance applicants and recipients are subject to the same employment and training requirements as other FAP recipients. Food assistance applicants and recipients are required to work or engage in employment-related activities as assigned. They may also volunteer for an employment and training program component.

Note: Persons employed or self-employed an average of 30 hours or more per week over the benefit period or earning on average the federal minimum wage times 30 hours per week are not required to participate in any further employment-related activities. This includes migrant or seasonal farm workers with an employer or crew chief contract/agreement to begin work within 30 days.

SOURCES OF FINANCING

- Food Stamp Employment and Training funds

PROGRAM EFFECTIVENESS

This is a voluntary program. Single adults age 18-50 without children who are not deferred may voluntarily participate in this program. In fiscal year 2011 there were 3,183 voluntary referrals, of which 1,073 attended an activity and 205 clients completed program objectives. There were 550 episodes of job search, 453 episodes of education and training and 483 episodes of employment that lead to job retention services. The FY 2012 plan is to increase the number of voluntary participants.

LEGAL BASIS

- Federal Food Stamp Act of 1977
- 7 CFR 273
- DELEG FY 2012 Appropriations Act, 2011 PA 63, Article XII
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS

Information on the number of food assistance-only recipients served is not available at this time.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Adult and Family Services	Program: Employment and Training Programs - Family Support Services

PROGRAM STATEMENT

Family Support Services (FSS) may be provided for FIP applicants or recipients to address barriers to self-sufficiency not covered by ESS. FSS may also be provided to families receiving childcare, food assistance or Medicaid if the parent or caretaker and the service are needed to maintain or enhance employment. FSS may include, but are not limited to:

- Classes, seminars and counseling in the following areas:
 - Motivation, self-esteem, personal growth
 - Nutrition, hygiene
 - Time management, life management
 - Conflict resolution
- Other direct support services:
 - Haircuts, grooming services
 - Tutoring, family mentoring (other than employment-related)
- Counseling Services:
 - Short-term crisis intervention counseling (domestic violence, divorce, stress reduction)
- Indirect FSS, which cannot be attributed to specific household members, may also be purchased. Some examples include:
 - Motivational items to be loaned (books, videos, cassettes, etc.)

SOURCES OF FINANCING

- TANF Block Grant funds
- Refugee Assistance Program

LEGAL BASIS

- Federal Social Security Act
- 45 CFR Part 400, 401
- 7 CFR 273.7
- DELEG FY 2012 Appropriations Act, 2011 PA 63, Article XII
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS

FSS continues to be one of the most efficient ways to remove barriers to self-sufficiency for FIP and non-cash recipients. Soft skills education and counseling is a primary service used in reaching self-sufficiency. DHS provides the services mentioned above in an effort to reduce barriers associated with employment and participation in employment-related activities. DHS will continue to provide these services in FY 2012 with a focus on expanding the use of statewide counseling contract services to deferred clients.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Adult and Family Services	Program: Employment and Training Programs - Family Self-Sufficiency Plan	

PROGRAM STATEMENT

The Family Self Sufficiency Plan (FSSP) is a shared case-management tool completed by the Family Independence specialist, the FIP applicant or recipient, and the MWA case manager to mutually arrive at a plan to help the family reach its goals of self-sufficiency; as well as to track employment and participation hours. All pending or active FIP families must complete a FSSP. The plan outlines the family’s strengths, barriers, needs, options, and steps to reach its goals. It also highlights department actions to support the family’s goals, such as coordinating efforts with other agencies, making referrals and advocating for the family.

The following required activities are examples of ways FIP applicants or recipients may fulfill their FSSP:

- Completion of the Family Automated Screening Tool (FAST) by each adult FIP recipient.
- Obtaining and retaining employment.
- Active participation in approved work activities, usually through the Jobs, Education and Training program.

Other activities may be necessary to aid the family’s progress toward self-sufficiency. Examples include:

- Enrolling in school or training classes to improve employment skills.
- Soft skills.
- Community service.
- School-related activities (Head Start participation, parent volunteer activities, parent-teacher conferences, etc.).
- Children’s health-related activities (prenatal care, infant’s medical care, children’s immunizations, etc.).
- Other activities that meet the goals of the FSSP.

SOURCES OF FINANCING

- Federal TANF Block Grant funds
- State funds

LEGAL BASIS

- Social Welfare Act, 1939 PA 280
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS:

FAST survey data are collected, stored and used to produce quarterly reports for local offices to use in planning Employment Support Services (ESS) and FSS activities/expenditures needed in their county. The report lists the 10 most common client-reported barriers by county. This report will continue in FY 2012. The FAST displays and uses client data on the FSSP for purposes of planning “client-based services.”

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Adult and Family Services	Program: Employment and Training Programs - JET

PROGRAM STATEMENT

The Jobs, Education and Training (JET) program emphasizes employment, education and training. JET is a collaborative effort between the Workforce Development Agency, State of Michigan (WDASOM) and DHS. Adult Family Independence Program (FIP) recipients must participate in JET unless they are specifically exempt by state law. JET provides the following services: an overview of the basic skills and workplace competencies valued by employers, pre-employment and work maturity skills, resume writing, self-marketing and learning how to target employment opportunities, and education and training programs. These services are provided by 25 Michigan Works! Agencies (MWAs). The MWAs are responsible for providing JET services to every county in the state and working with local DHS offices in designing local service delivery strategies.

Through JET, the following participants are referred to a MWA: FIP recipients who are required to work and not meeting full work requirements, and minor parents who have completed high school. All work-ready FIP applicants are provided a general program overview as a condition of eligibility. The purpose of the general program orientation is to explain employment and training requirements, supportive services, and child support requirements with the expectation that applicants and recipients will become self-supporting.

SOURCES OF FINANCING

- Federal TANF Block Grant.
- State funds.

LEGAL BASIS

- Federal Social Security Act
- Michigan Administrative Rules R.400.3601–R.400.3613
- DELEG FY 2012 Appropriations Act, 2011 PA 63, Article XII
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS

The Work First program began October 1, 1994 and the JET program began June 1, 2006. As is the case in many states, Michigan is currently operating under economic crisis conditions. With the unemployment rate more than 10 percent, moving recipients off of temporary assistance is more difficult than ever. There has been a steady decrease in the amount of funding available to provide employment services to TANF-eligible families and corresponding decreases each year to the funding for Direct Support Services that assists clients with barrier removal services and activities.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Adult and Family Services	Program: HIV/AIDS Support Services

PROGRAM STATEMENT

The DHS HIV/AIDS Support Services Unit provides information and advocacy for anyone in Michigan infected by HIV. The Insurance Assistance Program was created to assist persons who are HIV-positive to retain or keep their previous private health insurance benefits. Paying insurance premiums for high-cost medical clients results in significant savings in Medicaid and in the State Drug Assistance Program (administered by DCH).

- The HIV/AIDS Services unit provides client advocacy through workshops and service worker training, covering topics such as: accessing DHS public assistance benefits, accessing Social Security Administration program benefits, and identifying benefits available through community agencies and other community resources.
- The Insurance Assistance Program administers the statewide Insurance Assistance Program and the Insurance Assistance Program-Plus.¹

SOURCES OF FINANCING

- Insurance Assistance Program – State Medicaid Offset funds.
- Title II Ryan White HIV federal funds.

LEGAL BASIS

- DHS FY 2012 Appropriations Act, 2010 PA 63, Article X

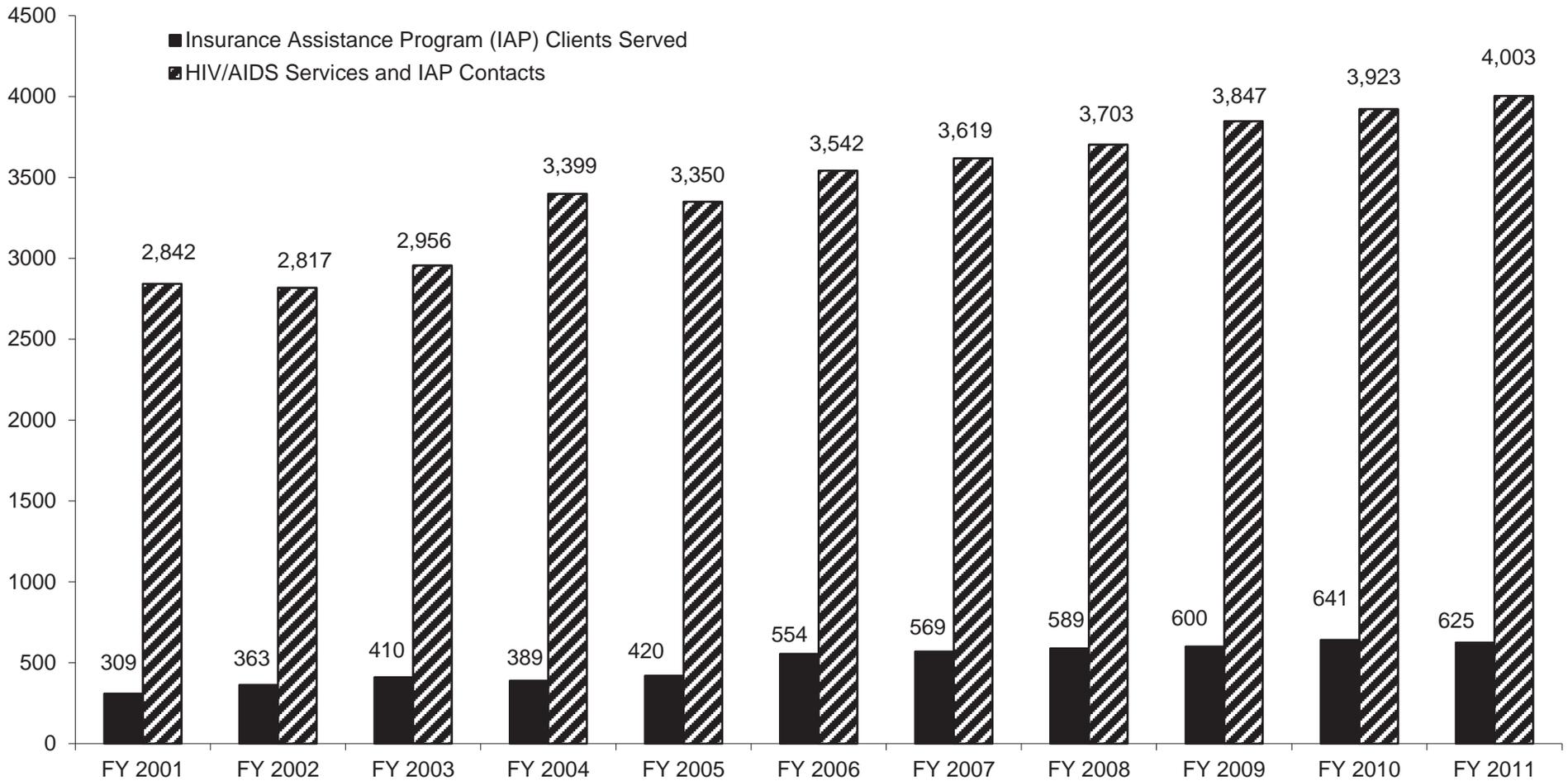
PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

The Insurance Assistance Program was created to assist HIV-positive persons to retain or keep previous private health insurance benefits. Paying insurance premiums for high-cost medical clients results in significant savings in Medicaid and in the State Drug Assistance Program (administered by DCH). In FY 2011, the Insurance Assistance Program (IAP) Plus paid \$890,205 for insurance premiums for 250 clients. If the program did not pay their premiums, clients would need to seek Medicaid or Drug Assistance Program benefits to pay for medical and prescription needs. Doing so would reduce Medicaid and Drug Assistance Program benefits to assist clients who are not eligible for the Insurance Assistance Program.

HIV/AIDS Services Contacts and Insurance Assistance Program activity are summarized on the following graph. Contacts and clients have increased year-over-year since FY 2005.

¹ Clients must have a private health insurance policy. Policies are typically offered through employer COBRA plans, individual policies, and Medicare supplemental plans.

DEPARTMENT OF HUMAN SERVICES INSURANCE ASSISTANCE PROGRAM (IAP) CLIENTS SERVED & HIV/AIDS SERVICES AND IAP CONTACTS FY 2001 - FY 2011



Note: Contacts and clients served have increased year-over-year since FY 2005

Department:
Human Services

Program:
Home Help Services or Independent Living Services

PROGRAM STATEMENT

The goal of the Home Help Services (HHS) program, also known as Independent Living Services (ILS), is to prevent and reduce inappropriate institutional care by maintaining or restoring independent living for aged, blind, and disabled individuals who have functional limitations. The program provides services to all eligible individuals in a manner that promotes independent functioning while accommodating the client's changing needs, capabilities and choice. HHS is part of Michigan's overall strategy to increase community-based alternatives. HHS reduces dependence on institutional care settings such as Adult Foster Care and nursing homes. HHS enables functionally limited individuals to live independently and receive care in the least restrictive setting. A physician must certify the need for these activities/services. Services are non-specialized personal care activities provided to Supplemental Security Income/Medicaid recipients who meet HHS eligibility requirements. Executive Order 97-5, signed on March 21, 1997, transferred the policy and financial management functions related to HHS and Physical Disability Services to the Department of Community Health (DCH) as part of the overall Medicaid restructuring initiative and the movement to managed care. DHS remains responsible for the delivery of in-home personal care services through a network of local office Adult Services staff. DHS continues to determine eligibility, assess the need for personal care, and process payments to providers. HHS program administration is completed in partnership with DCH. The HHS program is the largest Medicaid long-term care program in the state.

AGE OF HOME HELP RECIPIENTS (Average Age Distribution Trend)	
AGE	PERCENT
0-20	1.5%
21-30	8.4%
31-40	9.9%
41-50	16.9%
51-64	24.6%
65-74	18.3%
75-84	15.4%
85-94	4.5%
95+	0.5%
TOTAL	100.0%

Individuals and some private or public agencies provide HHS. Personal care services eligible for funding include:

Activities of Daily Living (ADL)		
• Eating	• Dressing	• Mobility Assistance
• Toileting	• Grooming	• Transferring
• Bathing		

Instrumental Activities of Daily Living (IADL) Must have an ADL in order to receive IADL Services, effective 10-1-2011	
• Taking Medication	• Housework
• Shopping/Errands	• Meal Preparation/Cleanup
• Laundry	

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Local Office Staff and Operations	Program: Home Help Services or Independent Living Services

SOURCES OF FINANCING

- Title XIX of the Social Security Act (Medicaid).¹
- State funds.

LEGAL BASIS

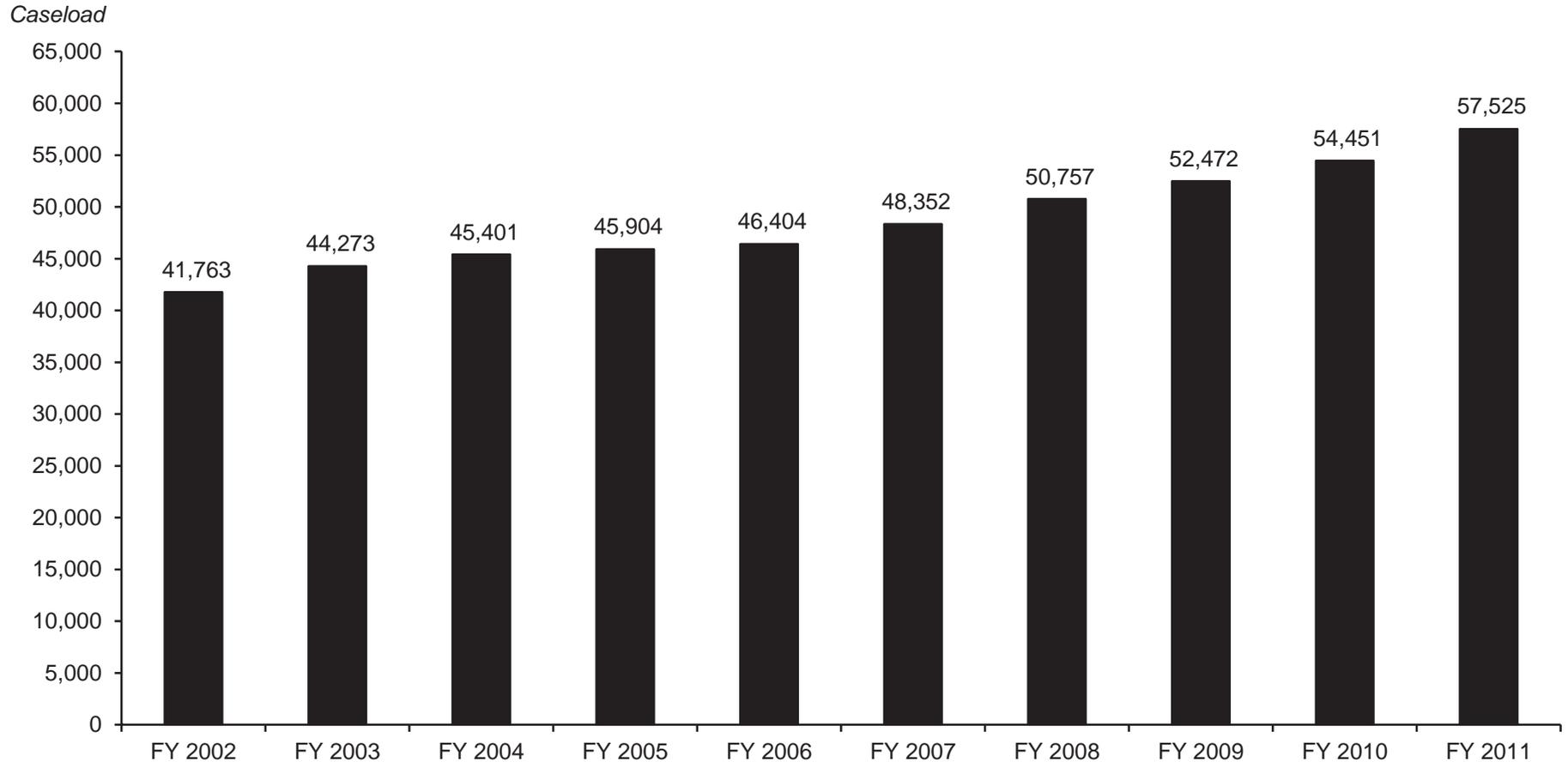
- Social Welfare Act, 1939 PA 280, Section 400.6 and 400.10
- Title XIX of the Social Security Act
- Michigan Administrative Rules 400.1101 – 400.1110
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X
- DCH FY 2012 Appropriations Act, 2011 PA 63, Article IV

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

HHS serves a rapidly increasing number of elderly and disabled adults in independent settings. Within HHS, the Independent Living Services (ILS) caseload continues to grow, increasing 38 percent since FY 2002, while Adult Services staff dropped 39 percent. There were 66,687 unduplicated clients served in FY 2011 by 284 adult services workers. Home help services cost an average \$402 a month to maintain client services in independent living settings. The 66,687 clients served in FY 2011 represent about 62 percent of the long-term care Medicaid clients in Michigan. It costs an average of \$4,213 per month for services to a client residing in a nursing home. This represents 30 percent of the long-term care Medicaid clients in Michigan. Clients in the Home Help Program receive services paid by Medicaid, which allows them to receive services in their own residences and enables them to age in place.

¹ *The federal Medicaid program participates in the cost of direct service payments and the cost of case management services provided by DHS Adult Services workers at the federal match rate.*

DEPARTMENT OF HUMAN SERVICES HOME HELP CASELOAD FY 2002 - FY 2011



Note: The average monthly number of Home Help cases increased 38 percent from FY 2002 to FY 2011. Further increases are expected as Michigan's population continues to age. As of November 2011 there were more than 161,700 Michigan residents on Medicaid (over age 60) who could potentially apply for Adult Services. Of concern is that staffing and client ratios continue to grow in opposite directions. HHS staff report caseloads have increased 38 percent since FY 2002, while staffing to provide services dropped 29 percent over the same period.

Department:
Human Services

Appropriation Unit:
Executive Operations

Program:
Michigan Community Service Commission

PROGRAM STATEMENT

The Michigan Community Service Commission (MCSC) builds a culture of service by providing vision and resources to strengthen communities through volunteerism. In FY 2012, the MCSC will grant nearly \$8 million in federal funds to local communities for volunteer programs and activities. These federal funds are helping financially struggling nonprofit organizations and schools meet the growing social need in communities through service and volunteerism. The MCSC funds 24 AmeriCorps programs and seven Volunteer Generation Fund grantees. The Governor's Service Awards and Mentor Michigan are also MCSC programs. In FY 2012, the GF/GP investment is expected to leverage more than \$12 million in federal funds. A 25-member board appointed by the governor oversees the MCSC. The MCSC maintains Michigan's position as one of the country's leading state service commissions.

- **Michigan's AmeriCorps:** AmeriCorps is a competitive grant program for organizations to host teams of individuals, called members, who provide intensive, results-driven service to meet community needs across Michigan. In FY 2012, more than 1,100 AmeriCorps members will provide foreclosure prevention and financial literacy education, help ex-offenders re-enter society, help homeless individuals and families find permanent housing, organize literacy and tutoring programs for underperforming youth, mentor and support youth from disadvantaged circumstances, preserve our environment, build houses, feed the hungry, recruit volunteers, and more. Members must be at least 17 years old and commit to at least one year of service, full or part-time. In return, members receive a modest living stipend and an education award. In FY 2012, AmeriCorps members will earn an estimated \$3.5 million in education awards to pay for college, vocational training programs, or to repay student loans. AmeriCorps serves as a pathway to employment for many members. During their year of service, members develop specific, job-related skills and participate in many networking opportunities that often lead to full-time employment.
- **Volunteer Michigan:** Volunteer Michigan is a new statewide initiative that facilitates the increased recruitment, engagement, and tracking of volunteers to address key issues in communities across Michigan. It increases the capacity and infrastructure of organizations to more effectively engage volunteers, including those from specific population groups such as adults age 55 years and older and skilled volunteers. Volunteer Michigan is a direct result of the April 2009 Edward M. Kennedy Serve America Act and its goal of increasing volunteerism through strategies including the Volunteer Generation Fund. The Volunteer Michigan initiative currently provides funding to seven Michigan grantees that are test piloting a series of volunteer strategies to address local public health or public safety issues. These seven demonstration grantees will be used to help Volunteer Michigan build a best practices model for the rest of the state that will support volunteers and community partners, and meet local needs by engaging citizens.
- **Mentor Michigan:** Mentor Michigan supports more than 250 mentoring organizations. These organizations match caring adults with young people in need of role models. Mentor Michigan strengthens those organizations through training, research, and partnerships with businesses, faith-based and nonprofit organizations, schools, colleges and universities, and government. Mentor Michigan also elevates public awareness of the positive impact of mentoring and the need for more quality mentors.
- **Governor's Service Awards:** The Governor's Service Awards honor and celebrate Michigan citizens who volunteer their time to make communities better places to live. Since 1994, governors have recognized Michigan's outstanding volunteers. The annual celebration includes a private reception hosted by the governor followed by an awards presentation. The awards are given in eight categories highlighting the diverse nature of volunteers in our state. People from across Michigan nominate their friends, colleagues, family, and neighbors for these prestigious awards.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Executive Operations	Program: Michigan Community Service Commission	

- Volunteer Recruitment and Promotion: The MCSC is the lead state agency in volunteer recruitment and promotion efforts. The MCSC works with partners to recruit volunteers and promote volunteer efforts through the Martin Luther King, Jr. National Day of Service, Global Youth Service Day, and the September 11 National Day of Service and Remembrance – among others.
- Disaster Response: The MCSC is also responsible for recruiting and coordinating volunteers in times of disaster. It works closely with DHS and emergency management personnel to coordinate these efforts.

SOURCES OF FINANCING

- Federal Corporation for National and Community Services.
- AmeriCorps, Program Development and Training, Disability, Volunteer Generation Fund, and Commission Administration grants.
- Private donations.
- State funds.

LEGAL BASIS

- The MCSC was established by Executive Order in 1991
- Michigan Community Service Commission, 219 PA 1994
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS / RESULTS:

- The MCSC granted nearly \$9 million in federal funds to local communities for volunteer programs and activities in FY 2011.
- Michigan's AmeriCorps: In the 2011 program year, Michigan's AmeriCorps members accomplished more than 835,000 service and training hours; members recruited, placed, and supported more than 19,000 community volunteers; members also earned more than \$3 million in education awards.
 - Members provided more than 4,572 individuals with services related to housing and foreclosure assistance; including connecting them to various resources that allowed them to remain in their homes.
 - Other members assisted more than 4,320 children in tutoring and/or literacy services – with a high percentage of those children showing an increase in academic skills as a result of this service.
 - Some Michigan's AmeriCorps members facilitated pro-social activities for nearly 307 formerly incarcerated individuals. Those individuals conducted nearly 100 service projects related to neighborhood revitalization. More than 3,800 individuals received job training or other skill-building services and more than 2,300 individuals received placement services.

Department:
Human Services

Appropriation Unit:
Executive Operations

Program:
Michigan Community Service Commission

- Mentor Michigan: More than 250 mentoring programs were supported through awareness building, mentor recruitment, partnership development, training, and recognition; there are more than 17,500 active mentors in Michigan, more than double the number since FY 2004; Michigan mentoring programs reported more than 23,500 children were matched with a caring adult.
 - Young people who participate in mentoring relationships often experience long-term benefits and face better outcomes in the following areas: educational attainment and the desire to complete high school and attend college, future employment and community engagement, good mental health that leads to higher self-esteem and life satisfaction, and reduced presence of problem behavior and criminal offending.
- Volunteer Michigan: By granting \$486,913 in FY 2011 to seven demonstration grantees, Volunteer Michigan was able to pilot service as a strategy to address local health and public safety issues while involving nearly 7,750 participants in various volunteer programs and projects throughout the state.
 - Volunteer Michigan capitalizes on specific strategies to increase volunteerism in the state, including National Days of Service. In addition, Volunteer Michigan and its grantees establish community collaboratives to improve the use of volunteers and leverage resources, use technology to enable full-cycle volunteer engagement and management, and offer critical training and capacity-building for volunteer connector organizations to enhance their work.
- Volunteering is critical to Michigan. As part of the most recent Volunteering in America research, the following findings were announced:
 - In 2010, nearly 2.2 million volunteers in the state dedicated nearly 200 million hours of service to their communities. Their efforts equated to a monetary contribution of more than \$5.7 billion. Michigan ranks 26th among the 50 states and District of Columbia with an average of 28.1 percent of citizens volunteering. The national volunteer rate during the same time frame was 26.3 percent. Michigan ranked 30th for having an average of 33.9 volunteer hours per resident per year. Meanwhile, the average national volunteer hours per-resident was 25.6 hours. These volunteers' efforts are widespread and impact a variety of individuals and/or organizations. The top four activities of volunteers in Michigan included fundraising (27.7 percent), collecting/distributing food (25.9 percent), performing general labor (23.2 percent), and mentoring youth (18.8 percent).

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Local Office Staff and Operations	Program: Migrant Affairs

PROGRAM STATEMENT

DHS has been designated as the lead state agency responsible for the assessment, development and coordination of services for Michigan's 45,800 Migrant and Seasonal Farmworkers, their family members and dependents. The total number of Migrant and Seasonal Farmworkers, family and dependents is estimated to total more than 90,000. DHS responsibilities are accomplished through the Office of Migrant Affairs (OMA). OMA provides a quick-response, human services safety net through a DHS staff of more than 60 seasonal and full-time bilingual (English/Spanish) workers. These staff/workers are housed in 23 counties, with some offices serving more than one county.

OMA enhances the delivery of DHS services to Migrant families by:

- Analyzing, recommending and advocating improvements in DHS program policies and procedures that affect Migrant families.
- Coordinating the allocation, recruitment, testing, hiring and training of DHS bilingual (English/Spanish) Migrant program seasonal and year-round staff.
- Advocating on behalf of Migrant families.

OMA facilitates statewide coordination of Migrant services through the:

- Michigan Interagency Migrant Services Committee (IMSC): This committee consists of representatives from major state and federal departments and private agencies providing services to Migrant and Seasonal Farmworkers. The committee meets monthly to coordinate services, analyze data, identify and take appropriate action on unmet needs, and to formulate recommendations on Migrant and Seasonal Farmworker issues.
- Regional Migrant Resource Councils (MRC): OMA established a network of nine councils. It is comprised of local representatives from public and private Migrant service agencies, growers, farmworkers, church groups and concerned citizens who meet regularly to exchange program information, coordinate services and identify unmet needs.

Client Characteristics

- Population (estimate): More than 90,000 Migrant Farmworkers, non-working family members and dependents. Michigan has the sixth-largest migrant worker population in the nation (behind California, Texas, Florida, Washington and North Carolina). Michigan has previously ranked among the top five states.
- The Migrant and Seasonal Farmworker student population is broken down as: 30.5 percent from Florida, 26.3 percent from Texas, 19.6 percent from Michigan, and the remaining 23.6 percent from other states and countries.
- It is estimated that there are more than 41,000 children and youth younger than 20 years of age (30,764 are from Migrant families and 10,274 are from Seasonal Farmworker families).
- In 2011, DHS programs were provided to more than 11,778 individual Migrant and Seasonal Farmworkers and family members. Food Assistance, Medicaid, and Child Day Care were the most common DHS programs used by Migrant and Seasonal Farmworkers.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Local Office Staff and Operations	Program: Migrant Affairs

SOURCES OF FINANCING

- United States Department of Agriculture Food Stamp Act of 1977
- Social Security Act Title XX (Child Care and Basic Social Services)
- Social Security Act Title XIX (Medicaid Program)
- Community Services Block Grant Program Act 1991
- Title VI of the Omnibus Budget Reconciliation Act of 1981 – PL 97-35

LEGAL BASIS

- Federal Social Security Act
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES (FY 2010)

- OMA worked with various policy offices to address policy that adversely affects Migrant and Seasonal Farmworker families.
- OMA worked with a Leadership Academy Team to review and make recommendations to improve client services to Migrant and Seasonal Farmworker families who are eligible for DHS services.
- OMA chaired the DHS Bilingual Work Group. This group worked form recommendations to DHS to improve the recruitment, employment, and retention of bilingual employees that will ultimately improve services to Limited English Proficiency clients.
- OMA gave multiple presentations at various DHS county offices, community events, conferences, and agencies about Michigan’s Migrant and Seasonal Farmworker population.
- OMA chaired 11 monthly IMSC meetings at various locations in Michigan.

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES (Ongoing)

- The IMSC has active working groups that address migrant housing, migrant children, and the annual farm worker conference, etc.
- The IMSC is actively working in partnership with the Michigan Department of Civil Rights to address the recommendations from the MDCR Commission released in the summer of 2009.
- The IMSC has voted and passed a five-year strategic plan.
- The Migrant Child Task Force conducted six outreach visits to various Migrant Labor Camps located across the state. Outreach successes included giving out basic needs such as diapers, wipes, booster seats, car seats, blankets, more than 200 pairs of shoes, resource bags, and many other supplies.
- OMA works with nine Migrant Resource Councils across the state that plan pre-season conferences and events for Migrant and Seasonal Farmworker families, provide resources, and referrals at a community level.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department of Human Services	Appropriation Unit Local Office Staff and Operations	Program Native American Affairs

PROGRAM STATEMENT

The Office of Native American Affairs (NAA) consists of one full-time employee who serves as the department’s avenue to comply with federal and state requirements for consultation with American Indian tribes regarding all state plans, programs, legislative changes, and policy changes that impact North American Indian children and families per the 1994 amendments of the Social Security Act, Presidential Memorandum 2009 (Tribal Consultation), and Governor Granholm’s Executive Directive 2004-5.

NAA delivers a broad range of services to Michigan’s approximate 130,000 American Indian population and DHS field staff including, but not limited to: policy and program development, resource coordination, advocacy, training and technical assistance, coordination of efforts to ensure implementation of applicable state and federal laws (including the federal Indian Child Welfare Act (ICWA) pertaining to Native Americans, and tribal consultation. Service elements include:

- Native American Affairs (NAA), located in the Department of Human Services, Central Office.
- Indian Outreach Services (IOS), 12 Indian Outreach Workers (IOWs) located in county offices across the state.

In addition, Native American Affairs coordinates statewide efforts and collaborates with other state entities to ensure the safety, permanency, and well-being of Indian children and families in Michigan, including:

- Tribal State Partnership (TSP) – A collaborative body of Tribal Social Service Directors, urban Indian organizations, state/private agencies; and DHS staff focusing on Indian child welfare and the implementation of the Indian Child Welfare Act (ICWA) of 1978.
- Urban Indian State Partnership (UISP) – A collaborative body of urban Indian organizations, tribal representatives, state/private agencies; and DHS staff focusing on the unique challenges facing tribal at-large membership and point-of-entry for DHS services.
- Michigan Tribal Child Care Task Force – A collaborative body of Tribal Child Care and Tribal Education Directors and DHS staff working to ensure Zero to Three, Great Start, and pathways to success for young children and adults.
- Regional Indian Outreach Worker Meetings – Indian Outreach Worker (IOW) forum to provide cohort updates and professional development.
- Child Welfare Training Institute – Assists training department with ICWA training for new Child Welfare and supervisory staff.
- State Court Administrator’s Office (SCAO), Court Improvement Program (CIP), Statewide Task Force and ICWA Subcommittee Member – Advocating on behalf of tribal families.

SOURCES OF FINANCING:

- Title XX Social Services Block grant.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department of Human Services	Appropriation Unit Local Office Staff and Operations	Program Native American Affairs

LEGAL BASIS:

- Federal Indian Child Welfare Act of 1978, Public Law 95-608
- Federal Indian Child Protection and Family Violence Protection Act, Public Law 101-630
- Michigan Juvenile Court Rules-subchapter 3.980
- Presidential Memorandum on Tribal Consultation (2009) <http://www.whitehouse.gov/the-press-office/memorandum-tribal-consultation-signed-president>
- Governor Granholm Executive Directive 2004-5 (<http://www.michigan.gov/americanindians>)
- DHS FY 2012 Appropriation Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS:

Quality assurance for Native American Affairs (NAA) is measured on an ongoing basis for cultural competency and customer service using tribal consultation, stakeholder surveys, meetings and Indian Child Welfare Training evaluations. Federal and state ICWA compliance is assessed through CWTI and ICWA training exams, child welfare case reviews, CFSR and Title IV-E reporting, and Tribal Consultation Agreements.

NAA program effectiveness is based on levels of technical assistance and training provided to ensure program compliance with the Indian Child Welfare Act (ICWA) and related reductions in barriers to DHS services, including: cash assistance, emergency preparedness, child care, dropout prevention, adult services, Medicaid, and child welfare (for tribes, Indian organizations, and tribal families in Michigan).

In the fourth quarter of FY 2011, nearly 200 American Indian children were in care across child welfare programs (both in-home and out-of-home services), and of those, 46 were eligible for adoption.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2013
Department: Human Services	Appropriation Unit: Community Action & Economic Opportunity	Program: Weatherization Assistance

PROGRAM STATEMENT

The goal of the Weatherization Assistance Program (WAP) is to assist low-income households with reducing their energy consumption and lowering their energy bills. Michigan's WAP is a federally funded, residential energy conservation program. The program provides free home energy conservation services to eligible Michigan homeowners and renters. Community Action Agencies (CAAs) and one Limited Purpose Agency (LPA) provide weatherization services at the local level throughout the state. Michigan's 30 CAAs and one LPA serve all 83 counties. CAAs are listed on the following page.

SOURCES OF FINANCING

- Federal Department of Energy Weatherization Assistance Program funds.

LEGAL BASIS

- Weatherization Assistance Program for Low-Income Persons, Title 10, Part 440
- DHS FY 2012 Appropriations Act, 2011 PA 63, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

Weatherized homes typically realize a 20 percent to 25 percent reduction in energy bills. This results in savings of about \$300 per year, per household. In the 2010 program year¹, just over 2,400 low-income Michigan households received weatherization services. Services provided may include wall insulation, attic insulation and ventilation, foundation insulation, air leakage reduction, smoke detectors, dryer venting, furnace repair/replacement, water heater repair/replacement, combustion appliance testing, and energy conservation education. To date, over 293,000 low-income homes have been made more energy-efficient.²

¹ The U.S. Department of Energy program year runs April 1 through March 31.

² For the past nine years, the governor of Michigan proclaimed October 30 as "Weatherization Day."

Agency	Community Served
Alger-Marquette Community Action Board.....	Alger, Marquette
Allegan County Resource Development Committee, Inc.	Allegan
Area Community Services Employment and Training Council.....	Kent
Baraga-Houghton-Keweenaw Community Action Agency, Inc.	Baraga, Houghton, Keweenaw
Capital Area Community Services, Inc.	Clinton, Eaton, Ingham, Shiawassee
City of Detroit, Department of Human Services	City of Detroit
Chippewa-Luce-Mackinac Community Action and Human Resources Authority, Inc.	Chippewa, Luce, Mackinac
Community Action Agency of South Central Michigan.....	Barry, Branch, Calhoun, St. Joseph
Community Action Agency of Jackson, Lenawee, Hillsdale.....	Hillsdale, Jackson, Lenawee
Dickinson-Iron Community Services Agency	Dickinson, Iron
Downriver Community Conference	Various Wayne county areas
Economic Opportunity Committee of St. Clair County	St. Clair
Eight CAP, Inc.	Gratiot, Ionia, Isabella, Montcalm
Five CAP, Inc.	Lake, Manistee, Mason, Newaygo
Genesee County Community Action Resource Department.....	Genesee
Gogebic-Ontonagon Community Action Agency.....	Gogebic, Ontonagon
Human Development Commission	Huron, Lapeer, Sanilac, Tuscola
Kalamazoo County Community Action Bureau	Kalamazoo
Macomb County Community Services Agency	Macomb
Menominee-Delta-Schoolcraft Community Action Agency and Human Resource Authority	Delta, Menominee, Schoolcraft
Mid-Michigan Community Action Agency, Inc.	Bay, Clare, Gladwin, Mecosta, Midland, Oscoda
Monroe County Opportunity Program	Monroe
Muskegon-Oceana Community Action Against Poverty, Inc.....	Muskegon, Oceana
Northeast Michigan Community Service Agency	Alcona, Alpena, Arenac, Cheboygan, Crawford, Iosco, Montmorency, Ogemaw, Oscoda, Otsego, Presque Isle
Northwest Michigan Community Action Agency.....	Antrim, Benzie, Charlevoix, Emmet, Grand Traverse, Kalkaska, Leelanau, Missaukee, Roscommon, Wexford
Oakland Livingston Human Services Agency	Livingston, Oakland
Ottawa County Community Action Agency	Ottawa
Saginaw County Community Action Committee, Inc.....	Saginaw
Southwest Michigan Community Action Agency	Berrien, Cass, Van Buren
Washtenaw County Human Services Department.....	Washtenaw
Wayne Metropolitan Community Action Agency	County of Wayne, excluding City of Detroit

